

Future direction of the district health care system

Role of the primary care doctors and family physicians in
this system



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- The DHS going forward
 - Supporting the Ideal PHC facility
- The Role of the Primary Care Doctor and Family Physician





Current Situation



Strengths



52 Districts across 9 provinces

- Mostly functional and render good service
- Management structures in place
- Clinical services strengthened by DCSTs
- Community services strengthened by WBPHCOTs and school health team
- Health Information management and use greatly improved
- Medicines are available
- Functional facility oversight committees providing community representation



Many Weaknesses



- Service delivery platform
 - Package of services
 - Role of environmental health
 - Supervision
 - Essential equipment



Many Weaknesses



- Health information management and use
 - Methods of data collection and data quality must be further improved



Many Weaknesses (continued)



- Human Resources
 - Management Structures at district level
 - Need to complete WISN process
 - Rational distribution of staff
 - Obtain funding for required positions
 - Ensure required management and clinical skills



Many Weaknesses (continued)



- Finances and asset management
 - Required delegations, management tools, skills
 - Required accountability



Many Weaknesses (continued)



- Governance and Leadership
 - Delegations
- Community Ownership
 - Functional facility oversight committees providing community representation
- Partnerships for health
 - Coordination of NGOs
 - Coordination with other government departments
 - Coordination with private sector

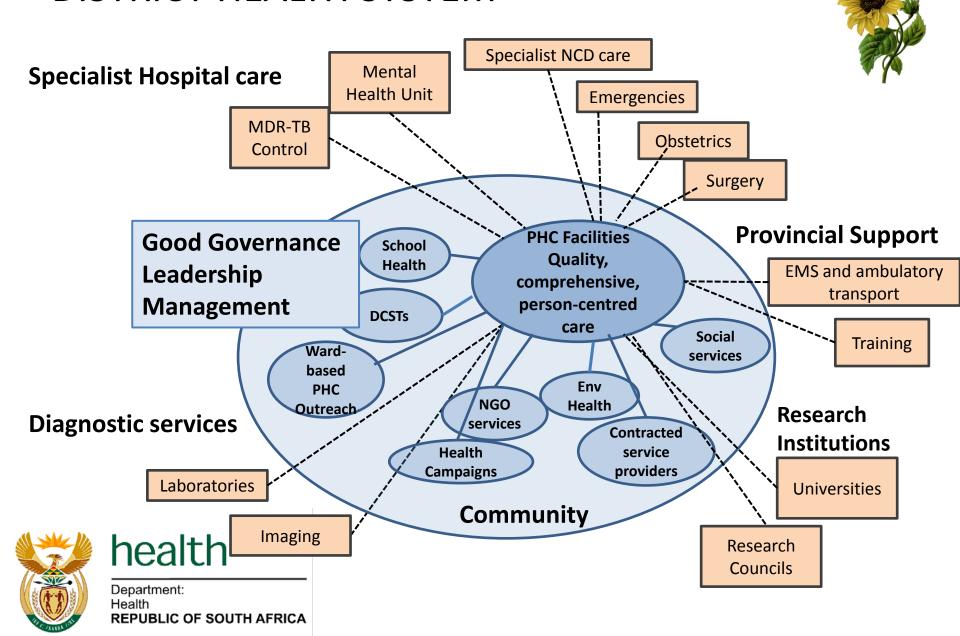




Going Forward



DISTRICT HEALTH SYSTEM





The Ideal PHC Facility — starting with the Ideal Clinic



DESCRIPTION



- A clinic that ensures the provision of quality health services to the community through:
 - Good infrastructure
 - Adequate staff
 - Adequate medicine and supplies
 - Adequate bulk supplies
 - Good administrative processes
 - Use of applicable policies, protocols, guidelines pertaining to diagnoses and treatment
 - Leveraging partner and stakeholder support
 - Cooperation with other government departments as well as with the private sector and non-governmental organizations to address the social determinants of health



District Health System that Supports the Ideal PHC Facility

- Capable District Management Team
- PTICRM
- Improved Procurement System
- Functional referral System



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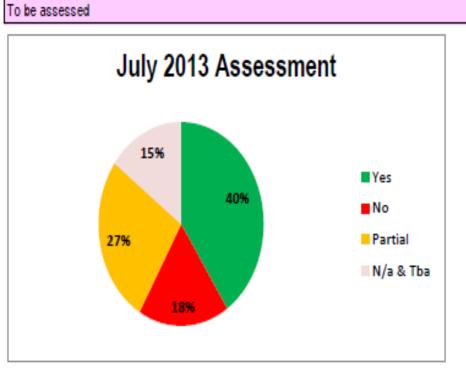


PREREQUISITES



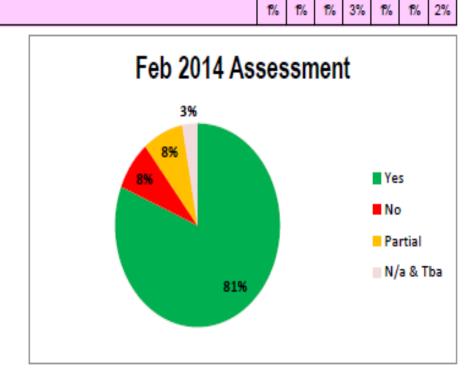
- Have the required **administrative processes** to ensure efficiency and effectiveness
- Have good infrastructure (building in good form, adequate space, essential equipment, and information and communication network and tools) to provide the required services
- Ensure continuity of care through an effective patient information system
- Integrate the services and functions of the district clinical specialist team (DCST), school health team and municipal ward based primary health care outreach teams (WBPHCOT) to improve population health outcomes
- Provide integrated chronic disease management (ICDM) to deliver integrated, patient centered care to
 patients with chronic diseases, encompassing the full value chain of continuum of care and support through the
 application and use of up-to-date clinical guidelines and protocols
- Have the required medicines, supplies and laboratory support
- Have adequate staff who have the required skills and uphold high standards of professional etiquette
- Have a doctor available for the required sessions per week
- Co-operate with stakeholders in the community to ensure quality comprehensive PHC services
- Have the required District Health Support Systems available to it
- Implications for National Health Insurance

(Tshwane District, Gauteng Province)							
SUMMARY PERCENTAGES	3	13	13	13	13	14	14
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Yes	41%	41%	49%	51%	66%	82%	82%
No	18%	16%	12%	10%	9%	8%	8%
Daráal	27%	20%	25%	28%	24%	Q%	8%



KT Motubatse Clinic

Not Applicable



14%

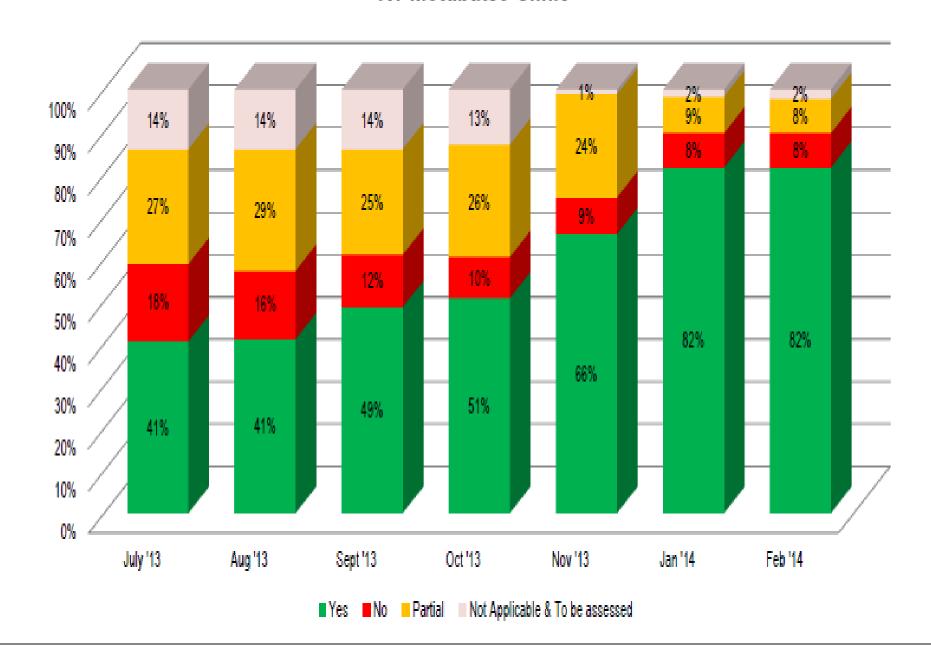
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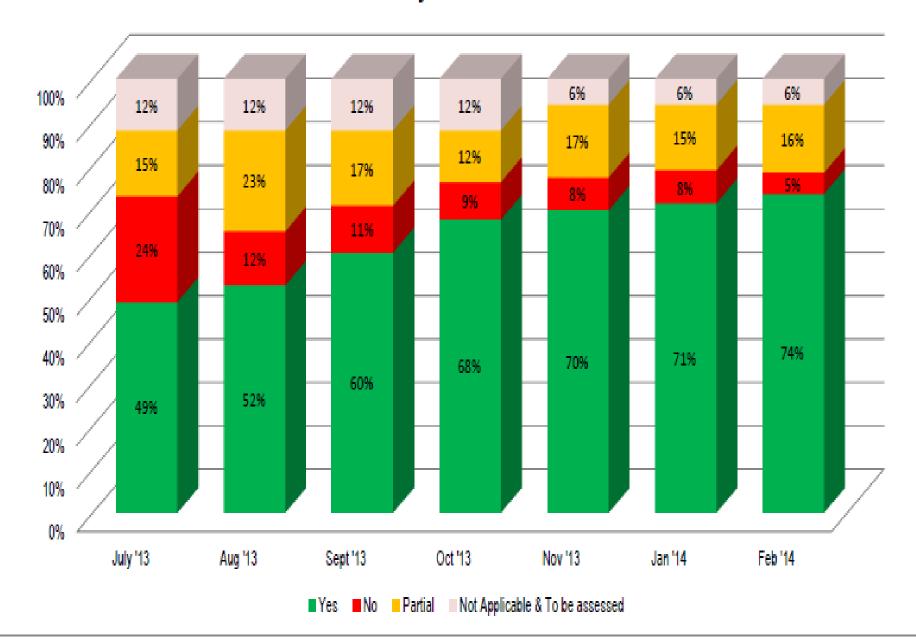
0%

During the first assessment only 41% of the 185 elements were in place, and during the latest recorded assessment in February 2014 a total of 82% of the elements were in place. Similarly during the first assessment 18% of the elements were definitely not in place and during the latest assessment this decreased to only 8%.

KT Motubatse Clinic



Ladybrand Clinic





The Role of the Primary Care Doctor and Family Physician

PREREQUISITES





Implications for National Health Insurance





THANK YOU FOR YOUR ATTENTION!



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