



27 March 2022

## OVERVIEW OF CHARLOTTE MAXEKE JOHANNESBURG ACADEMIC HOSPITAL (CMJAH)

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### 1. INTRODUCTION

The NCOP delegation is scheduled to do oversight in Gauteng Province for Provincial Week, 29 March – 1 April 2022. This paper provides an overview of Charlotte Maxeke Johannesburg Academic Hospital (CMJAH) one of the sites to be visited. CMJAH experienced a fire in April 2021, affecting available services and repairs are still underway.



## 2. BACKGROUND<sup>1</sup>

Charlotte Maxeke Johannesburg Academic Hospital (CMJAH) was previously known as Johannesburg General hospital (commonly known as “Joburg Gen”). One of the ten central hospitals in South Africa. It has 1 088 usable beds, and over 4000 professional and support staff.<sup>2</sup>

CMJAH is next to Sunnyside Park and is located in City of Johannesburg Metropolitan Municipality, Gauteng, South Africa. CMJAH is a main teaching facility for the Faculty of Health Sciences of the University of the Witwatersrand, Sefako Makgatho University and the University of Johannesburg. The facility served as a service-base for undergraduate and post-graduate training in all areas of health professions. It is mandated to offer full range of quaternary, tertiary, secondary and highly specialised services, and serves as a referral hospital for several lower-level health care facilities within, and outside of the province.<sup>3</sup>

## 3. SERVICES OFFERED

CMJAH offered the following services:

### Department of Medicine

- Cardiology
- Neurology
- Pulmonology
- Haematology and Oncology
- Dermatology
- Geriatrics
- Family Health
- Nephrology
- Hepatology
- Endocrinology

### Department of Surgery

- Department of Nuclear Medicine
- Department of Orthopaedics
- Department of Ophthalmology
- Department of Otorhinolaryngology
- Paediatric surgery
- Urology
- Trauma Unit
- Plastic and Reconstructive surgery
- Cardiothoracic surgery
- Maxillo-facial and Oral surgery
- Neurosurgery

### Other

- Anaesthesia
- Department of Radiation Therapy
- Department of Paediatrics and Child Health
- Department of Radiology – Diagnostics
- Department of Obstetrics and Gynaecology
- Department of Psychiatry and Mental Health
- Nursing

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<sup>1</sup> Parliament Research Unit (2022)

<sup>2</sup> Internet Archive (2009)

<sup>3</sup> South African Doctors (*n.d.*)



The hospital is an accredited central hospital, which serves patients from across the Gauteng province, as well as neighbouring provinces. CMJAH offers a full range of tertiary, secondary and highly specialised services. It offers inpatient and specialist outpatient's services, mainly level 3 and level 2.



The hospital's professional and support staff exceeds 4000 persons. Support services are delivered through a mix of in-house, outsourced and other government agencies, e.g. maintenance through Gauteng Department of Infrastructure Development (DID). The costs of providing these services to the population of Gauteng, in addition to the neighbouring provinces, are funded by a National Tertiary Services Grant as well as the provincial equitable share. The hospital serves as a referral hospital for 14 hospitals in its referral chain in Gauteng, and other provinces.

The CMJAH has a private wing known as "Folateng" which translated means "Place of healing". Each ward offers patients the convenience of private health care with specialist physicians, and cutting edge technology that only a long-established hospital has the capacity to offer.

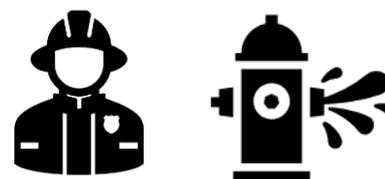
Also located at the hospital is the Johannesburg Hospital School. Learners who are well enough to leave their wards attend classes, which are situated inside the hospital building. This arrangement allows the continuation of education for learners undergoing in-patient treatment, and contributes towards reducing feelings of isolation.<sup>4</sup>



A total of 300 beds are designated for COVID-19 patients. The hospital was divided into four COVID-19 zones; i.e. green (low risk), orange (medium exposure risk) red (high risk), and yellow (Person Under Investigation (PUI<sup>5</sup>)). Personal Protective Equipment (PPE) is distributed in line with the requirements of the zone health workers are based at.

#### 4. THE FIRE AT CMJAH<sup>6</sup>

On 16 April 2021, a fire broke out at CMJAH. It resulted in significant damage to the parking structure on the third floor, and the subsequent structural instability in parts of the northern side of the building.



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<sup>4</sup> South African Doctors (*n.d.*)

<sup>5</sup> A PUI refers to a person to be tested for COVID-19. Persons with acute respiratory illness with sudden onset of at least one of the following: cough, sore throat, shortness of breath or fever  $\geq 38^{\circ}\text{C}$  (measured) or history of fever (subjective)] irrespective of admission status.

<sup>6</sup> Parliament Research Unit (2022)



In total, the affected wards accounted for 270, which equates to one quarter of the facility's total bed capacity. The fire also disrupted vital outpatient clinics such as those offering services to HIV-positive patients, persons with multidrug-resistant Tuberculosis (TB)<sup>7</sup>, renal transplants, cardiology, neurology, and dermatology. In essence, the affected areas include Blocks 4 and 5 (Medical), as well as parts of Block 3 (Surgical). The immediate impact related to the closure of the following wards:<sup>8</sup>

- Psychiatry;
- Pulmonology;
- Cardiothoracic;
- Infectious diseases;
- Renal and neurology units, and
- Three Intensive Care Units (ICUs) i.e.: general ICU, cardiothoracic ICU and coronary care unit.

When the fire was detected, patients were evacuated to an emergency evacuation area, from which over 800 patients were transferred to various facilities across the province, such as Helen Joseph Hospital, Steve Biko Academic Hospital, East Rand Hospital and Dr Yusuf Dadoo Hospital.<sup>9</sup> Another significant strain was the closure of nearly 2 000 parking bays due. This has resulted in both staff and patients using the roads around CMJAH to park their vehicles. Given the prolonged roadside parking by staff members, some of the cars have been stolen which exacerbates low morale amongst members of staff.

CMJAH is Gauteng's main oncology hospital, but since the fire it has been outsourcing treatment to other hospitals.<sup>10</sup> Patient demand far outstrips the supply of cancer treatment as a backlog has built up due to COVID -19. It has been reported that there is a shortage of radiation, and other cancer treatment equipment, as well as staff shortages.<sup>11</sup>

## 5. CALLS FOR CMJAH TO REOPEN

Following the fire, expectations were that the hospital would be closed for a short period for essential repairs and swiftly re-opened. However, there have been lengthy delays due primarily to a number of health and safety compliance issues, which were detected after the fire. Departments that remain closed include medical emergency casualties, infectious wards and mental health.

Civil Society Organisations (CSOs), organised labour and professional groups have made numerous calls for the facility to be speedily repaired, and recommissioned. Due to the slow

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<sup>7</sup> TB – is an acronym of Tuberculosis and is defined as a bacterial infection that spreads through inhaling tiny droplets from the coughs or sneezes of an infected person. It mainly affects the lungs, but it can affect any part of the body, including the abdomen, glands, bones and nervous system.

<sup>8</sup> Mail & Guardian, (2021)

<sup>9</sup> Mail & Guardian, (2021)

<sup>10</sup> Sunday Times (2022)

<sup>11</sup> Sunday Times (2022)



progress on the repair, some calls have taken a shape of picketing at the facility's entrances, while others wrote to both the Office of the Premier and the President.<sup>12</sup>

## 6. PORTFOLIO COMMITTEE ON HEALTH OVERSIGHT TO CMJAH



On the 11 June 2021, the Portfolio Committee on Health undertook an oversight visit to CMJAH.<sup>13</sup> The Committee was informed that the hospital was non-operational at the time, due to the fire that began at 11h20 on 16 April 2021 in the special dispensary on level 2. The fire swelled in the evening, which led to a decision to evacuate 821 patients and affected health care workers to 17 different facilities across the province for safety purposes and continued provision of care. Thankfully, there were no fatalities or injuries other than a few cases of smoke inhalation that were treated and responded to accordingly.

The impact of the fire resulted in a partial collapse of the concrete ceiling of the parking garage, which threatened the areas in block 3 and 4 on the north side of the building. The closure of the entire facility (CMJAH) led to its clinical services being distributed to various health facilities in the province. This was followed by staff being deployed to all facilities where patients were transferred. Some of the staff members were transferred to facilities that would ordinarily refer to CMJAH to better capacitate these facilities in anticipation of the increased workload.

### 6.1. The impact of the closure of CMJAH on health users and health facilities in the Gauteng Province

It was reported that CMJAH has more than 1000 bed capacity, including 124 ICU beds that are out of service due to the closure. The impact is felt beyond the province of Gauteng as some healthcare users were transported on specific days from provinces like North West and Mpumalanga to receive various health care services including radiation and oncology care.

Since CMJAH is a speciality facility, its non-operation leaves a significant clinical vacuum that requires urgent intervention to ensure that health users are not further inconvenienced. In the interim, a mixture of health facilities including community healthcare centres (CHCs) were requested according to their speciality, or level of care to admit CMJAH health users to ensure the continued provision of care. CMJAH management underscored that the closure of its facility had a devastating impact on health users, as well as almost all health facilities in the province.

### 6.2. Walk about at CMJAH

Following the detailed presentation and discussion, the Committee undertook a walk-about to key centres within the facility. These were:

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<sup>12</sup> Eye-witness News, (2021)

<sup>13</sup> Portfolio Committee on Health (2021)



- **COVID-19 Vaccination Site at CMJAH:**

The site has both the requisite equipment and human resources to register the walk-in patients for and vaccinate as required. All nurses deployed to the site had were vaccinated.

- **Fire Ravaged Site at CMJAH**

The following update was available:

- Cordoning of the fire ravaged site;
- Propping the pillars of the affected structure;
- Due to the intensity of the fire, 1 pillar had collapsed and was being propped;
- Due diligence was being done to ensure the structural integrity and ultimate functioning of the affected block 3 and 4.

### **6.3. Debriefing meeting between the Committee and the MEC for Health**

In a meeting with the MEC, the Committee amongst other things, sought an understanding on the bottlenecks and resolution to the CMJAH given the resurgence of the COVID-19 infections in the province and the impact the closure has on the public health sector in the province.

In this meeting, the Acting HOD informed the Committee that he had just returned from a special meeting convened by the Acting Director General from the Premier's Office that was attended by HOD from the Department of Infrastructure Development (DID) and City of Johannesburg. He informed the Committee that the meeting failed to resolve the CMJAH matter because the City of Johannesburg insisted that prior to issuing the Certificate of Occupation, the facility should meet all compliance requirements as per statutory requirements.

## **7. NATIONAL DEPARTMENT TAKES OVER REPAIRS AT CMJAH WITH DBSA AS IMPLEMENTING AGENT**

After lengthy delays in the repairs of CMJAH, the National Department of Health undertook the repairs to the hospital.<sup>14</sup> This was after slow progress was made by the Gauteng Department of Health and the Gauteng Department for Infrastructure Development (DID) – the repairs completion date was projected as by 2027. Under the National Department of Health, with the Development Bank of South Africa (DBSA) as the new implementing agent the plan is to complete the hospital by end of 2023.

The Minister announced that approximately R1 billion was secured to fund the repair project and to ensure that the hospital is up to modern health and safety requirements. The Solidarity

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<sup>14</sup> ENCA YouTube (2022)



Fund funded the Accident and Emergency Unit in full and a storage area will be repaired by a donation from the Gift of the Givers.

According to the Minister of Health, corruption and sabotage have not been ruled out for slow progress on the project.<sup>15</sup> As a latest setback, the emergency unit which was funded by the Solidarity Fund, was almost ready, electrical equipment and appliances were subsequently vandalised. At the time it was anticipated that the Accident and Emergency Area will be ready by April 2022. It is anticipated that this will reduce the burden to other hospitals including Chris Hani Baragwanath Academic Hospital (CHBAH). According to the Minister of Health, one block will be completed at time. At the time, police forensic reports were outstanding, and the exact cause of the fire not yet determined.

## 8. STAFFING AT CMJAH: VACANCIES AND RESIGNATIONS



The fire had a major impact on health service delivery, and has caused immense instability and demoralisation amongst staff. There have been 220 staff resignations since the fire, and at present reportedly 677 vacant posts:<sup>16</sup> i.e. 355 vacant nursing positions, and more than 300 vacant healthcare-related posts. It was reported that prior to the fire, the total staff complement was 4 982, but this has declined to 4812, partly due to the resignations of 92 nurses and 68 doctors.

Reports suggests that the reduction of staff is due to resignations, retirements, death, and expired contracts. Reasons for resignations were attributed to better remuneration opportunities, promotions, and the high costs associated with travelling between home and work. There is a shortage of professional nurses, critical-care, and psychiatrically trained nurse specialists.

A reported 312 members of staff have been deployed to other hospitals to alleviate the workloads due to increased patient load since CMJAH's closure.<sup>17</sup>

## 9. PUBLIC PROTECTOR'S REPORT<sup>18</sup>

Following media reports about poor services from health facilities in Gauteng in 2020, the Public Protector (PP)<sup>19</sup> conducted site inspections at six hospitals during August 2020. This included a site inspection to CMJAH prior to its devastating fire. The PP found administrative deficiencies at the Gauteng Department of Health led to systemic challenges in the delivery of primary health care services. Some of the evidence and observations included systemic deficiencies such as the delay in the creation of positions and filling of vacancies. It also found delays in the distribution of Personal Protective Equipment (PPE), issues with the

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<sup>15</sup> ENCA YouTube (2022)

<sup>16</sup> The Citizen (2022) 17 March 2022 < <https://www.citizen.co.za/news/south-africa/3051771/charlotte-maxeke-hospital-faces-critical-staff-shortages/> >

<sup>17</sup> The Citizen (2022) 17 March 2022

<sup>18</sup> Please note this report predates the fire.

<sup>19</sup> Public Protector (2021)



quality of some of the PPE procured, and even shortages of soap. There were also delays in the procurement and maintenance of medical equipment.

The PP found that there is no dedicated ward to accommodate psychiatric patients at Charlotte Maxeke. The PP found that psychiatric patients were accommodated in an open space.

There was lack of contract management regarding waste disposal, which likely resulted in the service provider benefiting for 4 years without a competitive process being undertaken. There were delays in the storage, collection and disposal of medical waste at the hospital as a result of poor performance by the service provider.

Amongst others, the PP ordered the following remedial action:

- The supply chain management unit to be re-assessed to determine if it has the capacity and capability to respond to the procurement needs of the hospitals within the Province.
- Ensure that there is regular collection of bio-hazardous waste.
- Consider disciplinary action against officials responsible for the late payment of contract health workers, as well as the appointment of staff before positions were created.
- Ensure that the hospital complies with Section 38(1)(a)(i) of the Public Finance Management Act (PFMA) Act No. 1 of 1999, and that it convenes regular risk management meetings.
- Within 2022/23 MTEF the provincial Department of Health, and where appropriate in consultation with DID, as well as Gauteng Provincial Treasury ensure that there is an appropriate, functioning, designated medical waste storage space.
- Within 2022/23 MTEF the provincial Department of Health to consider identifying a dedicated ward for psychiatric patients in order to develop a cost-based strategy for planning and budget allocation over the MTEF for accommodation of psychiatric patients at the facility, subject to budget availability.

## 10. DEBT AND ACCRUALS IMPACTING SERVICE DELIVERY



Of the more than R556 million in debt owed by the national and provincial governments to the City of Johannesburg, three hospitals account for more than half the debt including:

- **Charlotte Maxeke hospital** — **Over R200 million**
- Chris Hani Baragwanath Academic Hospital — Over R66 million
- Helen Joseph hospital — Over R44 million

This is significant amount of debt for basic services, including water and electricity, necessary for the functioning of the hospital. The management of the CMJAH and the province should outline their plan for paying off this debt, and strategies for preventing this from occurring in the future.



## 11. CONCLUSION

The impact of the fire at CMJAH has had a devastating impact on critical health services. This has put additional strain on the Gauteng health services, with other, already overburdened hospitals reporting increased number of patients. In particular cancer treatment in the province is reportedly in crisis.<sup>20</sup> The return of CMJAH to full service is a matter of critical importance.

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<sup>20</sup> Sunday Times (2022)



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