



health

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Health  
North West Provincial Government  
REPUBLIC OF SOUTH AFRICA

BUILDING A  
NORTH WEST PROVINCE  
THAT WORKS ALL

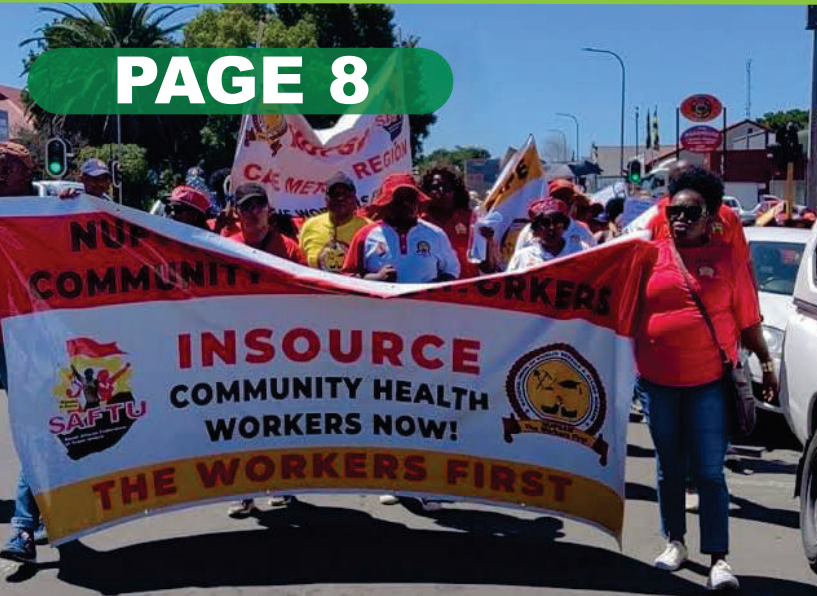


# BOITEK NELO

Lokwalo-dikgang la Semmuso la Iefapha la Boitekanelo

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## OVER ONE HUNDRED MEDICAL STAFF RECRUITED TO STRENGTHEN HEALTH SERVICE DELIVERY IN BOJANALA



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**B**oitekanelo External Newsletter The North West Department of Health continues to take deliberate and measurable steps to strengthen the delivery of quality, accessible and people-centred health services across our province.

In this edition of Boitekanelo, we reflect on critical milestones that demonstrate our commitment to improving healthcare outcomes - from the recruitment of over one hundred medical professionals to reinforce service delivery in Bojanala, to the expansion of infrastructure through new clinics and additional ambulances. These interventions are not isolated achievements; they form part of a broader, coordinated effort to ensure that communities, particularly those in rural and underserved areas, receive timely and dignified care.

We also highlight the important work being done at Witrand Specialised Hospital and the Department's confirmation of staff absorption processes, which bring stability and continuity within our workforce. Human capital remains the backbone of our health system. By investing in healthcare professionals and empowering young people - such as the 30 youths drawn from across the province - we are building a sustainable pipeline of skills and leadership for the future. At the same time, advancements such as the rollout of Lenacapavir and ongoing progress in implementing the National Health Insurance (NHI) demonstrate our resolve to modernise healthcare and expand equitable access to life-saving treatment.

Public education and awareness remain central to the success of these initiatives. Through platforms such as the Tshela ka Itsekanelo Healthy Lifestyle Campaign and the reinforcement of the Patient Rights Charter, the Department continues to empower residents with knowledge that encourages responsible health-seeking behaviour, prevention of disease, and mutual accountability between communities and healthcare providers.

A well-informed public is better positioned to make healthy lifestyle choices, adhere to treatment, respect health facilities, and safeguard public resources. Equally, our public warning notices underscore the importance of vigilance and responsible conduct to protect both patients and the integrity of the health system.

As we advance the implementation of the NHI and strengthen service delivery across the province, partnership with communities remains essential. Healthcare transformation is not the responsibility of government alone - it requires active citizen participation, awareness, and shared responsibility.

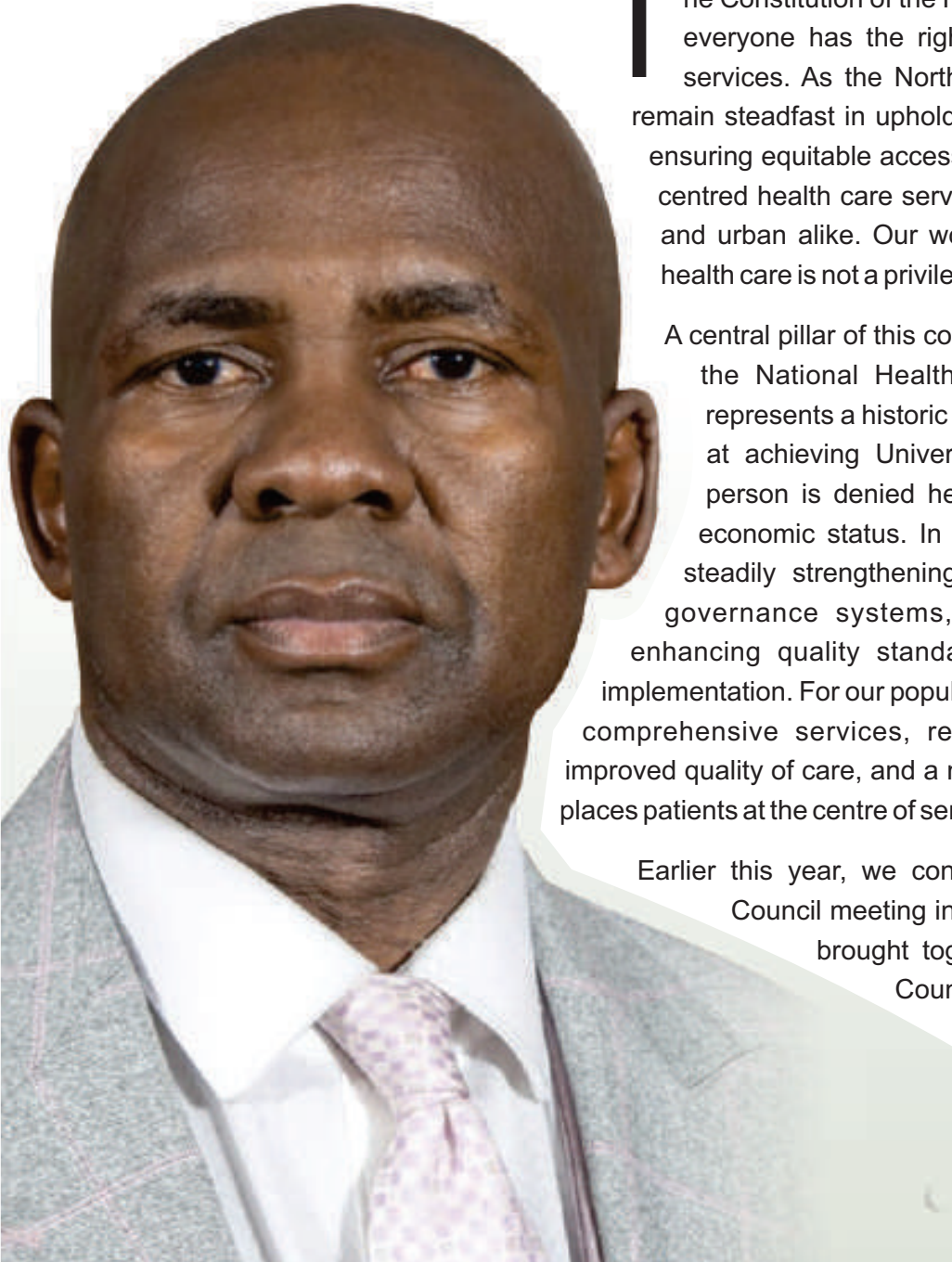
Through ongoing communication, transparency, and education, we aim to build a health system that is trusted, responsive, and resilient. Boitekanelo continues to serve as a bridge between the Department and the people of North West, ensuring that progress is not only achieved, but understood and supported by the communities we serve.

**Yours,**  
**TL**



**Tebogo Lekgethwane**

# MEC FOREWORD



**MEC for Health Sello Lehari**

**T**he Constitution of the Republic of South Africa affirms that everyone has the right to have access to health care services. As the North West Department of Health, we remain steadfast in upholding this constitutional mandate by ensuring equitable access to quality, affordable and people-centred health care services for all our communities - rural and urban alike. Our work is guided by the principle that health care is not a privilege, but a fundamental human right.

A central pillar of this commitment is the implementation of the National Health Insurance (NHI) Act. The NHI represents a historic reform of our health system, aimed at achieving Universal Health Coverage so that no person is denied health care because of their socio-economic status. In the North West Province, we are steadily strengthening primary health care, improving governance systems, upgrading infrastructure, and enhancing quality standards in preparation for full NHI implementation. For our population, this means greater access to comprehensive services, reduced out-of-pocket expenses, improved quality of care, and a more integrated health system that places patients at the centre of service delivery.

Earlier this year, we convened the first Provincial Health Council meeting in Ganyesa. This important platform brought together Members of the Executive Council, Mayors, senior officials and key stakeholders to review progress on health policies and programmes. The Council deliberated on the implementation of the NHI, district health system strengthening, infrastructure delivery, financial management, and the improvement of patient experience. Such engagements

reinforce accountability, transparency and cooperative governance, ensuring that all spheres of government work together to advance the health agenda of our province.

# MEC FOREWORD

## CONTINUED

We are fully aware of the challenges posed by shortages of health professionals, particularly in high-demand districts. To address this, the Department has recruited over one hundred medical professionals to strengthen service delivery in the Bojanala District. This intervention will improve patient waiting times, enhance clinical care, and ensure that communities receive timely and appropriate treatment. Investing in human resources for health is essential if we are to realise the goals of the NHI and deliver sustainable quality care.

Prevention remains better than cure. I recently had the privilege of leading the Tshela ka Itsekanelo Healthy Lifestyle Campaign alongside the 1.1 Million Close the Gap HIV Treatment Campaign. These initiatives are critical in tackling the burden of non-communicable diseases, promoting healthier lifestyles, and accelerating progress toward ending HIV as a public health threat. Through Tshela ka Itsekanelo, we encourage communities to adopt balanced diets, engage in physical activity, avoid harmful substance use, and prioritise regular health screenings. The Close the Gap Campaign focuses on ensuring that individuals living with HIV initiate and remain on treatment, thereby improving life expectancy and reducing transmission.

However, government cannot succeed alone. Communities, traditional leaders, civil society organisations, faith-based institutions, and health professionals all have a vital role to play. We call upon every stakeholder to support testing, treatment adherence, healthy living, and stigma reduction. Collective responsibility is the cornerstone of sustainable public health outcomes.

In line with our commitment to improving health infrastructure, I have undertaken several oversight visits to hospitals, community health centres and clinics across the province. These visits allow us to monitor progress, identify bottlenecks, and ensure that projects are completed on time and within budget. Infrastructure development is not merely about buildings; it is about creating safe, dignified and functional spaces where quality care can be delivered. Where there is clear evidence of poor contractor performance and lack of progress, we will not hesitate to enforce contractual obligations, including termination where necessary. Public resources must be safeguarded, and communities deserve facilities that are completed without undue delays. At the same time, we are prioritising maintenance of existing facilities to ensure they remain operational, safe and responsive to the needs of the people.

The delivery of quality health services requires joint, collective and collaborative effort. National, provincial and local government, organised labour, professional councils, community structures, and the private sector must work together in partnership. The successful implementation of the NHI, strengthening of primary health care, and improvement of health outcomes depend on unity of purpose and shared accountability.

In closing, I wish to express my heartfelt appreciation to all health care workers - doctors, nurses, pharmacists, allied health professionals - as well as hospital managers, administrative staff, support services personnel, and every employee of the Department. Your dedication, compassion and resilience continue to sustain our health system even in challenging circumstances. You are the backbone of service delivery and the custodians of hope for our communities.

Together, let us continue building a health system that is accessible, equitable and of the highest quality - a system that truly leaves no one behind.

# OVER ONE HUNDRED MEDICAL STAFF RECRUITED TO STRENGTHEN HEALTH SERVICE DELIVERY IN BOJANALA

By Tshegofatso Mothibedi



MEC Sello Lehari addressing the newly appointed health professionals at JST Hospital.

**R**USTENBURG — North West MEC for Health, Mr. Sello Lehari, began the year by welcoming 101 newly appointed healthcare professionals during an official visit to Job Shimankana Tabane (JST) Hospital in Rustenburg. The visit also included a thorough assessment of the hospital's performance, infrastructure needs, service delivery improvements, and operational challenges.

The new cohort of healthcare professionals includes 48 medical interns, 24 community service medical doctors, four community service radiographers, two occupational therapists, two dietitians, two physiotherapists, 12 nursing assistants, three community service nurses, two

environmental health practitioners, and two speech and audiology therapists. These appointments are expected to strengthen both clinical and support services at the hospital.



JST Hospital's new cohort of health professionals.



Located in the Bojanala Platinum Health District—the province's third-largest district in geographic size—JST Hospital serves a population of over 2.1 million people across the local municipalities of Kgetlengrivier, Madibeng, Moretele, Moses Kotane, and Rustenburg. Founded in 1923 and renamed in 2008 in honor of ANC activist Job Shimankana Tabane, the hospital is one of only two tertiary hospitals in the North West Province. JST provides Level 1, Level 2, and selected Level 3 services, with 440 open beds and an additional 68 Public-Private Partnership (PPP) beds.

Addressing the new healthcare professionals, MEC Lehari emphasized the importance of commitment, professionalism, and patient-centered care.

“We warmly welcome all the newly appointed healthcare professionals to the North West Department of Health. Your presence strengthens our capacity to deliver quality healthcare, and we expect you to serve our communities with dedication, compassion, and professionalism,” MEC Lehari said.

During the hospital assessment, MEC Lehari commended management and staff for achievements including reductions in maternal mortality, renovations of wards 3 and 4, installation of medical air in neonatal and paediatric units, increased ICU bed capacity, and expanded

outreach services to district hospitals. He also highlighted the appointment of an Operational Programme Manager for the obstetrics unit as a critical intervention.

Despite these successes, MEC Lehari acknowledged ongoing challenges, including space constraints, ageing furniture, staffing delays, and budget limitations. Priority infrastructure needs include upgrading the obstetric theatre, renovating the maternity obstetric unit, establishing a 24-hour Gateway Clinic, developing a fully fledged Mother Lodger Facility, insourcing the CTOP Clinic, and implementing the 206-bed capacity expansion project.

“While progress has been made, we are decisively addressing the challenges facing Job Shimankana Tabane Hospital. The department will intensify engagements with the Chief Financial Officer, strengthen specialist nurse training, explore collaborative partnerships, and accelerate staffing processes to ensure sustainable service delivery,” MEC Lehari said.

He further noted that lean management practices, interdepartmental collaboration including with Correctional Services and private training institutions including continued engagement on funding solutions will form part of the department's response to operational and budgetary pressures. The North West Department of Health remains committed to strengthening tertiary healthcare services, supporting healthcare professionals, and improving health outcomes for communities served



# WITRAND SPECIALISED HOSPITAL PHARMACY RECOGNISED FOR EXCELLENCE IN MEDICINE AVAILABILITY

By Nico Masiu



**T**he Pharmacy Department at Witrand Specialized Hospital has been recognised as one of the top-performing departments within the North West Department of Health, reflecting its sustained commitment to quality healthcare delivery and medicine availability.

Witrand Specialised Hospital Pharmacy further cemented its reputation for excellence by receiving a trophy and certificate at the Branch Pharmacy Conference. The award was presented in the category of Overall Medicine Availability within the North West Department of Health.

Through consistent dedication and teamwork, the Witrand Specialised Hospital pharmacy team has played a leading role in ensuring the continuous availability of essential medicines across the province. Their efforts have ensured that patients have reliable access to critical medication, reinforcing the hospital's mission to provide equitable and efficient healthcare services.

On behalf of the pharmacy staff, the Chief Executive Officer, Mrs M.E. Mpolokeng, received the award at the conference. Expressing her appreciation, she stated that the recognition is a testament to the commitment and hard work of the pharmacists and support staff. She noted that unity of purpose and a shared goal of ensuring reliable access to medicines for all patients continue to drive the hospital's success. She added that the award serves as motivation to further strengthen the delivery of quality healthcare services.

During routine hospital inspections, the Witrand Pharmacy Department consistently achieved scores above 95 percent in the second quarter of the 2025/2026 financial year, positioning it as one of the strongest-performing departments within the hospital.

The recognition follows months of rigorous stock management, staff development initiatives, and close collaboration with regional health authorities. As a result, Witrand Specialized Hospital Pharmacy continues to set a high standard for excellence in medicine supply and patient care.

Earlier this year, on 14 February 2025, the Minister of Health, Honourable Dr Aaron Motsoaledi, announced the introduction of the Six-Month Multi-Month Dispensing (6MMD) Programme. This initiative is a significant advancement for patients living with chronic conditions, as it allows eligible patients to receive a six-month supply of medication instead of visiting healthcare facilities monthly.

The 6MMD programme forms part of government's broader efforts to improve access to treatment, enhance patient retention in care, reduce congestion at healthcare facilities, and minimise long waiting times. By decreasing the frequency of clinic visits, the programme is expected to significantly ease pressure on hospitals and clinics while improving patient convenience and overall wellbeing.

With improved medicine management, distribution systems, and high levels of medicine availability across the province, the North West Department of Health is now better positioned to ensure adequate access to medication compared to previous years.

Under the 6MMD programme, patients will only need to visit healthcare facilities twice a year for medication collection. This approach reduces waiting times, limits unnecessary visits, and allows patients to continue with their daily activities without frequent disruptions. Patients may still attend healthcare facilities for consultations when unwell, rather than for routine medicine collection.

The achievements at Witrand Specialized Hospital reflect the department's ongoing commitment to providing quality healthcare services for all. Highlights from the North West Department of Health Pharmacy Month Recognition Awards include:

- **Branch Pharmacy Overall Medicine Availability:**  
JB Marks Sub-District
- **Special Award for Continuous Learning/Research Project:**  
Dr Maryke Strydom
- **Best Performing District – TB Medicine Availability:**  
Dr Kenneth Kaunda District
- **Best Performance Overall Medicine Availability:**  
Dr Kenneth Kaunda District

The Six-Month Multi-Month Dispensing Programme has been implemented at selected facilities from 1 August 2025 and is expected to be rolled out to all facilities by 1 April 2026. Patients are encouraged to consult their healthcare providers to determine their eligibility.

# NORTH WEST DEPARTMENT OF HEALTH CONFIRMS PERMANENT ABSORPTION OF COMMUNITY HEALTH WORKERS

By: Keletso Ratlhagane



NW Health department management during a meeting with unions to announce the permanent absorption of CHWs.

**M**ahikeng - The North West Department of Health has confirmed the permanent absorption and formal contracting of all community health workers (CHWs) in the province, following a Labour Court ruling issued in January 2025 on the unlawful use of fixed-term contracts.

The court found that the contracts under which community health workers were employed contravened Section 198B of the Labour Relations Act. In response, the National Department of Health and the National Education, Health and Allied Workers' Union (NEHAWU) reached an agreement to permanently employ 27,000 community health workers nationally.

In the North West province, all 4,563 community health workers now have a confirmed employment status, either through permanent absorption into the public service or through fully standardised contractual arrangements with regulated remuneration.

Of these, 2,564 community health workers who hold a Matric qualification have been permanently absorbed into Level 2 posts, while 1,999 workers without Matric have been fully contracted and are receiving standardised pay. The department has further confirmed full back pay compliance for non-matriculant community health workers across all districts, with R13 million disbursed to eliminate historical financial backlogs.

Health MEC Sello Lehari described community health workers as central to the delivery of primary healthcare and the realisation of universal health coverage.

“Community health workers are the backbone of primary healthcare delivery. Without them, universal health coverage is simply unattainable,” Lehari said. “This process corrects historical injustices and ensures that those who serve our communities with dedication are given the security and dignity of fair employment.”

The Ngaka Modiri Molema (NMM) and Bojanala districts collectively account for 69 percent of the provincial community health worker workforce, with NMM contributing 42.6 percent, followed by Bojanala at 26.5 percent, Dr Kenneth Kaunda at 17.3 percent, and Dr Ruth Segomotsi Mompati at 13.5 percent.

According to the department, 38 community health workers remain outstanding for absorption as they are currently registered as students at various training institutions. Space-holder posts have been created to ensure their seamless absorption upon completion of their studies.

Lehari said the department's focus now extends beyond absorption to the long-term professionalisation of community health workers.

“We are moving decisively from absorption to professionalisation,” he said. “An integrated strategy is guiding this transition, including the development of standard operating procedures, performance agreements, and structured induction tools to support quality service delivery.”

The department is also modernising its health data systems to enable real-time reporting by community health workers, a move Lehari said would strengthen planning and decision-making.

“Modern data systems will allow us to track services in real time and make informed decisions that improve healthcare outcomes for our people,” he said.

The North West Department of Health said the measures form part of broader efforts to strengthen primary healthcare and build a more responsive and equitable public health system across the province.



Permanently employed Community Health Workers from Madibeng District.

# PUBLIC WARNING: SCAM INVOLVING FAKE EMPLOYMENT OFFERS IN THE NORTH WEST DEPARTMENT OF HEALTH



**T**he North West Department of Health has been alerted to a fraudulent scam targeting unemployed doctors and health professionals, including individuals who have recently attended interviews for posts within the Department.

Reports indicate that an individual, falsely claiming to be affiliated with the North West Department of Health and allegedly operating from the Provincial Office in Mahikeng, is making direct phone calls to job seekers and offering permanent employment in exchange for money, with amounts reportedly \*ranging up to R20 000, payable upfront\*.

**The Department wishes to unequivocally state that:**

**X** The North West Department of Health does not charge any fee\* for employment, interviews, placement, or appointment into any post.


**X** No official or employee of the Department is authorised to solicit money\*, favours, or payments of any kind in exchange for employment.


**X** All recruitment processes are conducted transparently\* and through official Departmental channels only.

Members of the public are strongly warned that any request for payment linked to a job offer is a scam and should be treated as a criminal act.


The Department is deeply concerned that the scammer appears to be contacting individuals directly, possibly using information related to recent interviews, and is urging potential victims to act quickly. This is a common tactic used by scammers to pressure victims into making hasty decisions.

**The public, and doctors in particular, are advised to:**

 Not pay any money\* to anyone claiming they can secure employment within the Department.

 Not share personal information\*, banking details, or copies of identification documents.

 Verify all employment-related communication\* through official North West Department of Health platforms.

 Report the matter immediately to the South African Police Service (SAPS)\* if contacted or if money has already been requested or transferred.

The North West Department of Health is treating this matter with seriousness and urges all job seekers to remain vigilant. The Department will continue to communicate through official platforms and encourages the public to share this warning widely to prevent further victimisation.

**BE AWARE**

# 30 YOUTHS FROM ACROSS THE NW HEAD TO CUBA TO STUDY MEDICINE

By: Tshegofatso Mothibedi



MEC Sello Lehari and Departmental management with the Cuba bound medical students.

Johannesburg - Thirty (30) young people aged between 18 and 23 from rural areas across the North West province have landed in the Republic of Cuba after being selected to study medicine under the Nelson Mandela–Fidel Castro (NMFC) Medical Programme.

Their send-off was held at the Radisson Hotel in Kempton Park, Johannesburg on January where MEC for the Department of Health in the North West province Sello

Lehari joined by senior management from the province bade them farewell.

Addressing the gathering, MEC Lehari congratulated the candidates on their selection and reminded them of the responsibility that comes with the rare opportunity afforded to them. “Your selection into this programme is not accidental. You were chosen because of your academic excellence and your potential to change lives. As you go to Cuba, you go as ambassadors of the North West Province and South Africa,” said MEC Lehari.

MEC Lehari confirmed that the NMFC Medical Programme was established to address shortages of doctors in rural and underserved areas, urging the candidates not to forget their roots. “Do not forget where you come from. The communities you leave behind are the same communities that will welcome you back. Upon completion of your studies, you must return and serve where the need is greatest,” MEC advised.

The MEC further encouraged the learners to remain focused, disciplined and committed to their studies, cautioning them against behaviour that could derail their



Chief Director for Corporate Services in the NW Department of Health Dr Madipuo Tlhogane at the farewell dinner hosted in honour of the medical students.



(From left to right) Director: Learning & Development Ms Ouma Kgori, Director: Strategy & Systems Mr Jannie De Beer, Prof Luke with Chief Director: Corporate Services: Dr Madipuo Tlhogane during the send-off ceremony in Johannesburg.

future and the objectives of the programme.

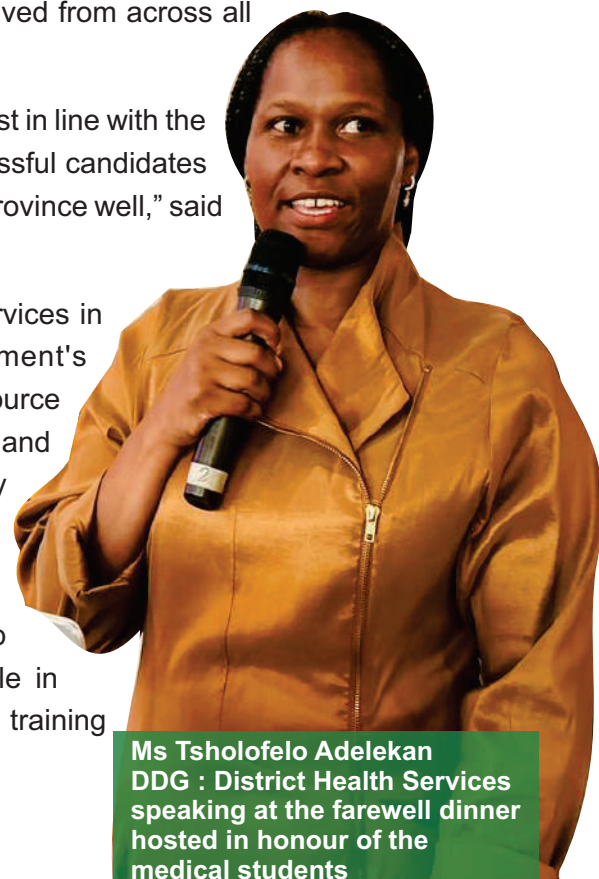
Last year, the province sent 31 students to Cuba to pursue medical studies. This year, 30 learners have been successfully placed in the programme, reflecting the Department's continued commitment to building a sustainable pipeline of medical doctors for the province.

The Programme Coordinator for the Cuban Medical Scholarship, Ms Ouma Kgori, outlined their rigorous selection process, noting that hundreds of applications were received from across all four districts.

“This was a difficult process as it meant that we had to select the best in line with the criteria. “We are happy with the outcome because all of the successful candidates meet the criteria, hence I am confident that they will represent the province well,” said Kgori.

Acting Deputy Director-General for Hospitals and Specialised Services in the province, Professor Binu Luke, reaffirmed the Department's commitment to strengthening the health system through human resource development. “The Department is working hard to produce doctors, and these young people are part of that commitment. They must be ready to come back to work in our hospitals, where our patients need them the most,” said Prof Luke.

The NMFC Medical Programme, rooted in the historic partnership between South Africa and Cuba, continues to play a critical role in improving access to healthcare, particularly in rural areas, by training doctors who understand the challenges faced by their communities.



Ms Tsholofelo Adelekan DDG : District Health Services speaking at the farewell dinner hosted in honour of the medical students

# AMBULANCES AND NEW CLINIC TO BOOST HEALTH SERVICES IN UITKYK AND MOSES KOTANE SUB-DISTRICT

By: Tshegofatso Mothibedi



MEC Sello Lehari inspects one of the assistive devices to be handed over during the Thuntsha Lerole campaign in Uitkyk.

**U**ITKYK – The North West Department of Health has handed over three ambulances to the Moses Kotane Sub-District as part of the provincial government's integrated service delivery programme, Thuntsha Lerole, during an outreach event held in Uitkyk village within the Moses Kotane Local Municipality.

Of the three ambulances delivered, two are 4x4 bakkie ambulances designed to operate effectively in difficult terrain and poor road conditions common in rural areas. The vehicles are expected to significantly improve emergency response times and access to healthcare services for residents in remote communities. In addition, three community members received wheelchairs, enhancing mobility and improving their quality of life.

Health MEC Sello Lehari and his delegation also conducted oversight walkabouts at a new clinic currently under construction in Uitkyk to assess progress toward completion. Once operational, the clinic will provide a range of essential healthcare services, including a vitals room, pharmacy, general store, three consulting rooms—one dedicated to counselling—a staff room, an emergency room, as well as clean and dirty utility rooms.

A Clinic Committee has already been established to ensure community participation, oversight, and representation in the management of the facility.

Moses Kotane Local Municipality Mayor, Councillor Nketu Nkotswe, welcomed the Department's interventions, noting that the additional ambulances and the new clinic would significantly strengthen healthcare delivery and improve access to services for local residents.

Emphasizing the importance of the initiative, MEC Lehari said rural healthcare access remains critical. “For rural communities, access to health services can mean the difference between life and death. By bringing ambulances suited for rural terrain, providing assistive devices such as wheelchairs, and accelerating the completion of health facilities, we are restoring dignity, saving lives and ensuring that no community is left behind,” he said.

The Department highlighted that continued investment in rural health infrastructure, emergency medical services, and assistive devices plays a vital role in addressing historical inequalities, reducing patient travel distances, improving emergency response times, and enhancing overall health outcomes.

The North West Department of Health reaffirmed its commitment to the Thuntsha Lerole programme, aimed at delivering integrated, people-centred services and improving the lived realities of communities across the province.



MEC Sello Lehari cuts the ribbon to mark the official handover of ambulances to the Bojanala District health services.

# LENACAPAVIR ROLL-OUT TO BOOST HIV PREVENTION

By: Keletso Ratlhagane

**M**ahikeng- In a landmark move to curb the growth of the HIV epidemic, the Department of Health has announced the introduction of lenacapavir, a new long-acting HIV prevention option that offers high-efficacy protection for people at risk of HIV infection.

Lenacapavir is a six-monthly injectable form of pre-exposure prophylaxis (PrEP) designed to protect HIV-negative individuals from acquiring HIV. Administered just twice a year, the medication has been shown in clinical studies to be highly effective, with trial results indicating virtually complete protection when used as recommended — a significant advancement over daily oral PrEP alternatives.

The roll-out follows the South African Health Products Regulatory Authority's (SAHPRA) approval of lenacapavir for HIV prevention late in 2025, positioning South Africa as one of the first countries in sub-Saharan Africa to integrate this innovative treatment into its public health response.

## Strengthening HIV Prevention in the North West Province

Lenacapavir will be introduced through selected public health facilities across the North West, with an initial focus on high-incidence areas where uptake of existing HIV prevention options has been limited. The programme will include targeted outreach to populations at elevated risk, including young women and key population groups.

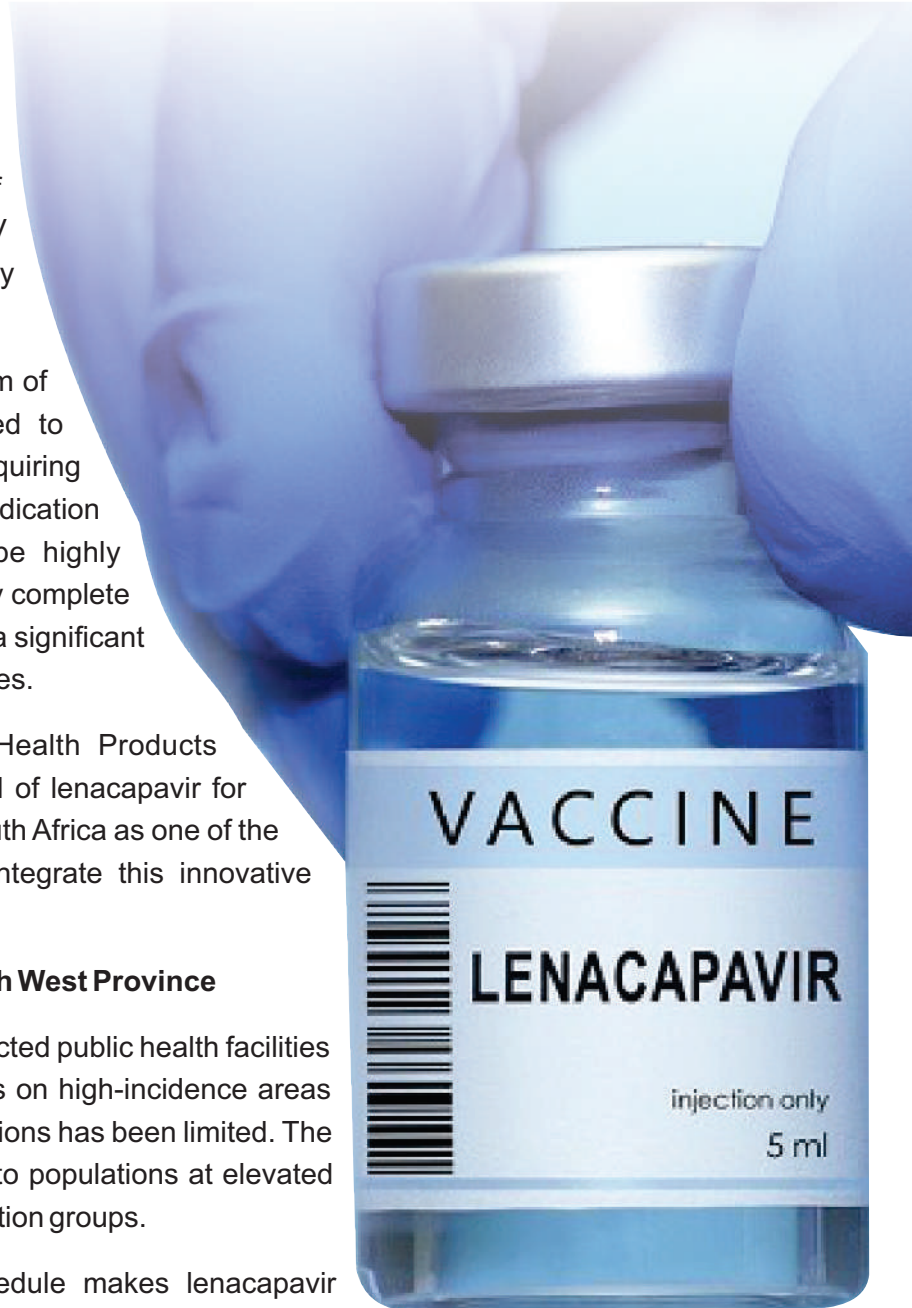
Health officials say the twice-yearly schedule makes lenacapavir particularly suitable for improving adherence and reducing barriers associated with daily medication regimens.

“By offering lenacapavir locally, we’re equipping clinicians and communities with another powerful tool in the fight against HIV,” said MEC Sello Lehari. “This is part of our ongoing commitment to expand prevention choices and reduce new HIV infections in the North West.” he added.

## How Lenacapavir Works

Unlike daily oral PrEP tablets, lenacapavir is given once every six months, making it one of the longest-acting HIV prevention options currently available.

The medicine works by targeting the HIV capsid, a protein shell that protects the virus's genetic material. By disrupting this capsid at multiple stages of the virus's life cycle, lenacapavir prevents HIV from entering human cells, making copies of itself, and spreading in the body.



Clinical trials have shown lenacapavir to be highly effective, with near-complete protection against HIV infection when administered as scheduled. Health experts say the long-acting nature of the injection helps overcome challenges linked to daily pill-taking, such as missed doses, stigma, and access barriers.

Lenacapavir does not cure HIV and does not protect against other sexually transmitted infections (STIs), so it is recommended as part of a broader HIV prevention package that includes regular testing and condom use.

**Eligibility Criteria for Lenacapavir**

Lenacapavir is intended for HIV-negative individuals who are at substantial risk of HIV infection. Eligibility typically includes:

- Individuals who test HIV-negative before starting the injection
- People at high risk of HIV exposure, including:
  - Adolescent girls and young women
  - People with multiple sexual partners
  - Individuals with an HIV-positive partner
  - Sex workers and other key populations
- People who struggle with or prefer not to use daily oral PrEP
- Individuals who are willing to attend health facilities twice a year for follow-up injections and routine HIV testing

**Before receiving lenacapavir, clients will undergo:**

- An HIV test to confirm negative status
- A basic clinical assessment and counselling
- Ongoing monitoring to ensure continued HIV-negative status during use.

# STI and Condom WEEK

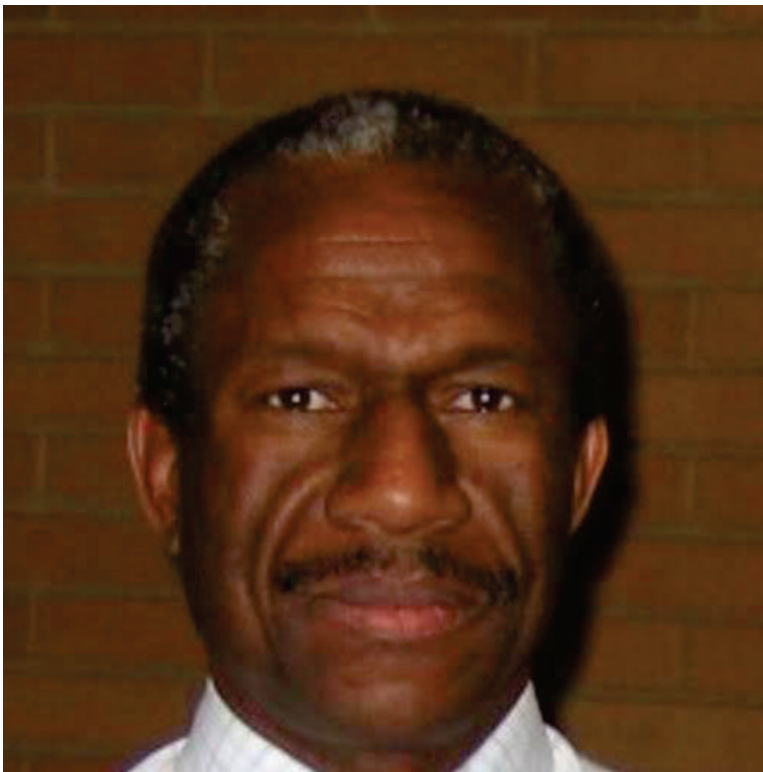


MEC Jonas Sello Lehari

**“Unified Action for Triple Elimination”**

# NORTH WEST DEPARTMENT OF HEALTH ADVANCES NHI IMPLEMENTATION

By: Keletso Ratlhagane



**Professor John Tumbo, Provincial Champion for NHI implementation.**

**M**ahikeng - The North West Department of Health has taken significant steps toward implementing the National Health Insurance (NHI) scheme, with the establishment of the NHI Contracting Unit for Primary Healthcare Services (CUPS) currently underway. This development marks a critical phase in the province's preparation for universal access to quality healthcare.

The newly established CUPS will serve as the provincial interface between the NHI Fund and healthcare providers, overseeing the contracting, accreditation, and monitoring of primary healthcare facilities. According to provincial officials, the unit will streamline processes, improve service quality, and ensure that clinics and community health centres meet national NHI standards.

The establishment of the NHI Contracting Unit for Primary Healthcare is a landmark moment for the North West province. It signals the department's

commitment to a systematic and accountable approach to integrating our public healthcare services into the NHI framework.

The NHI, enacted into law in 2024, seeks to centralize the funding of health services through a single national fund, ensuring equitable access for all South Africans while reducing out-of-pocket expenses at the point of care. A key focus of the provincial rollout is the strengthening of primary healthcare, which forms the backbone of NHI's service delivery model.

The National Health Insurance (NHI) scheme, a cornerstone of South Africa's healthcare reform, is set to transform the delivery of health services across the country, including in the North West province. The initiative aims to provide universal access to quality healthcare, reduce inequalities, and strengthen the nation's public health system.

Under the NHI, all South Africans will have access to essential health services, regardless of income or social status. The scheme eliminates out-of-pocket expenses at the point of care, ensuring that families are protected from high medical costs, particularly for chronic illnesses and emergency treatments.

A central focus of the NHI is enhancing primary healthcare services. By improving community clinics and health centres, the system aims to detect and treat illnesses early, reducing the strain on hospitals and ensuring that patients receive timely and effective care close to home.

The NHI will address long-standing disparities between urban and rural health facilities. Resources will be allocated based on need, ensuring that historically under-resourced areas receive adequate support. Accredited health facilities are required to meet national quality standards, providing patients with consistent and reliable care.

# **NHI** Quality and Affordable healthcare for all

**NHI for all - Universal health coverage is a right,  
not a privilege**

**NHI will reduce health cost for families.  
No more out-of pocket expenses  
for essential services.**

**Public healthcare is being improved.  
Investment in infrastructure,  
staff, and equipment.**

**Health workers are key to NHI's success.  
Training and support for frontline staff.**

**Your voice matters In shaping NHI.  
Community consultations and  
dialogue performs.**

**NHI promotes fairness and equality.  
Bridging the gap between rich and poor  
in healthcare access**

**NHI protects  
future generations**

**MEC Jonas Sello Lehari**



**health**

Department:  
**Health**  
North West Provincial Government  
**REPUBLIC OF SOUTH AFRICA**



**LEAVE NO  
ONE BEHIND**

BUILDING A  
**NORTH WEST PROVINCE  
THAT WORKS** ALL



# THE PATIENTS' RIGHTS CHARTER

For many decades the vast majority of the South African population has experienced either a denial or violation of fundamental human rights, including rights to health care services. To ensure the realization of the right of access to health care services as guaranteed in the Constitution of the Republic of South Africa (Act No 108 of 1996), the Department of Health is committed to upholding, promoting and protecting this right and therefore proclaims this *PATIENTS' RIGHTS CHARTER* as a common standard for achieving the realization of this right.

This Charter is subject to the provisions of any law operating within the Republic of South Africa and to the financial means of the country.

## A HEALTHY AND SAFE ENVIRONMENT

Everyone has the right to a healthy and safe environment that will ensure their physical and mental health or well-being, including adequate water supply, sanitation and waste disposal as well as protection from all forms of environmental danger, such as pollution, ecological degradation or infection.

## PARTICIPATION IN DECISION-MAKING

Every citizen has the right to participate in the development of health policies and everyone has the right to participate in decision-making on matters affecting one's health

## ACCESS TO HEALTHCARE

Everyone has the right of access to health care services that include:

- i. receiving timely emergency care at any health care facility that is open regardless of one's ability to pay;
- ii. treatment and rehabilitation that must be made known to the patient to enable the patient to understand such treatment or rehabilitation and the consequences thereof;
- iii. provision for special needs in the case of newborn infants, children, pregnant women, the aged, disabled persons, patients in pain, person living with HIV or AIDS patients;
- iv. counselling without discrimination, coercion or violence on matters such as reproductive health, cancer or HIV/AIDS;
- v. palliative care that is affordable and effective in cases of incurable or terminal illness;
- vi. a positive disposition displayed by health care providers that demonstrate courtesy, human dignity, patience, empathy and tolerance; and
- vii. health information that includes the availability of health services and how best to use such services and such information shall be in the language understood by the patient.

## KNOWLEDGE OF ONE'S HEALTH INSURANCE/MEDICAL AID SCHEME

A member of a health insurance or medical aid scheme is entitled to information about that insurance or medical aid scheme and to challenge, where necessary, the decisions of such health insurance or medical aid scheme relating to the member.

## CHOICE OF HEALTH SERVICES

Everyone has the right to choose a particular health care provider for

services or a particular health facility for treatment provided that such choice shall not be contrary to the ethical standards applicable to such health care providers or facilities, and the choice of facilities in line with prescribed service delivery guide lines.

## BE TREATED BY A NAMED HEALTH CARE PROVIDER

Everyone has the right to know the person that is providing health care and therefore must be attended to by clearly identified health care providers.

## CONFIDENTIALITY AND PRIVACY

Information concerning one's health, including information concerning treatment may only be disclosed with informed consent, except when required in terms of any law or an order of the court.

## INFORMED CONSENT

Everyone has the right to be given full and accurate information about the nature of one's illnesses, diagnostic procedures, the proposed treatment and the costs involved, for one to make a decision that affects anyone of these elements.

## REFUSAL OF TREATMENT

A person may refuse treatment and such refusal shall be verbal or in writing provided that such refusal does not endanger the health of others.

## BE REFERRED FOR A SECOND OPINION

Everyone has the right to be referred for a second opinion on request to a health provider of one's choice.

## CONTINUITY OF CARE

No one shall be abandoned by a health care professional worker or a health facility which initially took responsibility for one's health.

## COMPLAIN ABOUT HEALTH SERVICES

Everyone has the right to complain about health care services and to have such complaints investigated and to receive a full response on such investigation.

## EVERY PATIENT OR CLIENT HAS THE FOLLOWING RESPONSIBILITIES:

- Advise the health care providers on his or her wishes with regard to his or her death.
- Comply with the prescribed treatment or rehabilitation procedures.
- Enquire about the related costs of treatment and/or rehabilitation and to arrange for payment.
- Take care of health records in his or her possession.
- Take care of his or her health.
- Care for and protect the environment.
- Respect the rights of other patients and health providers.
- Utilise the health care system properly and not abuse it.
- Know his or her local health services and what they offer.
- Provide health care providers with the relevant and accurate information for diagnostic, treatment, rehabilitation or counselling purposes.

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# HEALTH DEPARTMENT SUCCESSFULLY HOSTS TSHELA KA ITEKANELO CAMPAIGN IN DITSOBOTLA

By: Goitseone Shuping



**L**ichtenburg- The North West Department of Health successfully hosted a two-day Tshela Ka Itsekanelo campaign at the Gunners Sportsground in Boikhutso, Lichtenburg. The campaign was aimed to promote wellness, disease prevention, and treatment adherence across communities.

This year's event was integrated with the 1.1 Million Close the Gap HIV Treatment Campaign, as the Ngaka Modiri Molema District seeks to reintegrate 11,078 HIV-positive clients into treatment. The campaign also observed Sexually Transmitted Infections (STIs), Pregnancy, and Condom Week Awareness.

The event was led by the MEC for Health, Mr. Sello Lehari, alongside Mayor Molefe Morutse of Ditsobotla Local Municipality. The duo spearheaded a 5km community walk and physical exercises to officially launch the proceedings, which included health education sessions, integrated health services, and sporting activities such as netball and football matches.

Addressing attendees, MEC Lehari highlighted the significance of active community participation in wellness programs and HIV treatment initiatives.

"The Tshela Ka Itsekanelo campaign encourages our communities to take charge of their health

through exercise, healthy eating, and positive lifestyle choices. By integrating the 1.1 Million Close the Gap HIV Treatment Campaign, we reinforce the message that knowing your status, starting treatment early, and staying on treatment saves lives," he said.

MEC Lehari also addressed concerns from the Boitshoko community in Ward 3 regarding the need for a new clinic. He assured residents that the Department would conduct a case study to ensure access to quality healthcare services closer to their homes.

Mayor Morutse reaffirmed the municipality's commitment to the campaign, stating, "We will continue to support the Department of Health in fulfilling its mandate of improving access to health services and promoting healthy communities across all villages within the municipality."

In a gesture applauded by the community, the Ngaka Modiri Molema Men's Soccer Team handed their winners' prize a new soccer kit to a local community soccer club they contended in the finals.

The campaign successfully combined health awareness, community engagement, and sportsmanship, reinforcing the North West Department of Health's commitment to fostering healthier, active communities.







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