13 June 2016

Huge applause for the KZN department of health as patients collect chronic medication closer to home and save on traveling costs

VISUALLY impaired grandmother Tryphina Mavaneni recalls a time when she was forced to pay R40 each time she needed to collect her chronic medication from Ndaleni Clinic in KwaMagoda, Richmond, on the KwaZulu-Natal midlands.

Speaking in IsiZulu, the 67 year-old says: "I cannot see, so I was unable to fetch the medication myself because it was too far away. It also used to be very costly. The person who used to collect my medication would have to take two taxis each way, hence the R40 that I had to pay each time." But not anymore. Since the advent of the Central Chronic Medication Dispensing and Distribution (CCMDD) programme, which was officially launched in Pietermaritzburg today, Ms Mavaneni is now able to fetch her medication – albeit with an aide - from the local Sobantu Community Church a mere five minutes from her home. She is one of scores of patients throughout the province who are benefitting immensely from the massive convenience and cost-saving benefits of the CCMDD programme. Until recently, CCMDD has only been piloted in the National Health Insurance pilot sites of Umgungundlovu, Amajuba and Umzinyathi.

But, following the roll-out of the programme throughout the province's 11 health districts, scores of people on chronic medication will now collect their medication from pick-up points that are closer to their homes, such as Community Halls, Churches, Schools and Tribal Courts throughout the Province of KwaZulu-Natal. This will help contribute towards the eradication of disease stigma, as well as reduce congestion at health facilities and the workload for healthcare workers. It means less travel times and expenses for people on chronic medication.

In a speech read on his behalf today, KwaZulu-Natal Health MEC Dr Sibongiseni Dhlomo said the CCMD programme was geared to ensure reduced waiting times; improved access to chronic medication due to the close proximity of pick-up points to patients and savings on traveling costs. MEC Dhlomo said the timing of the rollout of the CCMDD programme was opportune, as it comes just a month after national Health Minister Dr Aaron Motsoaledi announced that from September 2016, South Africa will start providing anti-retroviral treatment to people as soon as they are diagnosed with HIV.

"Indeed, this is a very big development as it entails that we are no longer going to wait for patient's CD4 count to drops to 500 but we are now going to be testing and treating. Beyond doubt, this marks a turning point for the lives of all South Africans. It also calls on us as a Province to do more since we are the ones with the highest burden of HIV and TB in the country. "As a Department it also means the nurses trained in the Nurse-Initiated Management of Antiretroviral Treatment (NIMART) that we have are just not enough. We would need to double the numbers and train more nurses. We then have to ensure that those that are already trained become even more efficient, so they can enroll many more patients."

MEC Dhlomo said the CCMD programme was crucial to the success of the Government's "test and treat" HIV initiative, as healthcare facilities will now be admitting a bigger volume of patients. "In order to help manage the anticipated demand, it is evident that we need to increase the number of non-medical sites where medication is collected, hence the relevance of the CCMDD programme." MEC Dhlomo said the programme would assist in curbing stigma as "no other person knows what is contained in the package as it caters for a variety of patients including those with HIV; Drug Resistant Tuberculosis (DR-TB) as well as Non-Communicable Diseases (NCDs). It is also bound to improve adherence to medication. Our people will continue living longer." MEC Dhlomo said he personally firmly believes in CCMD as he had seen it working when it was

pioneered at the South African Defence Force, when he served in the South African Military Health Services in 2003.

"Here we understood that soldiers needed to be deployed to different posts, including war zones outside the country's borders. These solders could therefore not present themselves all the time to our clinic and we therefore packaged their medication which we aligned with their deployment schedules. It worked.

"We are thus elated with the launch of the full roll out of the CCMDD programme to cover all Districts of our Province. This effort will go a long way in improving access to chronic medication even beyond normal clinic operating hours. In the NHI Piloting sites, we have seen it being greatly appreciated with the patients receiving notification by SMS that the medication has been dispatched and they in turn collect medicines at the Pick-up-Point at their own convenience."



Issued by the KwaZulu-Natal Department of Health