

# 1. INTRODUCTION



1.1 Healthcare 2010 is built on the restructuring plans that were begun in 1994. The strategic vision for Health Care 2010 flowed from the development of the Department's Strategic Position Statement (SPS).

1.2 A technical model, which took cognisance of the following key elements was used in the development of the strategic vision:

1.2.1 Population size is a key denominator and population growth has factored in the impact of HIV/AIDS.

1.2.2 The additional service burden of HIV/AIDS, including the cost of providing anti retroviral therapy for 50% of Stage 4 patients, was calculated for all levels of care.

1.2.3 Provision was made for an increase in the core package of services at Primary Health Care (PHC) level, including for mental health care.

1.2.4 The model is based on the following outputs:

- PHC visits per capita; and
- Admissions per 1 000 population for each level of care.

1.2.5 Benchmarks were set for different levels of care:

- Number of patients per clinical practitioner at PHC clinics;

- Target Bed Occupancy for acute and chronic hospitals; and
- Target average length of stay for different levels of care.

1.2.6 To render the service affordable a quantum of admissions are diverted from each level to be treated more appropriately at a lower level of care as indicated in Table 1 below:

Table 1: Admissions diverted to be treated at a more appropriate level of care

FROM LEVEL	TO LEVEL	NUMBER OF PATIENTS DIVERTED
3	2	44 366
2	1	45 328
1	PHC	55 468

1.2.7 At Level 3, equitable access is provided to patients from both the Western Cape and other provinces within the affordability levels of the National Tertiary Services Grant.

