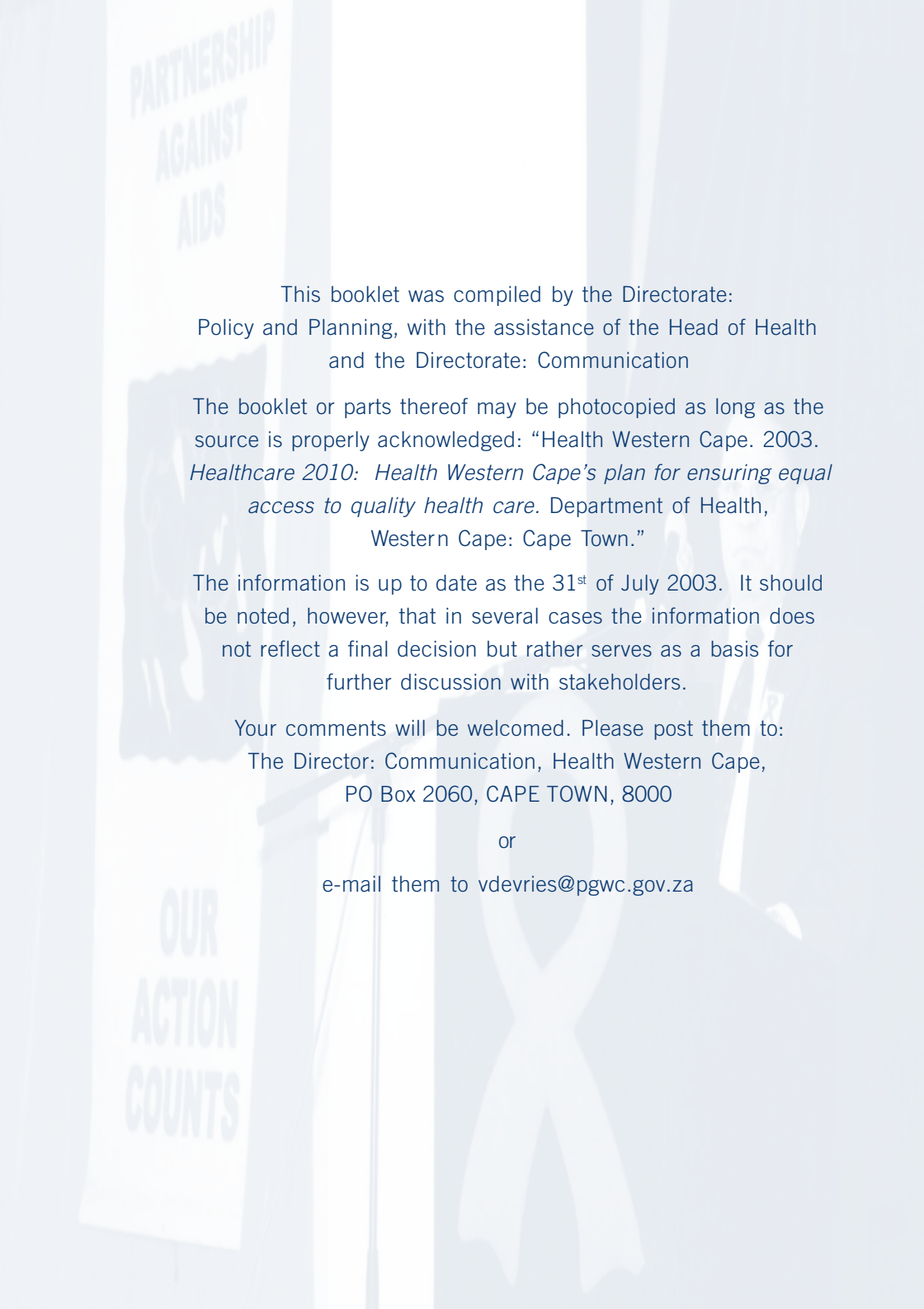




HEALTHCARE 2010



HEALTH WESTERN CAPE'S
PLAN FOR ENSURING
EQUAL ACCESS TO
QUALITY HEALTH CARE



This booklet was compiled by the Directorate:
Policy and Planning, with the assistance of the Head of Health
and the Directorate: Communication

The booklet or parts thereof may be photocopied as long as the source is properly acknowledged: “Health Western Cape. 2003. *Healthcare 2010: Health Western Cape’s plan for ensuring equal access to quality health care.* Department of Health, Western Cape: Cape Town.”

The information is up to date as the 31st of July 2003. It should be noted, however, that in several cases the information does not reflect a final decision but rather serves as a basis for further discussion with stakeholders.

Your comments will be welcomed. Please post them to:
The Director: Communication, Health Western Cape,
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or

e-mail them to vdevries@pgwc.gov.za

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MESSAGE FROM MR PIET MEYER

PROVINCIAL MINISTER
OF HEALTH
WESTERN CAPE



A promise that I have made repeatedly over the past few months, and that I am dedicating myself to deliver on, is that the Western Cape Government is committed to the provision of quality, equitable and accessible services to all its people. In this regard the Health Department has committed itself to a vision of improved health care within the existing resource constraints.

We plan to achieve this lofty but realizable goal through the successful implementation of **Healthcare 2010**, Health Western Cape's long-term strategic plan. This initiative envisages reshaping the services to focus on primary level services, community-based care and preventative care. These services would be adequately supported by well-equipped secondary and highly specialized tertiary services. The steps have been necessitated by the HIV/AIDS epidemic, the burden of trauma and the need to provide services within the available funds amongst other reasons.

A significant area of expansion will be the delivery of specialist services within the Regional Hospitals. This will make the delivery of specialist services not only more cost-effective, but will also bring these services nearer to those



communities that require them most. We recognize that these changes cannot be brought about overnight and therefore we view the outer years of the current three-year funding MTEF (medium-term expenditure framework) period as the starting point for these changes. In order to make Healthcare 2010 a living reality, however, we have already commenced the process to achieve this far-reaching vision. In particular I have committed myself to the upgrading and improvement of the Emergency Medical Services that provide an essential safety net for the people we serve.

Things are difficult in Health. They have been so for some time, and they will continue be so for some time. As Martin Luther King said more than 30 years ago, however, if we have faith, commitment and courage we can “carve a tunnel of hope through a mountain of despair”. I am convinced that we are already carving our tunnel of hope.

FOREWORD BY PROFESSOR CRAIG HOUSEHAM

THE HEAD OF HEALTH



When I qualified as a medical doctor more than 20 years ago. I was idealistic and full of expectations. Now, having been a practising doctor, an academic in the health sciences, and the head of two health departments, I remain idealistic. The difference is that now my idealism is tempered by the reality that the health needs of our people outweigh the resources available to meet those needs. The challenge to all of us is to balance the needs with our resources to the best of our ability and for the greatest common good.

The Department of Health in the Western Cape experienced considerable difficulty remaining within budget during the 2001/2 and 2002/3 financial years. Fiscal stringency measures, as necessary as they may be, have been unpopular with staff, patients and other stakeholders alike. The negative publicity generated by these measures has detracted from the excellent work done in delivering health services in the province.

The Department is committed to providing equal access to quality health care for all of the people of the Western Cape. In spite of the fiscal constraints, the Department has continued to strengthen programmes aimed at combating HIV/AIDS, TB and Trauma. These three areas, together with so-called “lifestyle diseases”, form the major burden of disease in the province.



During 2002 the Department produced a strategic plan for the reshaping of public health services in the Western Cape. This initiative, **Healthcare 2010**, maps a way forward that will substantially improve the quality of care of the health service and simultaneously bring expenditure to within budget. Based on the primary health care approach, **Healthcare 2010** proposes a shift of patients to more appropriate levels of care with commensurate cost savings.

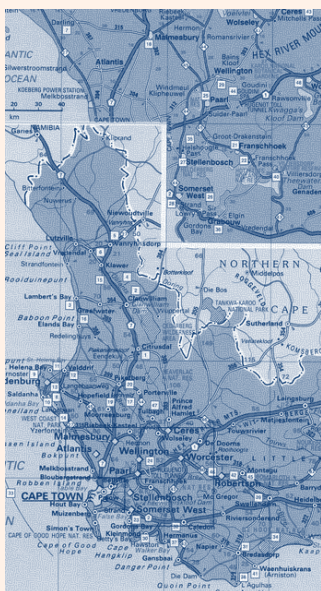
The 2003/4-year has been dedicated to detailed planning for the implementation of Healthcare 2010. Whilst the detailed planning is in progress it is important to ensure that all realignments are in the direction required by **Healthcare 2010**. **Implementation will thus proceed without delay.** The reshaping of the health services will begin in earnest in the 2004/5 financial year.

All over the province where I have been interacting with Health staff and other key stakeholders, I have come across people, facilities and projects that have energized my desire to make Healthcare 2010 work. Regrettably, in some cases they have given me a clear idea of what we don't want our Health services to be like. However, in several places they represent a model of what we do want. It is the latter that should encourage us and strengthen our belief that with Healthcare 2010 we are heading in the right direction.

The implementation of **Healthcare 2010** will require discipline, dedication and resolve. Hard decisions must be taken now to yield positive results later; and these positive results will benefit the patients who come to us for good quality health care.

OVERVIEW

Healthcare 2010:
A plan to ensure
equal access to quality
health care



The challenges:

- Improve substantially the quality of the health service.
- Simultaneously bring expenditure to within budget.

The strategy:

- Reshape public health services in the Western Cape to focus on primary-level services, community-based care and preventative care:
 - 89% of acute contacts at level 1; 8% at level 2; and 3% at level 3
 - 99.5% of chronic contacts at level 1; and 0.5% at level 2.
- Expand delivery of specialist services within the Regional Hospitals to make them more cost-effective and bring them nearer to communities who need them most.
- Adequately support these services with well-equipped secondary, appropriately staffed and highly specialized tertiary services.

The plans:

- **Service Delivery Plan.** This will define and quantify the health services required by region, district and community within the required shape.
- **Infrastructure Plan.** This will provide buildings, equipment and maintenance in line with service requirements as set out in the Healthcare 2010 Service Delivery Plan. An integral part of this plan is to max-

imise the value of assets by fully utilising existing facilities and exploiting under-utilised capital stock to garner additional funding by various strategies.

- **Human Resource Plan.** This will enable facilities to be staffed appropriately and will require a revision of the existing staff establishments.
- **Financial Implementation Plan.** The allocated budgets will be linked to measurable, time bound objectives for the medium-term expenditure framework period and beyond to give effect to the restructuring of the Health services.

The implementation of the plan:

- Evaluate all jobs.
- Determine packages of health services per level and location.
- Match services with the necessary facilities and equipment.
- Shift services according to the identified need.
- Staff the facilities with the appropriate staff. Where necessary, upgrade skills and/or employ additional staff.
- Link funding to services to ensure sustainable quality services.

The implementation challenges:

- An incremental, step-wise process.
- Steps will not be of equal magnitude or frequency.
- The change will generate uncertainty and, in some instances, resistance
- Enthusiastic support of all levels of management is essential.
- Western Cape Department of Transport and Public Works, and medical faculties of the Universities and Technikons are key partners.
- Stakeholder participation and buy-in crucial.
- Where consensus is reached rapidly, progress will be rapid, eg the revitalisation of the rural regional hospitals.