

EXCLUSIVE: NHI pilot projects fail to reach targets

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The public health system is in crisis, and its flagship programme does not offer a better deal for patients

Hospitals and clinics in the government's flagship National Health Insurance (NHI) pilot programme are failing to improve any faster than those in the rest of the country, according to inspection records obtained from the Office of Health Standards Compliance.

The records reveal a public health system in crisis.

Among the 1,427 facilities inspected in the four years to March, just 89 of them scored a pass mark of 70% or more.

Facilities fell short on matters ranging from the availability of medicines to infection control.

Improving the quality of the public health system is a vital part of the government's preparation for NHI, and the data raise tough questions for the government about why its investments in its 11 NHI pilot districts are failing to translate into a better deal for patients.

The Treasury initially allocated R1bn for the pilot programme, but then slashed funding in the face of slow spending by the provinces. The latest figures from the Department of Health, which oversees the grant, show the NHI pilot districts have collectively spent R145.7m of the R200.4m allocated via the NHI grant in the four years to March 31.

Analysis of previously unpublished data obtained from the watchdog, using the Promotion of Access to Information Act, show that it conducted repeat inspections — in some cases up to three or four times — in 110 public health facilities in the 11 NHI pilot districts between March 2012 and March 2016, yet most of them showed little or no improvement.

Only 25 (22.7%) of these facilities improved their scores by 20% or more. Their performance is even more startling when seen against facilities outside the NHI pilot programme, which fared marginally better: 210 facilities were inspected more than once over the same period, and 67 (31.9%) improved by 20% or more.

The facilities' final scores are based on the results of 13 sub-scores, which are in turn made up of dozens of measures, risk-rated so that those considered to be vital to life and limb — such as the availability of adrenalin or operating theatre back-up generators — are weighted more heavily than less life-threatening factors, such as the availability of paracetamol.

The Office of Health Standards Compliance's own documents say facilities that fail to reach the compliance threshold of 70% should have been re-inspected within six months, yet the records show just 56 of the 936 facilities that scored below 70% between March 2012 and September 2015 have received a repeat inspection.

"We [initially] set a benchmark of 70% but we realised that was the majority of facilities, and with our current resources we were not able to go back and reinspect them," said deputy director for early warning systems Keketso Phetlhe. The watchdog had consequently lowered the threshold for reinspection to 50%, and aimed to reinspect 25% of those failing to meet this target in the current financial year, she said.

According to acting CEO Bafana Msibi, the watchdog has 17 inspection teams of five inspectors each, which make unannounced visits to hospitals and clinics. There are more than 4,000 public health facilities, of which almost 3,200 are clinics.

The office's aim is to inspect these facilities at least once every four years.

The Department of Health's deputy director-general for primary healthcare, Jeanette Hunter, said the watchdog's sample of clinics and hospitals was biased and focused on underperforming facilities, and therefore no conclusions could be drawn about the NHI pilot districts from its data.

By TAMAR KAHN in Business Day