



# Pilot Study of changing Patient Administration Process for PHC Facilities in Xhariep District – Lessons Learned



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# BACKGROUND

- Primary Health Care (PHC) Service delivery has been hampered by bottlenecks resulting in poor health service delivery in the Free State province.
- These bottlenecks include non-integrated patient care, poor record management and filing system, inadequate clinical stationary supplies, incomplete management of patient records (information) and poor patient service organisation resulting in haphazard patient movement within the facility.
- An initiative to systematically improve and correct these deficiencies in health service delivery was introduced aligned with administration component of ideal clinic concept.
- This initiative supports the department in moving towards National health insurance implementation in a PHC setting.

# AIM



Component 1: Administration

Sub-Components:

- Signage and notices
- Staff identity and dress code
- Patient service organization
- Management of Patient Record

The aim of this study is to describe the changes in PHC facility patient administration and care aligned with ideal clinic concepts.

## Study design

- This is a descriptive operational study, conducted in 10 facilities in Xhariep District.
- Stakeholder engagement was conducted with the facility staff in April 2015. After buy in, a training was conduct with the relevant facility officials.
- A baseline assessment was conducted in collaboration with the district and facility teams.
- Areas that needed support and re-organisation were identified and a quality improvement plan was developed, followed by additional on-site training regarding the implementation of the plan.
- Follow up assessments were conducted as follows:
  - October 2015 by Perfect Permanent Team for Ideal Clinic Realisation and Maintenance (PPTICRM), February 2016 by Cross District Peer Review (CDPR) and March to April 2016 by Peer Review Update (PRU).

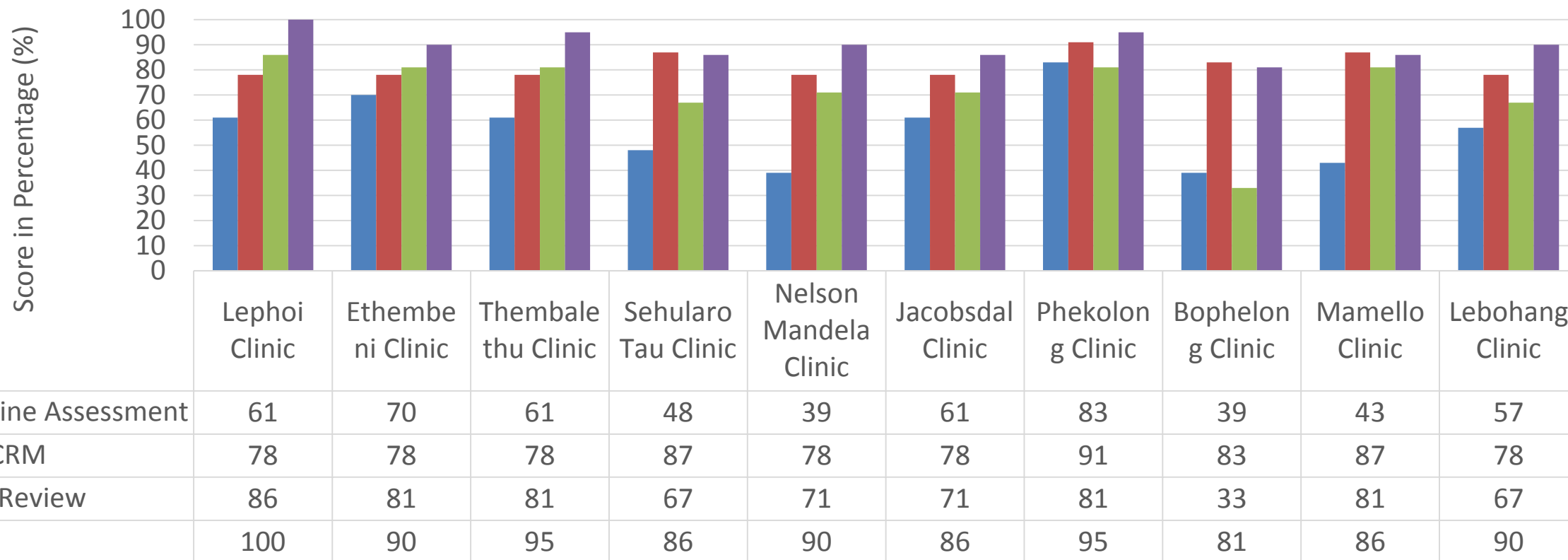
# METHODOLOGY II

## Data collection and analysis

- Data was collected using the Ideal Clinic Assessment Tool.
- The information was then captured into the Ideal Clinic Dashboard software version 1.5.
- Composite scores were created for each of the 4 administrative sub-components and an overall score for administration was generated from the sub-components.
- The findings to be presented are based on the overall score for the administration component for each facility.



## Distribution of the scores per assessment



# COMPARISON ON THE ASSESSMENTS SCORES

	Baseline vs PPTICRM	PPTICRM vs Peer Review	Peer Review vs PRU
Lephoi Clinic	17%	8%	14%
Ethembeni Clinic	8%	3%	9%
Thembalethu Clinic	17%	3%	14%
Sehularo Tau Clinic	39%	-20%	19%
Nelson Mandela Clinic	39%	-7%	19%
Jacobsdal Clinic	17%	-7%	15%
Phekolong Clinic	8%	-10%	14%
Bophelong Clinic	44%	-50%	48%
Mamello Clinic	44%	-6%	5%
Lebohang Clinic	21%	-11%	23%



# CONCLUSION

The results clearly illustrate the level of improvement in patient administration scores, indicating that supporting and monitoring PHC facilities, overall Ideal Clinic administration component can be achieved and maintained.



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