

SPEECH BY THE MEC FOR HEALTH MR SELLO LEHARI DURING THE DEPARTMENTAL STRATEGIC PLANNING LEKGOTLA HELD AT SEASONS RESORT IN MAHIKENG

12 – 14 November 2025

Programme Directors,

Chairperson of the Portfolio Committee on Health and Social Development, Ms Karabo Magagane (To confirm her attendance)

Acting Superintendent-General, Mr. Jannie De Beer

Chairpersons and Members of the Provincial and District Health Councils,

DDG for Hospitals and Specialized Services, Mr Polaki Mokatsane.

Acting DDG for Health Services, Ms Grace Tsele,

CFO, Ms Nancy Rampedi,

All Executive and Programmes Managers of the Department,

Representatives from the National Department of Health, Statistics South Africa (Stats SA)

and other state institutions present,

Representatives from the Office of the Premier,

Representatives from the National Institute for Communicable Diseases (NICD),

The leaders of Organised Labour in the Department

MEC's Support Staff – led by Chief of Staff Mr Lebogo

All the officials of the Department of Health gathered here today,

All our partners and stakeholders,

Distinguished guests,

Ladies and gentlemen

Good morning and a warm welcome to each of you.

PREAMBLE

Allow me to start with this important announcement, which some of you have already been appraised about. Yesterday, we had a Special Extended Departmental Executive Management meeting, where we formally introduced the new acting Superintendent General of our department, Mr Thupi Mokhatla, who joins us from the Department of Agriculture and Rural Development. SG Mokhatla joins us, from Agriculture where he had been the Head of the Department, and these changes come following the Premier's decision to exercise his executive powers, and effect these changes to strengthen our government machinery.

Please let us all welcome our acting Head of the Department Mr Thupi Mokhatla, who is with us today – officially assuming his responsibility until a substantive SG is appointed by April next year.

In the same breath, as I have done yesterday, in his presence in the Special DEC meeting – I want to thank the outgoing SG, Obakeng Mongale for his stellar work in the Department. Mr Mongale has joined the Office of the Premier as the leader and coordinator of the National Dialogue.

These are the changes and let us all embrace them from today, as we start this important strategic session.

I also want to extend a special word of thanks to our Facilitators, who will guide us through this Strategic Planning Lekgotla. We also appreciate the organisers of this event, the team who have arranged the venue, logistics, programme and coordination - your efforts make possible our collective endeavour.

A well-known strategist Michael Porter, who is a Harvard Business School professor and a leading authority on competitive strategy, once said; ***"Strategy is about making choices, trade-offs; it's about deliberately choosing to be different"***

In that spirit, we gather here at this Lekgotla because our legislative and policy frameworks require us to engage in robust strategic planning.

Our work is anchored in the Constitution of the Republic of South Africa which guarantees the right to health care services (**Section 27**). We have our Medium-Term Expenditure Framework (MTEF) planning cycles that demand that we align our strategic goals with our budgetary envelopes, assess risks, define objectives and map performance indicators.

We convene this strategic planning session in compliance with the Public Finance Management Act and Treasury regulations that require provincial departments to have credible strategic and annual performance plans, linked to budgets and performance agreements.

Our ruling party's election manifesto on health calls for **"a caring society where every person has access to quality health care regardless of socio-economic status"**

This Lekgotla therefore is not an optional nicety: it is a legislative, policy and moral necessity. Our strategic planning must ensure that we align our Department of Health's programmes with national policy, with the MTEF budget cycles, with the manifesto commitments of our party, and with the global Sustainable Development Goals related to health and wellbeing.

INTRODUCTION

Ladies and gentlemen, I take this opportune moment to set the tone for this Strategic Planning Lekgotla which will set clear objectives for the next strategic cycle of the Department of Health in the North West Province. Over these three days, we should endeavour to:

1. Revisit and reaffirm the vision and mission of the Department;
2. Review our environment - both internal and external: demographic, epidemiological, policy, infrastructural and human resource trends;

3. Align our eight programmes of the Department with the strategic imperatives of the health sector, the national policy framework, and the manifesto commitments.
4. Define strategic objectives, key performance indicators, and targets for each programme over the next MTEF horizon;
5. Link those objectives to resource-requirements - budget, infrastructure, human resources, supply chain, information systems; and all key aspects of our service needs.
6. Review risk mitigation and governance arrangements, ensuring that we maintain non-negotiables of quality, standards, accountability and audit readiness;
7. Build collective ownership of the plan by all senior management - so that when we leave this Lekgotla, we have a credible strategic plan, ready for cascading into business plans, annual operational plans and performance contracts.

I therefore urge you to participate fully, engage candidly, challenge assumptions, bring your local insight - whether from hospitals, clinics, emergency services, human resources or supply chain and commit to leaving this Lekgotla with a sharpened, realistic, well-founded strategic plan.

STRATEGIC ALIGNMENT AND KEY AREAS OF FOCUS

First, we must align our Department's eight programmes with the national health agenda. Each of our programmes must contribute to the health aspects of the National Development Plan: Vision 2030, which seeks to build a longer-term vision of a healthier South Africa, with access, quality and sustainability.

We must also tie into the World Health Organization's Sustainable Development Goal which seeks to ensure healthy lives and promote wellbeing for all, at all ages. Our strategic planning must reflect that we are contributing to ending preventable deaths, tackling epidemics of HIV, TB, non-communicable diseases, and enhancing universal access to quality care.

Implementation of National Health Insurance (NHI).

The signing of the National Health Insurance Act 20 of 2023 is a landmark in our health system transformation. President Ramaphosa noted that: ***"Access to quality, decent healthcare should not depend on one's ability to pay."*** Minister Motsoaledi further emphasised that NHI is ***"not a system of healthcare" but "a health financing system" that ensures quality services without financial hardship.***

As a provincial health department, our strategic plan must build the foundation for NHI implementation: strengthen accreditation of facilities, build strategic purchasing capability, ensure that both public and private sector providers are engaged, and that the financial flows, data systems and quality assurance mechanisms are in place.

Building Partnerships

Our strategic must not leave behind the importance of building sustainable partnerships. We have seen the fruits of these partnership in EMS, health infrastructure development, medical equipment, specialised tertiary services where mining houses, private health sector and tertiary academic institutions partnered with the department.

As we plan for a healthier future, we must leverage partnerships with academic institutions. The Desmond Tutu School of Medicine offers a unique opportunity in the North West Province to strengthen our human resources for health, integrate teaching and service, and to build research and innovation capacity.

Our strategic plan should incorporate collaboration with this school: training of doctors, nurses and allied health professionals; joint research on local health challenges; pipeline for specialists and sub-specialists; and placement in our hospitals and districts. This strengthens the human capital pillar of our health system.

Emergency medical services (EMS) including ambulance response

One of the non-negotiables of services is that when patients need emergency response, we respond efficiently, safely and timely. Our strategic planning must map the entire EMS chain in the Province: call centres, dispatch, ambulance fleets, patient transport systems, inter-facility transfers and district-hospital linkages.

We must ensure that Programme 3 (EMS) has clear targets for response times, coverage, reliability, and integration with our hospital and clinic networks. Our people cannot complain about ambulances forever.

Health infrastructure, maintenance and responsiveness.

Our health infrastructure must be responsive and conducive: hospitals, clinics, community health centres, mobile units, medical depots and other facilities must meet standards, be safe, clean, well-maintained, and accessible. Our strategic plan under Programme 8 must include new infrastructure developments, refurbishments, maintenance plans, medical equipment lifecycle management, and resilience (including during disasters). The vision of delivering care close to communities must reflect in our facility planning and asset management.

Human resources for health (HRH) planning.

Without skilled, motivated and well-distributed health workers, our goals will falter. HRH planning must address recruitment, retention, rural placement, training and development, succession planning, skills mix, remuneration and performance management. Non-negotiables such as staffing norms, minimal vacancy rates, continuous professional development and leadership pipeline must be built into our strategic objectives.

Adherence to health standards and quality of patient care.

Quality, patient-centred care is non-negotiable. We must ensure that every facility meets minimum standards of care, safety, infection prevention and control, and that we embed a culture of continuous quality improvement. Minister Motsoaledi emphasised that for NHI success, ***"the quality of services in the public health system has to drastically undergo a metamorphosis."*** Our strategic plan must embed quality indicators, accreditation processes, patient feedback mechanisms and audit readiness.

Medicines availability and expansion of medical depots.

Access to reliable medicines is critical. We must ensure completion of the expansion of medical depots and logistical networks to bring medicines closer to health facilities and communities. Supply chain management, stock-outs management, forecasting, procurement efficiency and decentralised depots are key and must reflect in our indicators. We must set targets for depot coverage, medicine availability rates, stock-out reduction and community outreach.

Budgeting, audit outcomes and supply chain management.

The integrity of our operations rests on good governance. Our strategic planning must therefore reflect supply chain integrity, budgeting rigor, audit readiness and sound financial management. Our strategic objectives must include a zero-tolerance approach to theft, poor procurement planning, stock pilferage; strengthening internal controls; ensuring clean audits; and optimising the budget utilisation across MTEF cycles.

We recall that the finance function is seen as a "catalyst for delivering highest value decision support and driving business unit performance." Our CFO and team will be central to enabling this.

Budget, Medium Term Expenditure Framework (MTEF) planning and resource alignment.

We operate in a constrained fiscal environment. Our programme plans must be fiscally credible. We must align our strategic objectives with the MTEF budget cycles, allocate resources to high-impact areas, continuously monitor expenditure, and ensure value for money. Our strategic planning must build realistic costed objectives and link resources to deliverables, be it infrastructure, HR, EMS, medicines, IT systems or any of our programmes.

Governance, accountability and performance.

The success of this Lekgotla rests on ownership and accountability. We need to look into how our governance structures such as risk management committees, audit committees, district and hospital governance assist us in our strategic intent. In the end, we must cascade the strategic plan into annual operational plans, business plans and performance agreements with senior managers and CEOs.

SUPPLY CHAIN MANAGEMENT

The biggest challenge that we are facing when coming to SCM is the issue of irregular expenditure. Section 217 of the South African Constitution mandates that all organs of states must have a procurement system of goods and services that is Fair, equitable, transparent, competitive and cost-effective.

A violation of any of the above leads to irregular expenditure. The 2024/25 financial year audit saw new irregular expenditure in the areas of deviations, especially around emergency and urgent procurement.

Although some of these deviations were approved by the relevant delegated officials, when tested against the framework for deviations they failed the test decimally, as it was found that emergency/urgent procurement was used to circumvent normal procurement procedures, for example, where the department did not do regular maintenance of medical

gas equipment and then treating the breakdown as an emergency, when it could have been avoided had regular maintenance been done.

Action plans have been developed to prevent repeat audit findings around the above and will include but not limited to the following:

1. Detailed market analysis to substantiate what the department is paying, and comply with cost effectiveness principle.
2. Where it is found the emergency or urgent procurement was used to circumvent normal procurement procedures, corrective action shall be taken.
3. Approval for deviation from normal procurement processes must be in line with the SCM Delegations of Authority.

As the EA, my office is responsible for ensuring compliance with all laws and regulations of the country, and to make sure that there is accountability when it comes to tax payer's monies. As a country as facing very tough economic pressures, and therefore it is important

that we use our budget allocation wisely, I will therefore as an MEC , not tolerate any wastage.

PARTICIPATION

I encourage each one of you to participate fully. Bring your insights, challenges, innovations, local imperatives and lived experience. Review all existing plans, question assumptions, test feasibility, propose improvements, and confirm our vision and mission for the Department.

CONCLUSION

In conclusion, ladies and gentlemen, we are at a pivotal moment. The health landscape is changing rapidly. The implementation of NHI, the demand for equitable access, rising

expectations of citizens, constrained fiscal space, human resources challenges, infrastructure backlogs - all call for bold, yet realistic planning. As President Ramaphosa reminded us in the signing of the NHI Bill: "Under the NHI, access to quality care will be determined by need not by ability to pay."

Let us therefore plan with urgency but also with realism, with ambition but also with precision, and with inclusivity and collective ownership.

I wish this Lekgotla every success. May our deliberations be frank, our commitments strong, our plan credible, and our actions transformative. Let us leave here united in purpose, aligned in strategy, and ready to implement for the health and wellbeing of the people of the North West Province.

Thank you, and let us proceed with energy and commitment to make this Lekgotla and our Department a success.

Thank you very much!!!