

NATIONAL COUNCIL OF PROVINCES

OFFICE OF THE CHAIRPERSON

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OPENING REMARKS BY THE CHAIRPERSON OF THE NATIONAL COUNCIL OF PROVINCES, HONOURABLE N. A. MASONDO, ON THE OCCASION OF THE MINISTERIAL BRIEFING SESSION ON THE IMPACT OF LOADSHEDDING IN THE PROVISION OF HEALTHCARE SERVICES

VENUE: VIRTUAL **DATE:** 21 FEBRUARY 2023 **TIME:** 10H00

Programme Director, Deputy Chairperson of the NCOP, Hon. Sylvia Lucas Minister of Health, Honourable Joe Phaahla

Deputy Minister of Health, Honourable Sibongiseni Dhlomo

NCOP House Chairpersons, Honourable Jomo Nyambi and Honourable Winnie Ngwenya

NCOP Chief Whip, Honourable Seiso Mohai

Permanent and Special Delegates

Provincial MECs for Health

SALGA Representative

Ladies and gentlemen

1. INTRODUCTION

Let me start by appreciating the opportunity to make the opening remarks for the Ministerial Briefing Session on the *Impact of Loadshedding in the Provision of Healthcare Services*. In order to facilitate integrated oversight in this regard, we have decided to focus on *Measures to Mitigate Against the Negative Impact of Loadshedding in the Provision of Healthcare Services to Communities*.

2. HISTORY AND IMPACT OF LOADSHEDDING

It is a matter of record that in the late 1990s Eskom recognised that South Africa needed to build new power plants to meet the demand for electricity as several existing plants were nearing the end of their lives. However, due to delays the country began experiencing loadshedding by 2008.

It is around this time that construction commenced on two new power stations, namely Medupi and Kusile. Unfortunately, inadequate planning, a lack of technical skills and corruption resulted in several flaws in the design and construction. These affected the performance of the new plants which added to the challenge of meeting increasing demand.

Owing to this and other factors, including the burden of maintaining our power stations, there is now a heightened need to improve energy availability. This, according to the Minister of Mineral Resources and Energy, requires that as a country we must arrest the decline in the

availability of energy. According to the Minister, energy availability is estimated to have declined from 75% to 49%.

Given this background, the President of the Republic, Honourable Matamela Ramaphosa, correctly pointed out in his State of the Nation Address earlier this month that we are in the grip of a profound energy crisis, the seeds of which were planted many years ago.

Programme Director, it is worth noting that while acknowledging the mistakes done in the past which I have alluded to, the President however accepted that we cannot undo the capacity that was not built, the damage that was done to our power plants due to a lack of maintenance, and the effects of state capture on our institutions.

However, he said emphatically that we must fix the problem today.

In this regard, we welcome the interventions contained in the Action Plan to End Loadshedding which are focused on:

- 1) Improving the performance of Eskom's existing power stations; and
- 2) Adding as much new generation capacity to the grid as possible, as quickly as possible.

As Parliament, we have a duty to hold the Executive to account in respect of these commitments and to continue to represent the voice of the people.

3. LOADSHEDDING AND THE HEALTHCARE SECTOR

Against this background, we are mindful of the impact of loadshedding on the provision of critical services, in particular the healthcare sector. The sector exists primarily to promote and protect the health of citizens. It is key to the provision of affordable access to quality health care for all and the promotion of general health and wellbeing of the population, which we strive for. Accordingly, the Constitution guarantees everyone's right to access healthcare services.

As such, healthcare centres and facilities, which include clinics, surgeries, trauma care centres, ambulatory surgery centres, provide the first point of contact for the provision of a wide range of specialised heathcare services. The care services they provide are necessary to promote good health, prevent medical complications and even death.

By its very nature, the healthcare sector provides a range of critical and essential services which require, amongst other things, clean and safe facilities, accessible water supply, and motivated workforce. Obviously, loadshedding constitutes one of the biggest threats to the rendering of quality healthcare.

It is for this reason that we acknowledge and appreciate the work done by government to, amongst other things, ensure that priority hospitals are excluded from loadshedding as part of plans to minimise disruptions on the provision of essential services during power outages.

4. CONCLUSION

In conclusion, Programme Director, the failure to plan and prepare for our future energy needs before the onset of loadshedding more than a decade ago, the lack of requisite technical skills and the challenges of corruption in the implementation of our interventions, have resulted in the energy crisis we are experiencing today. Loadshedding has become a daily feature and poses a serious threat to the provision of essential services including healthcare.

While we commend the government for the work it has done to cushion some of our health facilities from the effects of loadshedding, it is necessary to ascertain whether government has put in place the requisite measures to mitigate against the negative impact of loadshedding in the provision of healthcare services.

Once again, Programme Director, I would like to thank you for the opportunity to make these opening remarks. I am looking forward to a fruitful engagement.

Thank you.