

THE 10 POINT PLAN

In this issue...

As part of its Medium Term Strategic Framework, the National Department of Health released its priorities for the period 2009 to 2014. Also known as the 10 Point Plan, the priorities are intended to assist the country in meeting the Millennium Development Goals (MDG) and monitoring improvements in the health system. This document covers the ten priorities of the Plan and highlights some of the salient activities which are targeted for implementation within the period 2009-2014. The purpose of this document is to highlight the core tenets of the Plan and not to review or discuss the extent to which the key activities and deliverables have been met.

1. Provision of Strategic Leadership and creation of a Social Compact for better health outcomes

The objective of this priority is to ensure that there is unified action across the health sector. This requires appropriate planning and the involvement of provinces, communities and their leaders in the health sector. Another key feature of this priority is the development of an integrated annual national health plan in conjunction with Provincial Departments of Health. This annual plan will be used to inform and develop a costed budget to submit to Treasury. Review of policies adopted in order to achieve health sector goals will be conducted quarterly, annually and bi-annually.

The role of a Ministerial Advisory Committee on Health (MACH) will be to oversee various aspects of health sector strengthening including human resources for health, information, medical products, finance, leadership and governance, service delivery, technology and infrastructure. Reporting directly to the Minister of Health the MACH will also be responsible for the establishment of various technical task teams to assist in fulfilling their mandates.

Thirteen Ministerial Imbizo's will be held to get feedback from communities on their experiences of and recommendations on health service delivery issues. Policy and guidelines relating to home and community based care will be developed and an incremental process for providing stipends to community care-givers will be embarked on.

Building the capacity and ability of governance structures to meaningfully fulfil their roles and responsibilities has also been identified as a deliverable under this priority. A training manual for hospital boards will be developed. However, priority attention should be given to strengthening the capacity of clinic committees to mobilise their active participation at grassroots level.

2. Implementation of a National Health Insurance for South Africa

A White Paper setting out the framework for the implementation of a National Health Insurance and draft legislation which will be open for public comment will be produced. Using an inclusive approach, the necessary institutional and organisational arrangements required to implement the NHI will be introduced. By 2011/12, policies to remove user fees for certain indigent groups will be implemented.

3. Improving the quality of health services

Improving the quality of care delivered at health facilities is an important plank of the 10 Point Plan. The Quality in Health Care Policy strives to improve quality of care through measuring standards against actual practice and filling gaps. The revised Core Standards for Health Establishments in South Africa, now extended to Primary Health Care facilities, are aimed toward assessing these gaps in order to ensure the delivery of respectful, safe and high quality clinical care with effective support systems. To monitor health service delivery, the implementation of quality improvement plans is crucial for all districts, particularly the 18 identified priority sub-districts. These sub-districts were selected on the basis that they were lagging behind in performance on key maternal and child health care indicators measured in MDGs 4 and 5.

Health facilities around the country are being improved and upgraded through the Hospital Revitalisation Programme. This programme aids the scaling up and refining of the improvement of quality of service at health facilities. Facilities will be encouraged and monitored in developing and implementing quality improvement plans and infection prevention and control plans.

As part of the programme to escalate good service

at facility level, all primary health care facilities will be visited by a supervisor at least once a month and an Ombuds Office which will receive and investigate all complaints relating to quality of care will be fully functional by 2011/12.

4. Overhaul the Health Care System and Improve its Management

Robust financial management systems will be put in place to improve audit outcomes. Provincial expenditure patterns will be monitored on a monthly basis and quarterly visits to each Province will take place.

District Management Teams will be created in all 52 districts. These teams will undergo a series of targeted trainings to assist them to develop and monitor District Health Plans. Provinces will also be supported to develop District Health Councils.

Management of hospitals will also be strengthened with 150 Chief Executive Officers (CEO's) of hospitals being targeted for enrolment into a Hospital Management Training Programme.

By the end of March 2012, 60% of all hospital CEO's will have been enrolled in the programme.

5. Improved Human Resources Planning, Development and Management

Strong consideration will be given to the planning, management and development of Human Resources for Health (HRH). This includes ensuring that all provinces have developed and begin to implement human resource plans which are consistent with service delivery objectives. As part of a detailed planning and forecasting process for various categories of HRH for the next five years, the re-opening of nursing colleges in order to ensure the accelerated production of nurses will also be given due attention. Targets for the training and production of various cadres of workers will be developed culminating in a revised national HRH Plan in 2010/11.

6. Revitalisation of physical infrastructure

Policy guidelines to assist provinces in planned preventative maintenance of their health infrastructure will be developed. Regular reports on the progress of the Hospital Revitalisation Programme will be submitted to the National Health Council. The establishment of Public-Private-Partnerships to facilitate the construction and refurbishment of health facilities will be given priority as will initiatives to revitalise primary level care facilities in order to improve quality of service. A national audit of all PHC infrastructure and services will be conducted.

7. Accelerated implementation of the HIV and AIDS and Sexually Transmitted Infections National Strategic Plan and the increased focus on Tuberculosis (TB) and other communicable diseases

The objective of this target is to ensure the implementation of the various existing treatment guidelines and to strengthen prevention interventions. Recognising the close relationship

between the two, attention will also be paid to strengthening TB programmes including MDR and XDR TB. Some of the targets listed in these areas include:

- 95% of HIV-exposed infants receive ARVs for PMTCT by 2012;
- more than 70% of men test for HIV by 2010; and
- the distribution of both male and female condoms.

At the same time, attention will be paid to developing community care givers as a cadre of workers trained to provide support to people with HIV and TB.

8. Mass mobilisation for the better health for the population

A Healthy Lifestyle Strategy focusing on nutrition, physical activity, tobacco control, alcohol and substance abuse control and safer sexual practices which will inform all Provincial Health Promotion plans will be developed by 2009/10. A national initiative to improve maternal, neonatal and child health in 18 priority districts which aims at reducing high morbidity and mortality at health facilities by implementing the Integrated Management of Childhood illnesses and the Perinatal Problem Identification Programme will be introduced. This includes the incremental provision of two vaccines (Prevenar and Rotatrix) which will help to prevent death due to pneumonia and diarrhoea respectively.

The Department will also seek to improve its management of non-communicable diseases particularly hypertension and diabetes.

9. Review of Drug Policy

A Drug Supply Management Information System to improve the monitoring of drug availability will be introduced into the provinces in a phased manner. The Department intends to maintain a zero (0%) stock-out rate of antiretroviral and TB drugs on tender in all provinces. An external team will conduct a review of the country's drug policy.

10. Strengthening Research and Development

More research studies and surveys will be undertaken to generate key reliable information for health planning, service delivery and monitoring. To this end, the Department will also review and update its Research Policy last updated in 2001. Research on the outcomes and impact of the implementation of key department programmes will be commissioned.

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