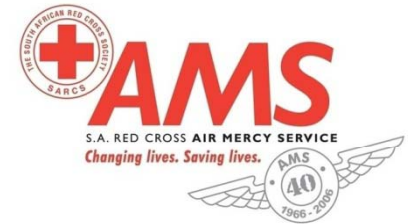




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Flying Doctor Service

The Health Outreach Programme and it's Impact on Service Delivery

Provincial Health Summit:
KwaZulu-Natal Department of Health
September 2011

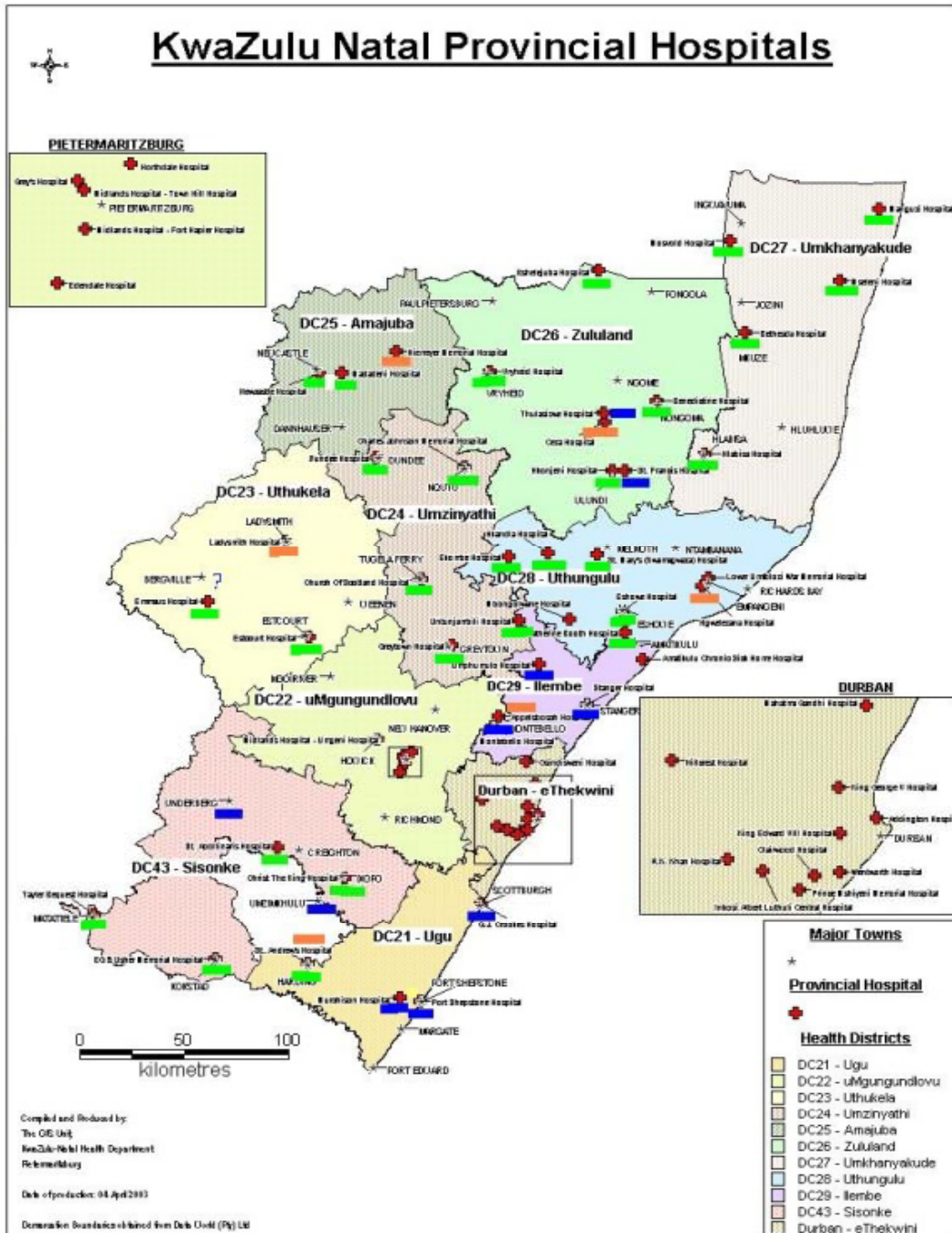
KwaZulu Natal Provincial Hospitals



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- 92 000 km²
- 9.3 Million Population
- Majority Rural Population
- Burden Of Disease
- Poor Communities
- Limited Access to Health Care
- Limited Health Resources
- Vast Distances
- High U5MR /M&M Rates
- High Accident Rates



Key Objective



Access to Health Care
+
KZN DOH Objectives



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KZN Model



- **AMS / DOH Collaboration**
- **Health Needs in the Province**
- **Planning of Support**
- **Specialist Sources**
- **Management of Logistics**
- **Measureable Outcomes / Statistics**
- **Reporting**
- **Integrated Management (KZN / AMS)**
- **Sponsorship Opportunity**
- **Developing Health System - Sustained**



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KZN Programme



- Support to 50 hospitals (monthly)
- Specialist Support to 25 000+ patients (yearly)
- 4700 attended Teaching Ward Rounds (2010)
- Surgeries Done 1279 (yearly)
- Doctors Participated 250 (per month)
- Private Support 300 specialist (yearly)
- Donations (equipment, sundries)
- Established a Clinical Quality System



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Role of the Outreach Specialist



- **Specialist Consults**
- **Teaching Ward Rounds**
- **Surgery**
- **Clinical Patient Review (QA)**
- **Clinical Updates/ Seminars**
- **Award of CPD points**
- **Appropriate / Early Referral**
- **Mentorship Programmes**
- **Team Approach (Plastics in Burn Patient)**
- **Statistics & Trend Monitoring**



ZS-SRH



FLYING DOCTOR SERVICE
COMMUNITY OUTREACH PROJECT IN ASSOCIATION WITH THE KWAZULU NATAL DEPARTMENT OF HEALTH



PILATUS
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EMRS

313

REMOVE BEFORE FLIGHT
REMOVE BEFORE FLIGHT



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Catering for Local Health Needs



- Shared Health Goals
- Conduit for Private Specialists / Volunteers to add capacity
- Decreasing U5 & Maternal MR
- Decreasing Government Costs for Health
- Development of Outlying Health Facilities
- Establishing a Clinical Quality System
- Sustainable Systems Creation
- Allowing Public Responsibility in Health

Cost Benefit Analysis Study KZN Health Outreach 2004

Cost to Province if NO AMS	15,684,119
Cost AMS Services	8,425,054
Savings for the Province	7,259,065

ACCESS and EFFICIENCY
are not opposite goals



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Value Added Services



- ENT Specialist Model Development
- Patient Follow-ups – Support / Quality Systems
- Retention of Specialist Resources (Brain-Drain)
- Managing the Volunteer Network
- Capacity Available in KZN (Aircraft/HR/Support Structures)
- Support to other Provinces / Countries
- Aeromed Africa Conference March 2012
- Creating African Solutions for African Problems
- Donor Support
- Development of Scarce Skills (PDP)
- Support health delivery (ICEE/other NGOs)



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Challenges



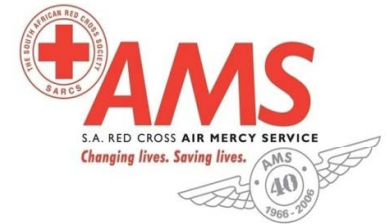
- Understanding Aviation
- Regulatory Framework
- Using Aircrafts as Tools for the Job
- Sharing this Model / Service
- Term of Contract
- Value Added Service
- Public Owned Entity – National Asset



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Outcomes



- More Effective use of Limited Resources
- Adding to the Specialist Capacity in KZN
- Access to Specialist Health Care (for All)
- Cost Efficiency - Benefit Analysis Study
- Decreased referral rate – local Treatment
- Decreased Waiting Times – next ENT app Dec 2012
- Decreased Out of Pocket Spending
- Refinement of Health Drainage System
- Establishing Relations (Consultant /Clinician)



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Together We Do More !



Thank You!



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