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ASSIGNMENT IV

Part Four Results presentation and discussion

TITLE

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RESEARCH PROJECT MODULE

525

Malembe Mpofu

Course Instructor: Dr Lekunze, JN & Prof Christoff Botha

Result presentation and discussion

Introduction

The research aims for this particular study is to investigate and to gain a deeper understanding of why our health care system has seemingly been failing and shows no sign of drastic improvement despite it receiving exorbitant amounts of money and not yielding any immediate nor long term results. The goal is to find out which sub departments are suffering from underfunding as well as which ones no longer need the large amounts of funding they receive and based on that information a new concise plan may be drawn to help reroute funds to where they are needed because the problems our health care system faced twenty years ago may not necessarily still persist today nor be a necessity as compared to some of the new issues and diseases we are faced with today and for that reason this study needs to be carried out.

This study aims to find out precisely how the allocation of the budget to the department of health negatively or positively affects the delivery of quality and efficient health care and how the use of this budget can be adjusted to further bring efficient and quality health care to the low income and underprivileged citizens of South Africa.



Personal characteristics

For this particular study six interviews were conducted. The participants consisted of two nurses, two medical doctors and two admin staff all of which either have vast experience working in public hospitals or are still working in public hospitals or within the public health sector.

Nurse 1: works at the Steve Biko academic hospital in Pretoria but also has experience working at private hospitals such as Medi-clinic mid-stream and Netcare Unitas.

Nurse 2: worked at Chris Hani Baragwanath public hospital for more than 20 years. She experienced the change from apartheid to post-apartheid along with all the trials and tribulations associated with the change in eras and way of running the facilities. She is now a nurse for the department of correctional services

Doctor 1: He has worked at various public hospitals such as Chris Hani Baragwanath hospital, Charlotte Maxeke academic hospital and has gone as far as Limpopo to work at Nkhensani hospital. He has now gone on to open his own surgery in central Pretoria

Doctor 2: He has worked at Helen Joseph as a locum doctor while doing his community service and is currently working as Charlotte Maxeke also known as Johannesburg general hospital

Admin 1: She used to handle the procurement and ordering of medication and supplies at the Mothlabe local district clinic and has 30+ years in this pos 

Object 

To what extent does the allocation of the budget to the department of health negatively or positively affect the delivery of health care at public health care institutions?

Nurse 1: "the most concerning issue we as nurses within the public health care sector face is that of understaffing. Hospitals lack enough staff, not only nurses but doctors and cleaners which results in there being very poor delivery of quality and efficient health care to citizens due to the fact that many staff members often have to double up on their duties. This leads to a lot of nurses opting to go the route of private health care. The pay is better for starters and your responsibilities are clearly defined and explained, there is no confusion as to what needs to be done and what is expected of you as a nurse."

Nurse 2: "After more than two decades of service in the public health sector and having experienced the switch from the apartheid government to the post apartheid government. I have had the opportunity to observe both how both governments ran their health sector and based on my observation the issue of understaffing seems to have been the biggest downfall of the transition from the apartheid government to the post apartheid government. This issue has led to other subsequent issues such as the delapidation of buildings and deterioration of hospital facilities and equipment. Having changed from the health department to correctional services I see that the issue is not with budget allocation but rather how each department spends that allocated budget. Correctional service has no shortage of staff nor is there ever a lack of equipment or medication. The issue arises when we have to take our inmates to public hospitals for treatment of chronic illnesses or serious injuries. That is where we see the difference in administration.

Doctor 1: "Despite my love for my job working in the public health care system poses the issue of having to use facilities that are poorly managed. This stems from having a deeply rooted problem of a management and leadership crisis, this crisis then trickles down and leads to having to use old and outdated facilities. At times the patients lack beds and basic

necessities or appropriate medication which leads to us having to send the patients to other hospitals or maybe even increasing the amount of time they have to spend at the hospital in order for us to either source and order the correct medication or find an alternative form of medication. This slows down the service delivery process and really hinders with the work we do as doctors and more so the goals we try and achieve in terms of making people's lives better.”

Doctor 2: “not having had much experience working with in the public health system i have seen more good than bad in the system. Yes it does possess its flaws and can definitely be tweaked in order for it to operate its maximum potential. Public hospitals such as Chris Hani Baragwanath and Steve Biko academic hospital boast some of the most skilled and experienced doctors in the country, from general practitioners right down to specialists. They have some of the best cancer treatment facilities in all of Africa. Together with hitech machinery and equipment to match that of private healthcare institutions. The obstacles come in with the maintenance of facilities and equipment, some machines might be out of operation for months on end due to slow and poorly managed maintenance contracts forcing us to turn away patients or sending them to other hospitals where they will now find themselves dealing with double the amount of patients than they usually would. Retention of staff is a serious issue within the public health sector mainly due to poor working conditions

Admin 1: “having started off as a nurse at the Motlabe district clinic in the North West province i have vast experience as well as know how when it comes to the operations and daily functions of a clinic. I am well aware of what is needed from a staffing perspective, procurement of medicines and equipment, cleaning services and the maintenance of facilities. I was lucky enough to witness the changes of government and how it affected the running of our clinic and one thing I can say for sure is that the budgets have gotten larger but the quality of healthcare has dropped. I come from an era where medication and health care was fully subsidised and now patients have to dig in their own pockets in order for them to receive basic healthcare let alone some medications.”

Admin 2: “ My job as a clerk at Helen Joseph hospital in johannesburg can be at times rewarding yet very frustrating. I am tasked with the job of logging and recording new and old patients, this is often a strenuous process because almost all of our system is done on paper

and we still use a filing system to keep records of all our patients and their medical history. This form of record keeping is outdated and does need improvement as patient records do get lost, another problem we face is the transferring of patients from one hospital to another, this old system doesn't allow for us to do so quickly and efficiently as we have to either courier their records or send them by hand with the patient which is high risk. Around the hospital we have seen new wings being built which will be able to house more patients, especially due to the corona virus we have received several new beds which has been and will be of great help to the housing and treatment of more patients.



Objective 2

which areas or departments within the department of health would you say require the most improvement?

Nurse 1: " the department of health i believe has a big enough budget to allow for them to increase the number of staff they have at hospitals more so large public hospitals where by we know overcrowding is a problem. I think if they were to concentrate their efforts on hiring more nurses, more cleaners. This would go very far in delivering efficient and effective health care to South Africans. There are many nurses and nursing institutions where nurses graduate and are reluctant to go and work in Gauteng's busiest hospitals because the work they do is not met equally by the pay they receive."

Nurse 2: "we know that many of our hospitals have been around for many years and this is the reason why they should be better looked after and have money put into them to upgrade the wards, surgical facilities and other essential parts of the hospital. The building of a new hospital would be much more expensive than taking the time to look at the ones we currently have and fixing what needs to be fixed and in the process finding eligible and willing people who will do the job justice. Improved infrastructure is the first step to improving the quality of healthcare provided especially in terms of making the nurses job a lot easier."

Doctor 1: "the biggest conflicts i had with hospital managers was the lack of medication at times and others beds. It is disheartening as a doctor to go into a ward and you find your patient on the floor not even on a mattress but on blankets brought by family members just so they can keep their loved ones off the floor. Bare in mind these people are sick, elderly and in pain and when you approach hospital management to complain they will tell you they

are waiting for a bed to open up. This comes as a surprise because how can a hospital admit more patients than it has beds and to prove that there is a service delivery issue. How are patients not getting treated quickly in order to open up more space for more patients. This problem needs to be addressed and dealt with right from management and leaders in government.”

Doctor 2: “as a “new kid on the block” I have not as yet experienced any dampening hardship in my few years as a doctor, although one complaint I can attest to is that of machinery and equipment being out of order. I feel as though a better service and maintenance regiment or deal can be made with the manufacturers of these machines. It seems as though the private contractors put in place to deal with such problems is failing because we will find ourselves weeks without a xray machine or a CT scanner which means we are now unable to help patients or accurately diagnose them. The biggest shock came when the corona virus began and we had a shortage of beds and ventilators and we found ourselves borrowing from the private sector which only has a fraction of the budget we do. In my opinion the procurement and purchasing departments as all public hospitals need a relook.”

Admin 1 : “as someone that worked in the frontline of procurement it is safe to say that all the funds are available to enable us to work at full capacity and to the best of our ability. The problem arises when payment and delivery is needed in order for us to receive our goods and for the supplier to receive their payment. Somewhere between those two communication channels there is a break in the chain. There will come a time when all the orders have been placed but the supplier will tell you they cannot deliver your goods due to there being no payment. This becomes a blow to us because we are not able to work. For example if we look now during this pandemic nurses refused to work due to lack of PPE's but billions of rands had been allocated specifically to combat the issue of PPE's. This means somewhere along the line there is a major problem whether it comes from government or hospital managers it remains unresolved.”

Admin 2: “the problem i think is facing our government and specifically the health department is that we are trying to resolve new problems with old solutions. I feel as though a new approach is needed, a different look at the department is needed in order for us to be able to combat these ever evolving problems we need new ideas. For example systems such as home affairs or the traffic department whereby all patients' history are stored on a national

data base. This will enable them to go to any public healthcare facility and that facility will have their full medical history at the click of a button.”

Objective 3

how can the department of health further improve to bring efficient and quality public health care to all South Africans?

Nurse 1: “an increase in the amount of health workers would do the department of health a great service as of right now. This does not just mean in hospitals but across the board. If they can increase the number of people that are involved in health department we would see a very drastic change ² in the way that our country’s health care system is shaped and operates.

Nurse 2: “there are many problems within the public health sector and they can’t all be solved but i believe if the health minister can sit down and really hear the cries that health workers are facing i feel as though a restructuring of the budget would do the department of health a great deal of good.”

Doctor 1 : “mismanagement is a plague that haunts our country as a whole especially in the public sector whether it is health, education or any government entity and in order for us to get our country to where it needs to be we need to fix these issues of mismanagement. We should begin by looking at what works and what does not. If we have tried a certain system of method for years and we do not see progress we should abandon it and set our quest on a new venture which could possibly be the solution.”

Doctor 2 : “South Africa has the potential of being one of the leading countries in the world when it comes to medicine. We have the resources and skills to achieve that goal we just need them implemented in a positive way in order for us to get the utmost best out of these skills and resources. With that being said we cannot keep on repeating a vicious cycle of keeping our people oppressed and suffering for services they should readily have access to and be able to receive the best service possible.”

Admin 1: “having gone from working in the clinic to being a member of the ruling municipality i have seen that misappropriation of funds is what accounts for poor service delivery not

only within the health department but our government sectors as a whole. Not enough checks and balances are in place to ensure that the people who are chosen to carry out a certain task or job are doing so and are completing these jobs.”

Admin 2: “as mentioned before i feel as though we are fighting new problems with age old solutions which were efficient and successful to a point but are no longer relevant or appropriate for the problems we currently face. If we want to see an improvement in the health department we need to start implementing new technological advances that will help not only hospital staff but the citizens of this country as well.”

Relationship test r



Nurse 1 urges that an increase in the number of health workers involved in the daily activities within the health department would better the efficiency and quality of healthcare the citizens in South Africa receive from public healthcare institutions. Based on a study carried out by the health systems trust there is only 1 nurse and doctor per 1000 citizens within the public health sector in South Africa (Coovadia et.al 2009). This further strengthens nurse 1 argument that there is an issue of understaffing in the health department and it is a contributing factor to its poor performance.

Nurse 2 argued that the main issue within the department of health and is an issue that needs immediate attention is that of restructuring the use of the budget given to the health department. Based on world rankings released by the world economic forum, South Africas health system is performing below par solely by looking at the amount of money that is invested annually into the healthcare system and the results they see (health systems trust 2019).

Doctor 1 blames the fact that in order for us to see an improvement in the way which the department of health and its facilities are run we would need to have a change in management and leadership which could ultimately lead to the improvement of how the department is run. A weakness in health systems management has led to poor quality of care in key programs. Operational shortfalls, insufficient delegation of authority, low worker morale and insufficient leadership and delegation (Harrison, 2010).

Doctor 2 feels as though a lack of innovation and forward thinking into addressing the current problems we are facing within the health sector is the reason why we seem to be going

around in an endless circle of poor healthcare and exorbitant amounts of money being invested with no positive return as supported by (Harrison 2010) ¹ A weakness in health systems management has led to poor quality of care in key programs. Operational shortfalls, insufficient delegation of authority, low worker morale and insufficient leadership and delegation.

Admin 1 argues that a lack of accountability in terms of having checks and balances in place in order to ensure that private contractors indeed do what is required of them is the kink in the chain as to why citizens of this country are receiving below par healthcare from the public sector further strengthened by (Harrison 2010).

Admin 2 feels that age old solutions for evolving problems are the shortfall when it comes to the health department being able to provide efficient and quality health care to its citizens. South Africa is ranked 132 out of 144 countries in the world based on their health outcomes (Coovadia et.al, 2009). In a country where health care should be a basic and easily accessible need that statistic is alarming

Multivariate results



Based on the results gathered from the interviews i conducted i was able to reach the conclusion that my participants found that there was more bad than good that they could find when it comes to identifying the negatives of positives the exorbitant amounts of money our government spends on public healthcare yet it remains one of the poorest performing sectors in our government departments as well as on a global ranking. Five of my six interviewees based this department's failure solely on poor management and leadership across the board. From our government officials right down to the management staff of hospitals and clinics. This may seem to be a dampening result but has positives associated with is, this means facility and staff wise we are able to compete with some of the world's leading health institutions for us to reach that level we just need the right people who will delegate and lead in such a manner that we are able to operate efficiently and effectively using all available resources to serve the people of our country.

One participant begged to differ and said the manner in which we approach our problem solving within the public health sector is the issue. She alluded to us using ago old solutions to solve new age problems which is not always the case of tried and tested methods. If we

wish to keep up with other developing and developed countries we should begin thinking like them when it comes to addressing evolving social issues.

Correlation analysis

Based on the results gathered from the six interviews conducted and after careful reevaluation of my literature review I have come to the conclusion that many if not all the issues which have been highlighted by reputable scholars and leading minds within the health sector have been further highlighted and brought up by the interviewees. Issues of leadership and management and South Africa's stagnant technological advancements have been to blame for the little progression our country has made in terms of medical advancements and the race to be one of the leading countries in the medical field.

Summary

In this chapter there are transcriptions from the interviews conducted of two nurses, two doctors and two admin staff who either were or still are employees in the public health sector. The transcriptions of their interviews were summarised and presented in alignment with my 3 research objectives which are: Objective 1: To what extent does the allocation of the budget to the department of health negatively or positively affect the delivery of healthcare at public healthcare facilities? Objective 2: which areas or departments within the department of health would you say require the most improvement? Objective 3: how can the department of health further improve to bring efficient and quality public health care to all South Africans? The data was then compared to literature reviewed in the literature review and then had the correlation discussed as to whether there were any similarities between the secondary and primary information gathered and if so what this correlation is and if not how the sets of information differ.

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