

KZN Health MEC pleased with NHI progress (more people have had better access to quality healthcare; there are moves to accelerate even more)

11 May 2018

More people have had access to better healthcare service in KwaZulu-Natal since the province started piloting the National Health Insurance in 2012. And, although there's still work to be done, health managers and staff at hospitals and clinics are better trained and equipped, and facilities at the three pilot sites – and elsewhere - are in much better condition than they previously were.

The emerged during a visit by KZN Health MEC Dr Sibongiseni Dhlomo to Uthukela District, as part of the first of a series of province-wide roadshows aimed at reporting to communities on NHI progress. The roadshows will also outline government's plans to help reduce the burden of diseases in KZN and also further improve access to quality healthcare – especially for the poor.

NHI is a health financing system that is designed to pool funds to provide access to quality, affordable health services for all South Africans based on their health needs, irrespective of their socio-economic status. In KwaZulu-Natal NHI is currently being piloted at three districts; Amajuba, Umzinyathi and Umgungundlovu.

Speaking in Ladysmith last night, MEC Dhlomo said he is pleased with the progress that the province has made in implementing the National Health Insurance: *"We are starting a roadshow for all districts, focusing on updates for NHI. We have not been updating South Africans for some time, and there is a possibility that we might lose focus on it, with people not knowing where we are. NHI is mainly meant to advantage the poorest. It is about getting everybody to buy into a process of saying, 'health is a public good, not a reserve for those who are rich, or those with a lot of money in their pockets.' We are extremely happy. "*



MEC Dhlomo

with Uthukela district director Dr Thandeka Zulu



isiZulu

"We already are seeing signs of NHI in our province in terms of visits by school health teams, family health teams and GP being part of clinic visits and consultations. We are very excited with this visit at Uthukela District because people are showing positive signs about NHI and they are saying we must accelerate it, so that it can be rolled out and benefit more people."

The poor stand to benefit from NHI because they don't have a lot of money to buy health services. They are the ones who are very keen to see it. I am really pleading with those who will be able to contribute to this fund to find it in their hearts... to say we need to have that social solidarity to get everybody to be part of it."

The Re-Engineering of Primary Health Care, which is in line with NHI, is being implemented throughout the province through 4 streams:

- Family Health Teams (Ward Based Outreach Teams),
- School Health Teams,
- District Clinical Specialist Teams and
- Contracted GPs/ Doctors to provide medical coverage in clinics.

Delivering the KZN Health Budget Speech earlier this week, MEC Dhlomo said: *"Through these teams the Department is able to provide essential services to communities outside of health facilities."*

"Over and above the mentioned teams, the Department is also making use of Community Care Givers (CCGs) as part of Ward Based Outreach Teams (WBOTs) to promote health and prevent diseases at a household level. We currently have 124 WBOTs throughout the province that are instrumental in linking up individual families who require referrals to healthcare workers and clinics."

"Our efforts fit in well with Operation Sukuma Sakhe (OSS) as the Department gets and attends to certain cases directly from a household or the War Rooms. Working at this level enables health workers to identify new ailments and make appropriate Clinical follow ups of clients requiring assessment and care referral to hospitals, PHC Clinics and palliative care facilities. These interventions have assisted us to prevent maternal, child mortality and morbidity within the community."

MEC Dhlomo said that between April and December 2017, UMzinyathi District with its 20 GPs had attended to 13 819 clients; UMgungundlovu District, which has 31 GPs, attended to 45 984 patients and Amajuba District with its hard working 12 Contracted GPs attended to 16 908 clients.

Among the most notable benefits of NHI, has been the aspect of GPs participating on the Health Practitioners Contracting programme, which has resulted in:

- Much improved medical coverage at clinics with GPs visiting them at least once a week, especially those in extreme remote areas;
- Clients are no longer bypassing the clinic because they know there is a Doctor available at appointed times.
- Reviewing of clients on chronic medication is now done by GPs at PHC level.
- Better management of the many complicated patients at PHC clinic level (ARV, diabetes, epilepsy, CCF, acute presentations etc.)
- Decongestions of our hospitals as clients seen by professional nurses are now referred to doctors on site rather than to the hospitals. These GPs have been able to work out patients at clinic for Tertiary hospital referral.
- Most importantly, these General Practitioners provide mentorship and guidance to nurses at the clinic; thus improving skills, knowledge and subsequently quality of care.

In addition to advances in the NHI legal framework, the following has also been achieved at the NHI pilot sites since 2012:

On leadership and Governance:

- Appointment of health facility managers (CEO's) with a health background;
- Appointment of highly experienced managers for level 2 & 3 hospitals;
- Competent District Managers appointed for all eleven districts;
- Reviewed financial delegations for health facility managers;
- Trained 43 senior managers to be Executive Leaders of Excellence;
- Trained 448 junior and middle managers to be health leaders for quality health services at operational level;
- Exposed 24 senior managers to be a cohort of transformation and change management champions.

On Infrastructure improvement and new facilities:

- 1 New hospital constructed in Pixley Isaka ka Seme Hospital, Ethekekwini;
- Construction of 16 New PHC Doctor's Consulting Rooms in the NHI pilot districts;
- Construction of three (3) New Community Health Centres (CHC's) or Mini-Hospitals, at Pomeroy, Dannhauser and Jozini.
- Built 17 New Clinics
- Spent over R886 582 355.00 on facility upgrades and maintenance.

The Department's NHI strategy between 2018 and 2022 aims to:

- Eradicate cataract surgery back-logs in the whole country and in KZN estimated at about 2 500 by the end of 2018
- Implement GP Contracting in the then NHI three pilot districts and develop a strategy of expanding to the remaining eight districts in 2019
- Once the NHI Bill gets approved by Parliament, the Department will start to expand on the contracting of other health professionals on a needs basis for rural facilities.
- The Central Chronic Medicine Dispensing and Distribution Programme - where people collect their chronic medication at schools, community halls, libraries closer to their homes - will be strengthened.