

**Joint Civil Society Monitoring Forum (Forum) on the Operational Plan for
HIV/AIDS Care, Management and Treatment (Operational Plan)
*Resolutions of the Bloemfontein meeting held on 19 November 2004***

Introduction

On 19 November 2004, the forum held its second meeting in Bloemfontein. The meeting commemorated the one-year anniversary of the adoption of the Operational Plan. It recognised the efforts of health care workers in SA who correctly regard implementation of the Operational Plan as a matter of urgency and priority.

The forum comprises of the following organisations:

- AIDS Law Project (ALP)
- Centre for Health Policy (CHP)
- Médecins Sans Frontières (MSF)
- Public Service Accountability Monitor (PSAM)
- Institute for Democracy in South Africa (IDASA)
- Open Democracy Advice Centre (ODAC)
- Anglo American
- Southern African HIV Clinicians Society (SAHCS)
- UCT School of Public Health and Family Medicine and
- Treatment Action Campaign (TAC).

The meeting was attended by:

ALP; HST; CHP; IDASA, ODAC; TAC; SAHCS; South African Business Coalition Against HIV/AIDS (SABCOHA); Aurum Health; University of Free State; NAPWA

Free State; Free State provincial health department; Children First and KZN Civil Society Monitoring Forum

The forum welcomed new members and repeated its invitation to other civil society organisations to join the forum. It re-iterated its intention to work with the national department and all nine provincial health departments in ensuring that the implementation of the Operational Plan is successfully carried out. In addition, it undertook to invite both the national and all nine provincial health departments to attend future meetings. It re-affirmed its purpose and objectives as recorded in the Limpopo resolutions of September 2004.

Background

The purpose of the meeting was to highlight the successes of the Operational Plan and limitations thereof, that is, one year after the Operational Plan has been adopted. The forum invited the national department to the meeting, but unfortunately, Dr David Kalumba was not able to attend. In any event, the forum specifically acknowledged the attendance and participation of the Free State provincial health department.

Summary of reports

A number of reports were presented to the meeting that dealt with various aspects relating to implementation of the Operational Plan. The purpose of such reports is to regularly share and critically assess information. The following is a summary of the key findings of the reports. Individual reports are available from the forum secretariat and are discussed in slightly more detail under "Reports".

- The ALP reported that based on information collected by it through formal and informal sources, as at the end of October 2004, approximately 15

000 people were receiving treatment at public facilities nationally, with the majority residing in Gauteng, the Western Cape and KwaZulu-Natal.¹

- The Free State health department reported that it has 5 sites that are treating 602 patients, the majority of whom are adults. The willingness of the FS health department to share information is exemplary. The FS has also developed creative strategies aimed at better sharing of information and the greater utilisation of public private sector partnerships.
- It was reported that the national department is still developing a national human resource plan. The HR Plan is likely to be finalised by 2005. The forum will request an opportunity to provide input into the processes leading up to the completion of it
- To date, the national drug procurement process has not been concluded, some 9 months after the process commenced. While a shortlist has been prepared, contracts have not yet been concluded. The delay continues to affect the ability of provinces to scale up its treatment programmes
- Concerns were raised about the sustainability of drug supplies, especially regarding drugs with only a single supplier. In addition, the withdrawal of certain generic producers is likely to hamper the procurement process by limiting the buying options available to government
- Substantial provincial disparities were reported in accessing treatment. Other provinces are not matching the speed with which some provinces such as Western Cape and Gauteng have implemented their programmes. In particular, Limpopo was reported as the slowest with progress moving at a 'snails pace'
- It was reported that the Southern African HIV/AIDS Clinicians Society (SAHCS) has offered to assist the national department with training and other support. To date, this offer has not been accepted
- Gaps in communication and information sharing were reported. These appear to be mainly between the national and provincial health

¹ The figure as at end November 2004 is approximately 18 500 patients. See Table 1 attached at the end of this report.

- departments as well as between the national department along with some provincial health departments and civil society organisations. The gaps relate mainly to the lack of information about site details, data collection, patient outcomes, patient numbers, gender and age breakdown of people on treatment, treatment literacy and community awareness initiatives
- It was reported that despite its mandate, the South African National AIDS Council (SANAC) has not discussed the implementation of the Operational Plan yet
 - Concerns were raised about current HIV prevention programmes. That is, that current public messaging about prevention education is insufficient and inadequate.
 - While some provinces such as Free State, Gauteng, Western Cape are particularly open and transparent in their dealings with civil society, the majority are not that forthcoming. This may be due to limited resources. In this respect, the forum volunteered to assist resource poor provinces with developing systems to manage and share information on a regular basis
 - The KZN civil society-monitoring forum reported on the successes and limitations in KZN. In particular, it is difficult to obtain accurate information about the extent of implementation in KZN. In any event, it reported that several sites have commenced treatment and that over 2000 patients are benefiting

Reports

1. SABCOHA, SAHCS and Aurum Health

The report provided an overview of current private sector treatment programmes, outcomes and lessons learnt. In particular, it highlighted the need for better collaboration between the private and public sector to make optimal use of private sector capacity. In particular, it stressed the need to increase patient numbers with a view to obtaining better patient outcomes to influence better HCW morale. The private sector report also warned that insufficient attention is being directed at the provision of treatment in the

public sector for dependants of employees who are accessing treatment through workplace treatment programmes. However, the private sector is working with funders to provide treatment for dependants of employees who are accessing treatment through workplace treatment programmes.

2. South African Council of Churches (SACC)

The report provided an overview of SACC programmes in the FS. The SACC is assisting the FS health department with the funding of 100 patients per site at 3 sites (total 300) in this coming year. The forum welcomed the efforts of FBOs such as the SACC in assisting public sector facilities with the implementation of the Operational Plan.

3. Health Systems Trust (HST)

The HST reported on its efforts to assess ARV sites including measuring community responses. It will make its findings available on publication.

4. Open Democracy Advice Centre (ODAC)

ODAC reported about its efforts in 2004 to obtain access to information from provincial departments and the national treasury. The following was requested from provinces: business plans; treatment plans; HR plans; overall health plans; status of accredited and/or operational sites. The following was requested from the national treasury: status of conditional grants to all provinces and in particular grants for ARVs.

ODAC noted that provincial responses were patchy with the following provinces responding adequately and/or timely: Western Cape, Gauteng, Eastern Cape, Limpopo, Mpumalanga and Free State, whereas KZN, North West and Northern Cape are yet to provide meaningful access to the documents requested. Where necessary, ODAC will consider taking appropriate legal action to compel the release of any or all of the documents requested from any or all of the provinces.

5. AIDS Law Project (ALP)

The ALP reported about both formal and informal attempts to ensure that the implementation timetable to the Operational Plan is publicly released (or that one is drawn up). The ALP also provided a short report about the status of the 'Annexure A' case and indicated that judgment in the case against the Minister of Health has been reserved. Table 1 below includes a summary of the provincial estimates of patient and site details.

6. IDASA Budget Unit

IDASA reported on 2003/4 spending of HIV and AIDS conditional grants. It found that provinces are continuously improving their performance since the inception of the National Integrated Plan for HIV/AIDS in 2000/1. Education Life Skills conditional grant spending improved from 22.3% in 2000/1 to 80% in 2003/4. The social development CHBCS grant spending improved from 35.6% in 2000/1 to 95% in 2003/4.

According to the recently released 2003/4 Annual Report of the Department of Health, health sector spending stepped up from 59.5% in 2000/1 to 96% in 2003/4. However, IDASA calculations using data sourced directly from national treasury suggested that provinces spent 119% of their health HIV/AIDS conditional grant in 2003/4.²

With regards to spending of the HIV/AIDS conditional grant, the Western Cape and Mpumalanga recorded the lowest spending figures of 79% and 86% respectively. KwaZulu-Natal reported spending on non-conditional grant allocations as part of the conditional grant and thus recorded 187% spending for 2003/4. Once the mistakenly reported additional spending was taken off, KZN recorded 100% spending of the conditional grant.

² Spending records of over 100% likely indicate that—in their reporting to national treasury—provinces may also be including funds spent from their regular budgets or rolled over funds from the previous year, in addition to the current year's conditional grant spending stream.

Resolutions

The forum took the following resolutions:

- The forum calls on the national and provincial health departments to work with civil society through the forum to ensure the successful implementation of the Operational Plan
- The forum calls on all provincial health departments and their respective units to respond to requests for access to information timeously as is prescribed by national legislation
- The forum calls on the national department to ensure that it provides adequate support to under resourced provinces and under resourced provincial health departments
- The forum calls on the national department and in particular the Eastern Cape, Mpumalanga, Limpopo, KZN, Northern Cape and North West to make information to the public about site details and progress reports regularly available
- The forum calls on the private sector to make optimal use of the resources available to it, especially human resources to assist with the public sector implementation of the Operational Plan. The private sector must continue to assist with implementation by also offering training and administrative support at public facilities
- The forum calls on the national department to finalise as a matter of urgency the national HR Plan for health. The forum insists that this process must include appropriate consultation and stakeholder participation
- The forum calls on the national department to finalise as a matter of urgency the drug procurement process. The importance of multiple drug suppliers was recognised and affirmed by the forum and as such it calls on generic manufacturers and the Medicines Control Council to work together to fast track the registration and approval of fixed dose combinations

- The forum calls on academic and research intuitions and provincial health departments to share lessons learned and ideas on how to overcome problems associated with implementation. The Western Cape in particular has substantial experience and the lessons learnt by it must be shared with the national department and under resourced provinces
- The forum calls on both the public and private sectors to collaborate and create space for discussion by developing stronger operational ties as a matter of urgency. There is a need to create innovative and mutually beneficial public–private partnerships. The forum stated that the private sector must continue to assist with the implementation of the Operational Plan by offering human and other resources, as well as training and administrative support
- The forum calls on SANAC to discuss and assess the implementation of the Operational Plan as a matter of urgency. This is within the purview of its mandate
- The forum undertakes to commit itself to assist provinces and individual sites with community awareness, treatment literacy and information sharing systems to relieve them of the burden of responding to or managing duplicated requests.

General

It was agreed that the next forum meeting will be held in KZN during February 2005 and that the KZN Civil Society Monitoring Forum will act as secretariat for the meeting.

The forum undertook to invite relevant organisations to address it on the status of the national health HR Plan, pediatric access to treatment and obstacles encountered in accessing proper nutritional support.

Closing

The meeting was closed with a minute of silence in memory of the thousands of people living with HIV/AIDS who have passed away because they could not access life saving treatment at all or not in time.

Annexure

Provincial summary compiled by the ALP: Late 2004

[] denotes unsure of accuracy

*A site usually means a hospital plus several feeder clinics

| Province | Children | Adults | Total patients | Total sites* |
|--------------------------|----------------|----------------|--------------------|--------------|
| Western Cape End Nov | 1054 | 4083 | 5137 | 28 |
| Eastern Cape End Oct | 67 | 1458 | 1525 | 10 |
| Northern Cape End Oct | 306 registered | 945 registered | Unsure | 5 |
| Gauteng End Nov | 800 | 4788 | 5588 | 19 |
| KZN End Oct | [154] | [2850] | [3004] 2500 | 22 |
| Limpopo End Nov | [40] | [260] | [300] | 4 |
| North West End Nov | ? | ? | 1124 | 6 |
| Free State End Oct | | | 602 | 5 |
| Mpumalanga End Oct | ? | ? | [500] | 8 |