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EASTERN CAPE HEALTH SYSTEMS INTERVENTIONS

1. BACKGROUND

The National Minister and the Provincial MEC have after investigations and diagnosis of the problems undertaken in OR Tambo, agreed that there is a need to accelerate the current interventions coupled with coming up with sustainable solutions rather than a knee jerk approach to the vexing question of public health.

The intervention in the state of Eastern Cape Health System will accelerate the current work on improvement in the provision of health services in the OR Tambo District.

Many of the issues raised the established departmental team under the leadership of the HOD is acting on them as stipulated in the discussion section below.

The interventions will result in immediate visible changes whilst conducting in-depth assessment in order to provide lasting solutions to the challenges confronting the OR Tambo District.

It should be noted that these interventions will not be limited to OR Tambo as similar interventions will be rolled out in support of other ailing health facilities.

2. INTERVENTIONS

This section outlines the rapid interventions implemented to achieve visible changes whilst building up institutional capability for lasting change.

2.1 Availability of medication and suppliers and supply chain management

- Improve drug supply that bypasses depots
- Convert Mthatha depot into a control tower which also serve as warehouse for drugs and supplies in transit to the clinics and hospitals
 - Implications of converting Mthatha depot into a control tower are:
 - Drugs will not be delivered to Mthatha Depot
 - The current drug and supplies stock will not be moved to Port Elizabeth
 - Affected employees will be redeployed to beef up downstream activities at facilities

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- Increase the capacity to order and track drugs for clinics by acquiring a service provider
- Expand courier services for direct drug supply to clinics
- Implement Drug availability improvement plan which has jointly been developed by the national and provincial technical team composed of logistics and pharmaceutical including conducting readiness assessment and building drug management capability.
- Conduct readiness assessment and build capacity
- The intervention will result in the following
 - No drug stock outs
 - Reduce fraud and stealing of drugs
 - Shift risk to the supplier
 - Decentralisation of power to hospitals and districts in tandem with the supply chain management reform process.
- 16 hospitals which will order directly from suppliers have been identified
- Implementation of demander codes for direct delivery and phase out sub depots

2.2 Equipment

- The National Department will provide equipment for all facilities in OR Tambo District.
- The Province will procure equipment for other facilities utilising the revivification grant

2.3 Maintenance of Infrastructure

- Review the infrastructure grant; prioritise urgent disrepair in all facilities
- Shift funds to undertake critical maintenance, repair and rehabilitation of all other facilities
- Review all infrastructure for completion and closure
- Source national centralised fund and amend the Budget Statement 4 list.
- Revitalise current infrastructure rather than adding new one
- Change reporting channel for infrastructure to HOD

2.4 Human Resources

2.4.1 Recruitment and payment of service benefits

Recruit and retain health professionals and critical staff required for a functional health care system.

Use a portion of the savings unfilled funded vacancies and additional funds that will be allocated during the November adjustment estimates to pay HR accruals with special focus to correcting salary levels and other prescribed benefits.

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Payment of HR accruals will go a long way in stabilising the Department, retaining critical health professionals and boosting employee motivations.

2.4.2 Organogram

In finalising and implementing the organisational realignment process, the following will be key:

- Use the outcomes of the verification exercise to identify excess capacity to even out the mismatch in capacity throughout the province.
- Service delivery platform to enable the giving attention to:
 1. Social determinants of health
 2. Public health intervention focussing to improved district health system, disease burden, neonatal, nutrition, communicable and non-communicable diseases.
 3. Improved clinical outcomes and attending to efficiency and optimal utilisation of current resources, implementation of core health standards.

The organogram has got to pay attention to and enable delivery of the three key levers of the service delivery strategy mentioned above.

2.5 Leadership and management

The leadership and management of the all health facilities must receive attention in order to improve the day to day operations and provision of quality health care in these facilities. The following actions are being undertaken.

- Recruit Chief Executive Officers and other critical management positions in facilities namely clinical governance and nursing managers.
- Empower Chief Executive Officers and District Managers by delegating more functions for speedy decision making and enhanced service delivery. The empowerment will follow a stepped approach based on the results of capacity assessment.
- Ensure sufficient funds for the non-negotiable and tie it to the performance of Chief Executive Officers including strengthened accountability and consequence management.

2.6 Budget

The budget management regime of the department will progressively be underpinned by the principles of operational efficiency, allocative efficiency and aggregate demand.

In the MTEF period of 2014/15 the department will with the support from Provincial Treasury develop a five year budget plan dealing with urgent critical funding requirements to make core service to function. This transition budget will then allow for reconfiguring a zero based budget aligned to the revised service delivery model.

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2.7 Institutional capacity

Strengthening of corporate governance is key to a stable and functional organisation and therefore:

- Attention will be given to sustaining the current financial and supply chain management reforms including serious implementation of the organisational audit improvement plan.
- Fraud prevention and anticorruption
- Information management will be strengthened to enable better planning, decision making, reporting and accountability to oversight institutions.
- Delegation of financial, human resources and core business functions to the levels closer to the citizens. The delegation of powers will be commensurate to the capacity at every level of delegation.

3. LINKS TO GOVERNMENT STRATEGIC PRIORITIES

The interventions are in line with the Medium Term Strategic Framework which is derived from the electoral mandate of the ruling party. The intervention is in line with the 10 point plan with special reference to the point which refers to overhauling of the health care system and improving its management. Linked to the 10 point plan is the Negotiated Service Delivery Agreement (NSDA) which is intended to assist the country to meet the Millennium Development Goals (MDGs) and improve monitoring of the health system.

4. POLITICAL IMPLICATIONS

The implementation of the health system intervention will result in :

- improved reputation and image of the Eastern Cape Government
- improved health outcomes will increase citizen confidence and sense of ownership in the public health system
- Improved citizens perceptions of a caring government
- sound employment relations and stabilise the department

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DR T D MBENGASHE

HEAD OF DEPARTMENT

17/10/2013

DATE

COMMENTS BY THE MEMBER OF THE EXECUTIVE COUNCIL FOR HEALTH

We regret the missing of the date of
11 October 2013.

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MPL S H GQOBANA

17/10/2013

DATE