



RITSHIDZE
SAVING OUR LIVES

Ugu District 2021 Q1 DATA REPORT

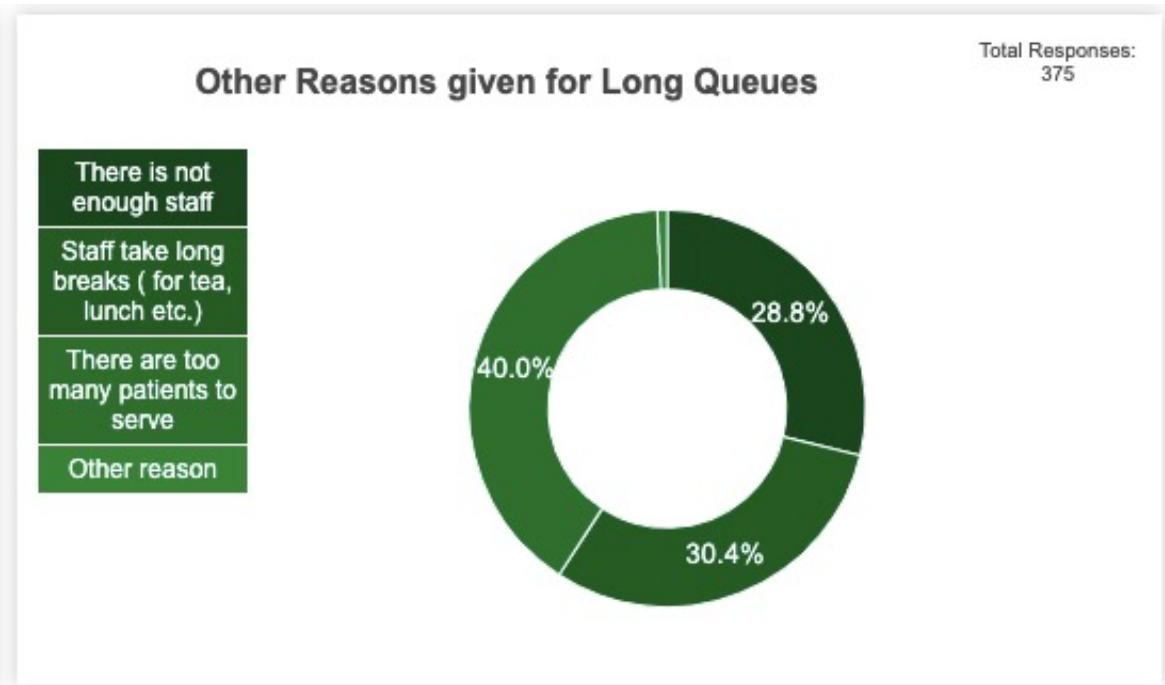
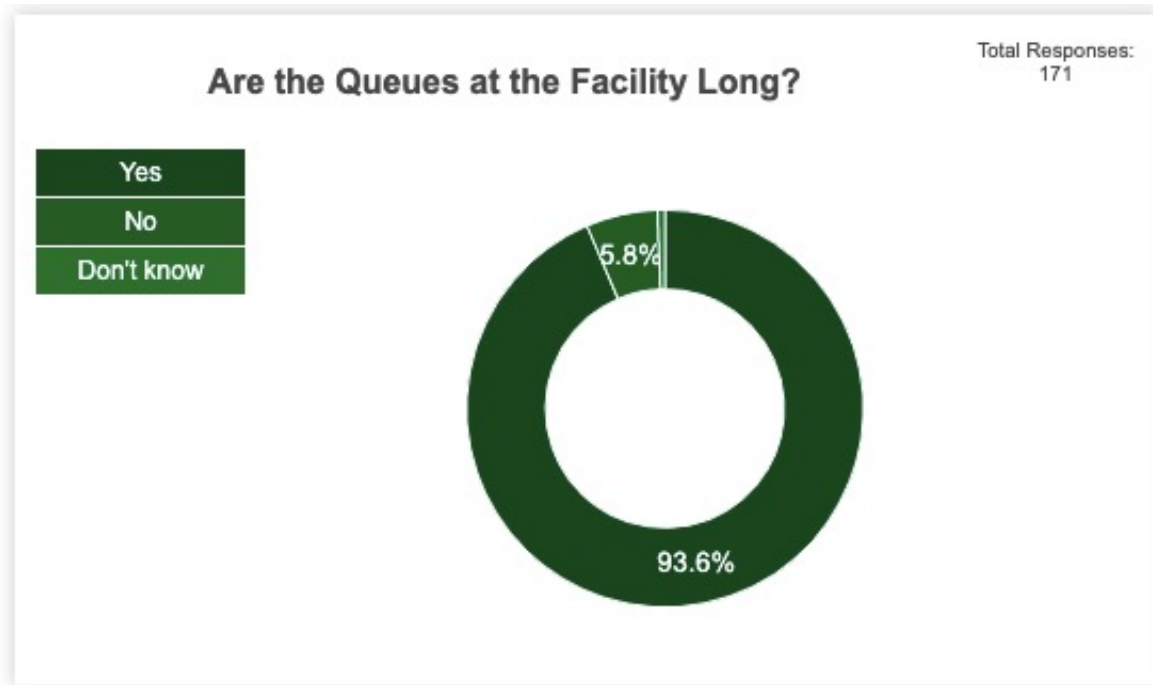
January 2021

FACILITY HOURS & WAITING TIMES





Ritshidze monitoring data shows that 93.6% of patients report long queues.



Average times spent at the facility — the shortest time is reported at Port Shepstone Clinic (3hrs43min) the longest is at Marburg Clinic (6hrs28min)



Port Shepstone Clinic	3:43
Gcilima Clinic	3:56
Gamalakhe CHC	4:02
KwaMbunde Clinic	4:03
Turton CHC	4:25
Izingolweni Clinic	4:39
Southport Clinic	4:45
Margate Clinic	4:48
Port Edward Clinic	4:58
Umzinto Clinic	5:56
Marburg Clinic	6:28



PROPOSED SOLUTIONS



- We propose clear communication to be cascaded down to Facility manager on the circular in place that needs to be implemented by all facilities in accommodation patients from early hour to reduce long waiting times and long queues.
- District office to put emphasis on the implementation on time spent by patients(1 hours15 minutes in reducing the infection rate of COVID infection and TB infection control) .
- Staff breaks should be regulated to agreed frequency and time periods. Further they should not all happen at the same time. The district should address this matter with facility managers in addressing this indicator.

FACILITY STAFF



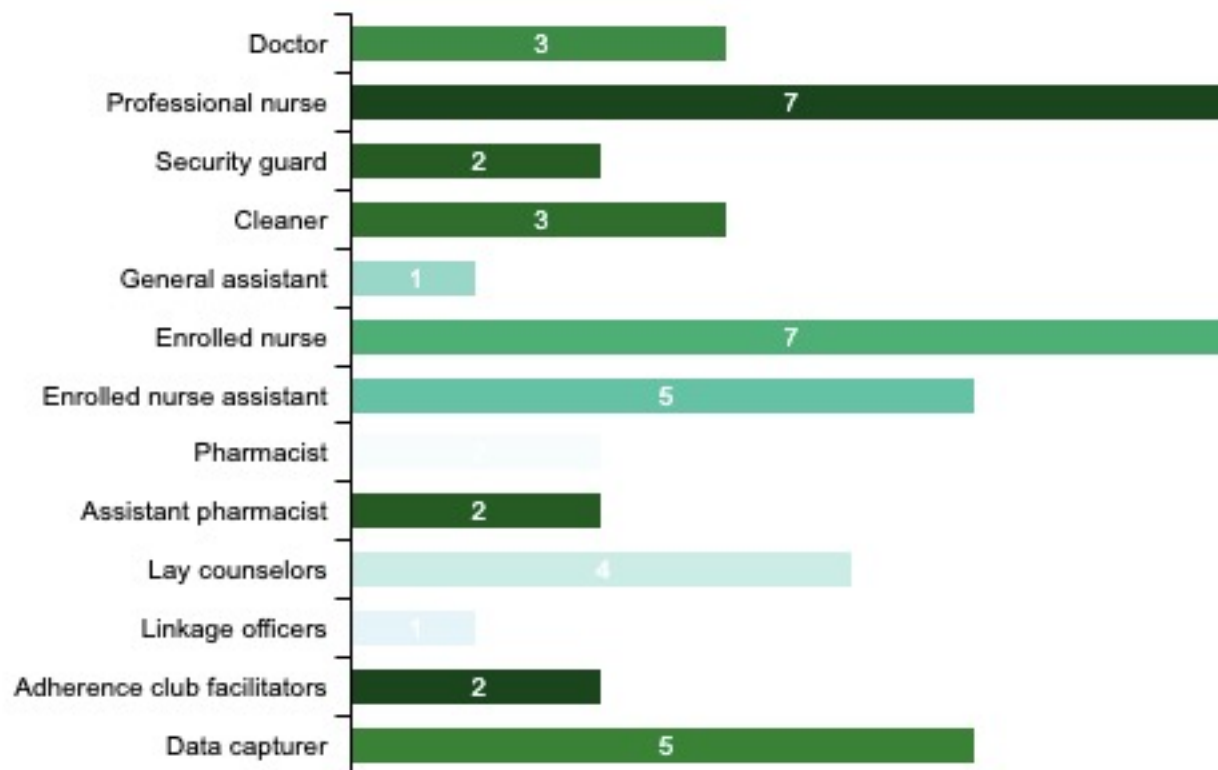
Monitoring data from Ritshidze show both patients and managers see shortages of staff

38.6% of patients said there was never enough staff to meet patients' needs at their clinic.

100% of facility managers reported that there was not enough clinical and/or non-clinical staff at the facility.

Which Cadres are Understaffed?

Total Responses:
44



The cadres most commonly reported as being understaffed:

- professional nurses
- enrolled nurses
- data capturer



PROPOSED SOLUTIONS

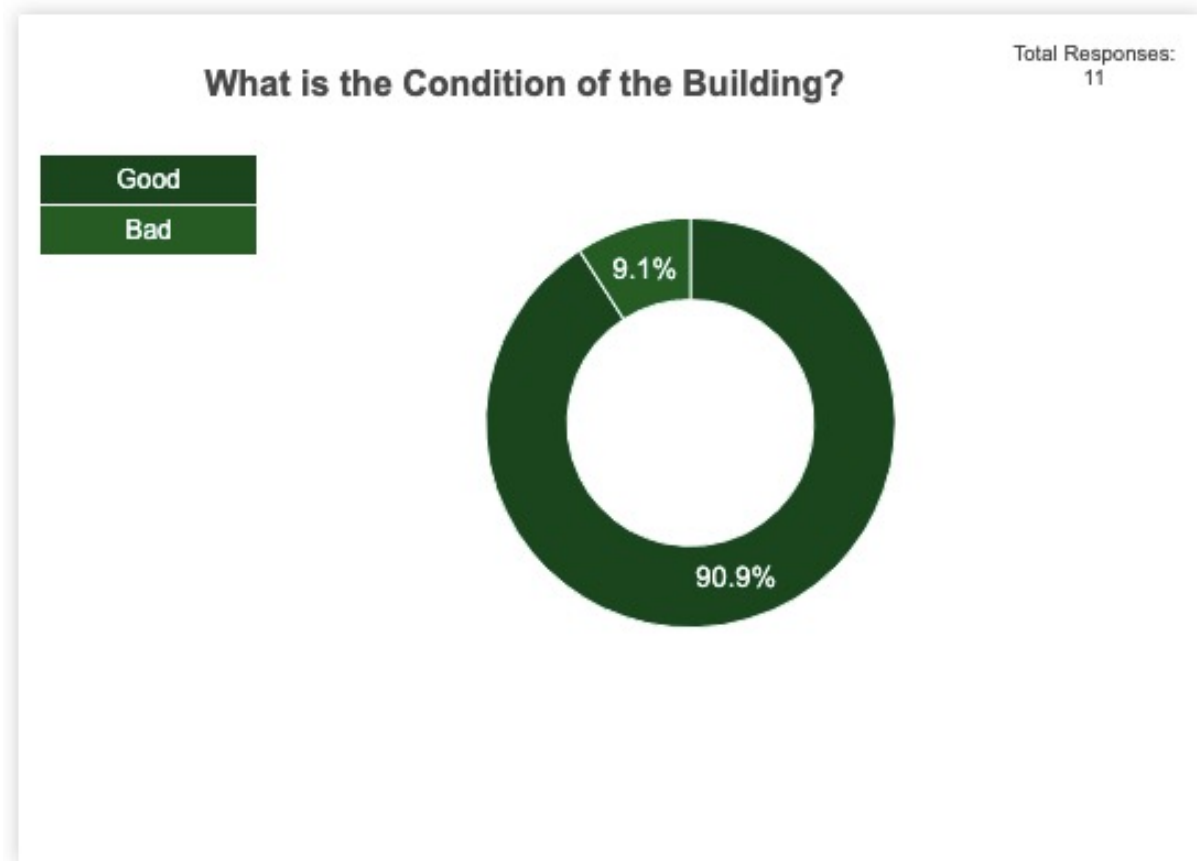


- The district should monitor the human resource that is needed at the facility level in ensuring that they hire staff that is commonly reported understaffed.
- Often staff do not treat people properly due to stress, exhaustion, and burn out as a result of the malfunction in the health system including lack of time. Better staff support systems should be outlined clearly and put in place by the District Department of Health in order to ensure staff wellness and support.

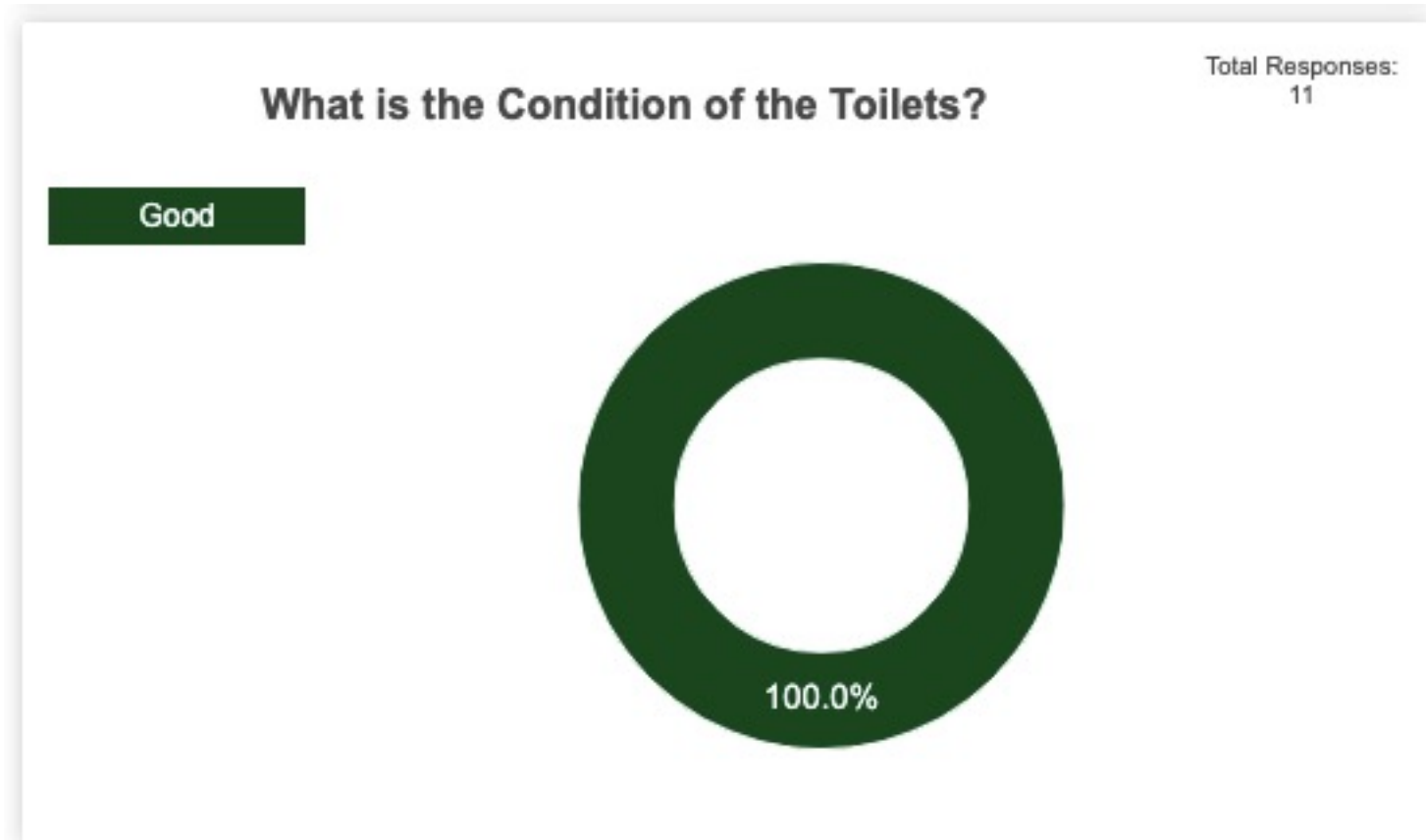
CLINIC CONDITIONS & PATIENT SAFETY



Ritshidze data shows that 90% of clinics are observed to be in good condition



The data shows that 100% of clinics are observed to have toilets in good condition



Facility Managers at 9 sites report there is not enough space at the clinic to meet patient needs and something additional is needed



Province	District	Facility	Facility Manager: Is there enough space in the facility to meet patient's needs?			
			Yes enough space	No, we require something additional	Don't know	SCORE
KwaZulu-Natal	Ugu	Marburg Clinic	0	1	0	No, we require something additional
KwaZulu-Natal	Ugu	KwaMbunde Clinic	0	1	0	No, we require something additional
KwaZulu-Natal	Ugu	Izingolweni Clinic	0	1	0	No, we require something additional
KwaZulu-Natal	Ugu	Gcilima Clinic	0	1	0	No, we require something additional
KwaZulu-Natal	Ugu	Gamalakhe CHC	0	1	0	No, we require something additional
KwaZulu-Natal	Ugu	Margate Clinic	0	1	0	No, we require something additional
KwaZulu-Natal	Ugu	Southport Clinic	0	1	0	No, we require something additional
KwaZulu-Natal	Ugu	Turton CHC	0	1	0	No, we require something additional
KwaZulu-Natal	Ugu	Umzinto Clinic	0	1	0	No, we require something additional



5 facilities need more space for private HIV testing & counselling — another 6 facilities needed more space for filing systems

Province	District	Number of Facilities Assessed	What do you need more space for?									
			Patients waiting space	Rooms for medical care	Private HIV counseling or testing	Laboratory space	Files	Data capturers	Adherence clubs	Pharmacy	Storage	Other
KwaZulu-Natal	Ugu	9	7	5	5	2	6	6	3	2	5	1



PROPOSED SOLUTIONS



- Where infrastructural issues mean that patient privacy is not being as people are being counselled, tested and treated for HIV and other conditions in the same room; District must ensure in the short term that mobile containers are been given to facilities for additional space to confidentially see patients and let us know how this will be solved in the short term [**PLHIV private rooms, Rooms for medical care, Patients waiting room**].

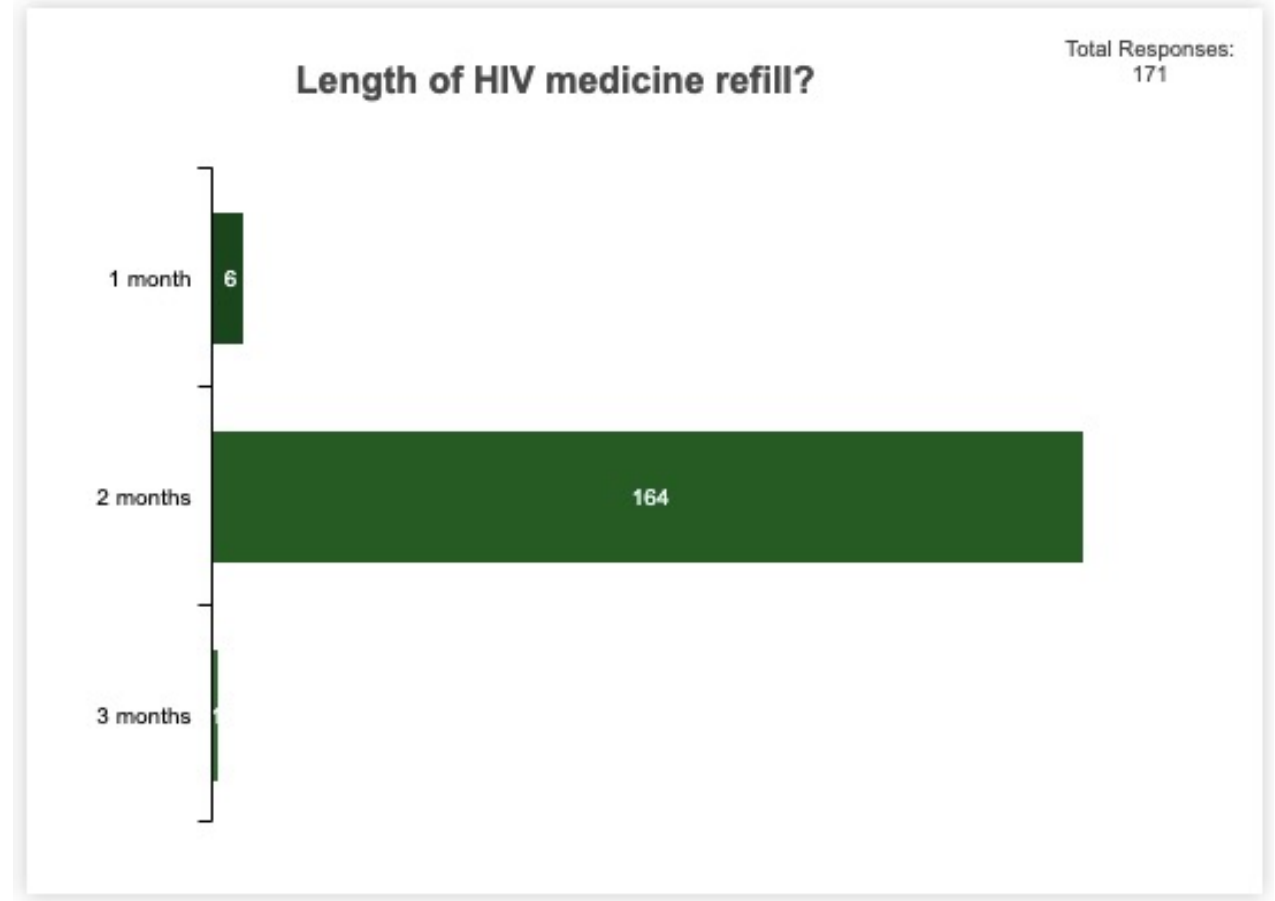
ARV COLLECTION & ACCESS



Short supply of ARVs

The data shows that 93% of PLHIV collect their ARV's at a quick pick up point at the clinic

All PLHIV should receive at least 2 months supply of ARVs at a time, with commitments that this would increase to 3 months — however there are PLHIV who reported less than this.



ARV refill length variable across facilities. Large numbers of PLHIV getting 1 month supply.



Province	District	Facility	Length of HIV medicine refill?					
			1 week	2 weeks	3 weeks	1 month	2 months	3 months
KwaZulu-Natal	Ugu	Port Shepstone Clinic	0	0	0	0	15	1
KwaZulu-Natal	Ugu	Turton CHC	0	0	0	0	15	0
KwaZulu-Natal	Ugu	Southport Clinic	0	0	0	0	15	0
KwaZulu-Natal	Ugu	Port Edward Clinic	0	0	0	0	15	0
KwaZulu-Natal	Ugu	Margate Clinic	0	0	0	0	18	0
KwaZulu-Natal	Ugu	Marburg Clinic	0	0	0	0	15	0
KwaZulu-Natal	Ugu	KwaMbunde Clinic	0	0	0	0	15	0
KwaZulu-Natal	Ugu	Izingolweni Clinic	0	0	0	0	16	0
KwaZulu-Natal	Ugu	Gcilima Clinic	0	0	0	0	16	0
KwaZulu-Natal	Ugu	Gamalakhe CHC	0	0	0	3	12	0
KwaZulu-Natal	Ugu	Umzinto Clinic	0	0	0	3	12	0



PROPOSED SOLUTIONS



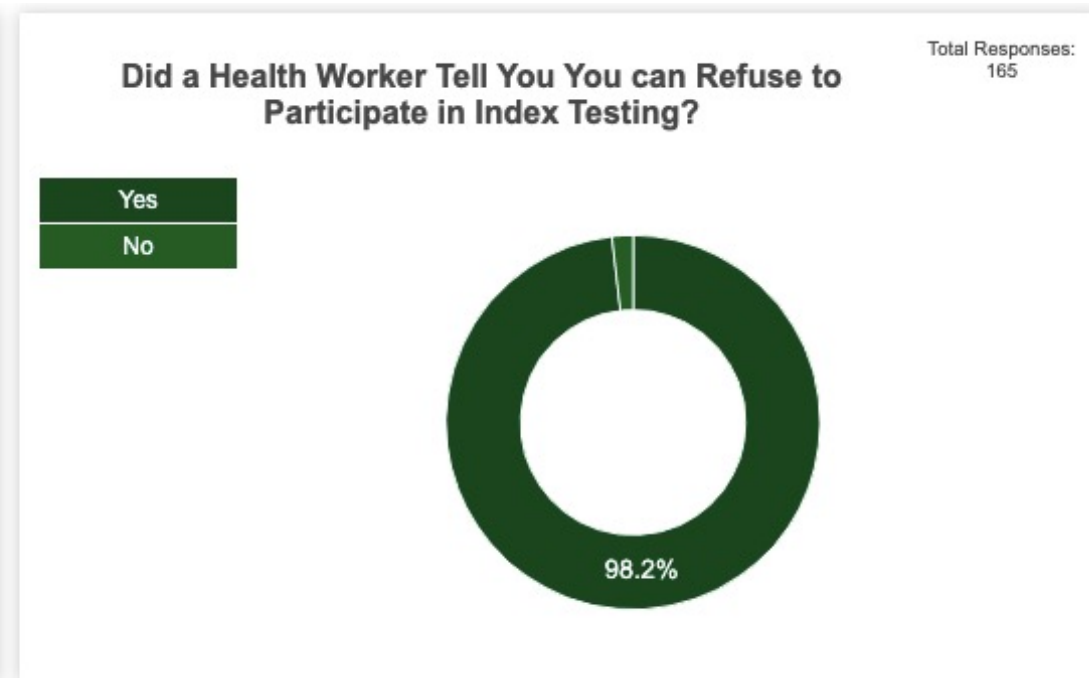
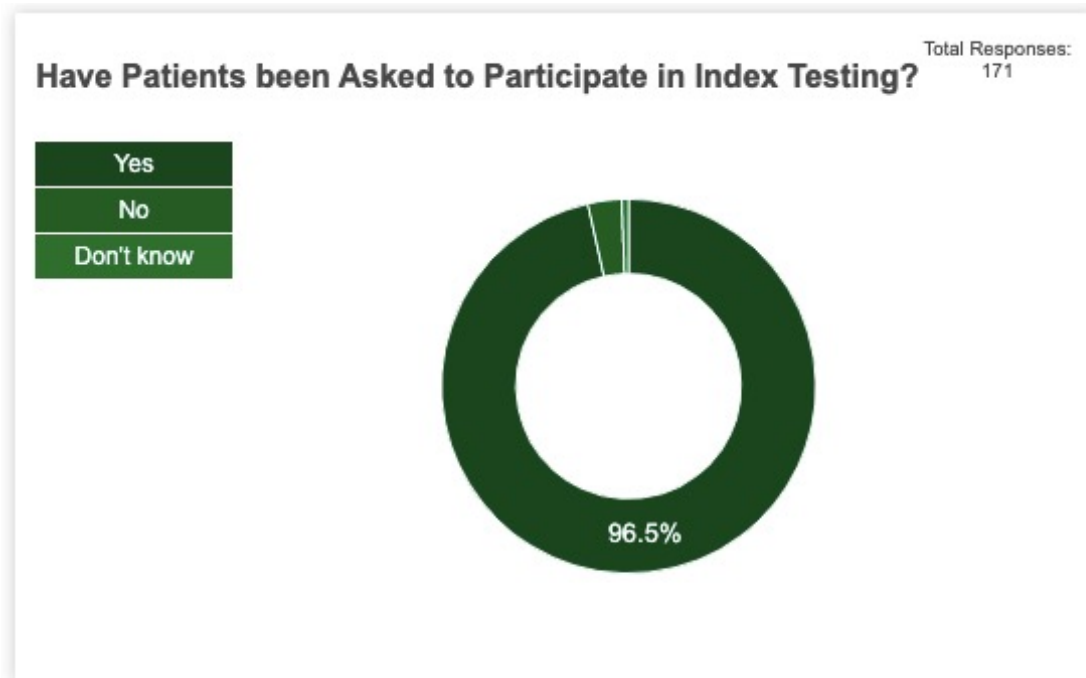
- Health guideline should be revisited regularly in ensuring that facilities are dispensing medication to patients with 2 months at all times(more especially for people living with HIV).

CONFIDENTIALITY & PRIVACY



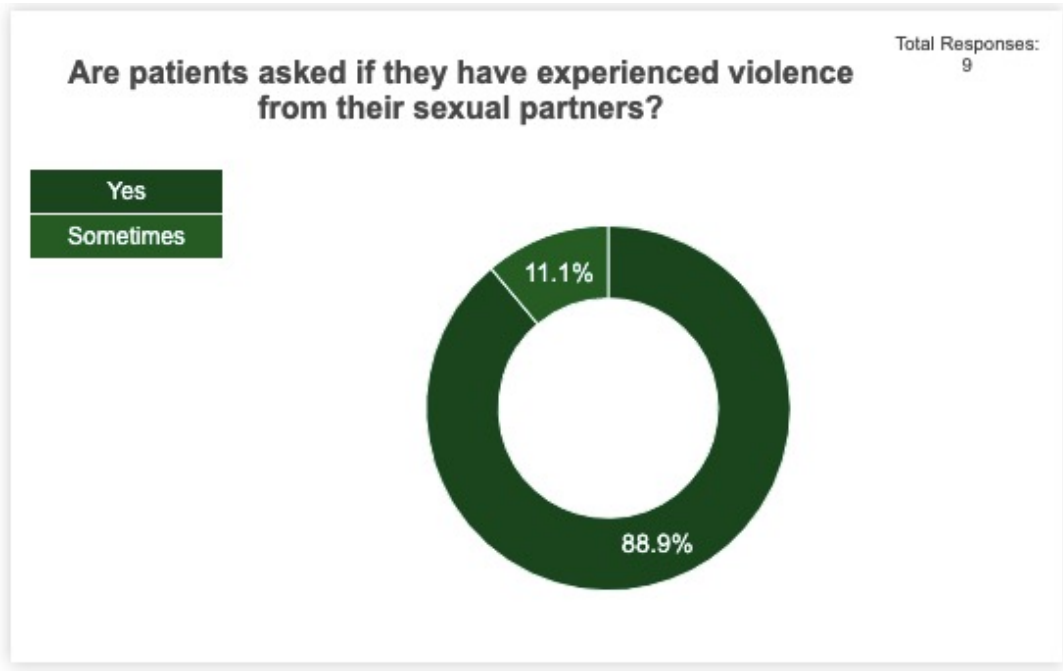


95.5% of PLHIV said that a HCW had not asked them for the names & contacts of partners for index testing. Of those who responded yes, 1.8% reported that they did not think they were allowed to “say no” or refuse to give the names of their partners.





Only 88.9% of facilities doing index testing say they always screen clients for intimate partner violence (IPV). A majority of the Facility Managers (28.6%) who do screen for IPV still contact all the partners of clients regardless of reported violence. This is a major concern and violation of people’s safety and privacy.





PROPOSED SOLUTIONS

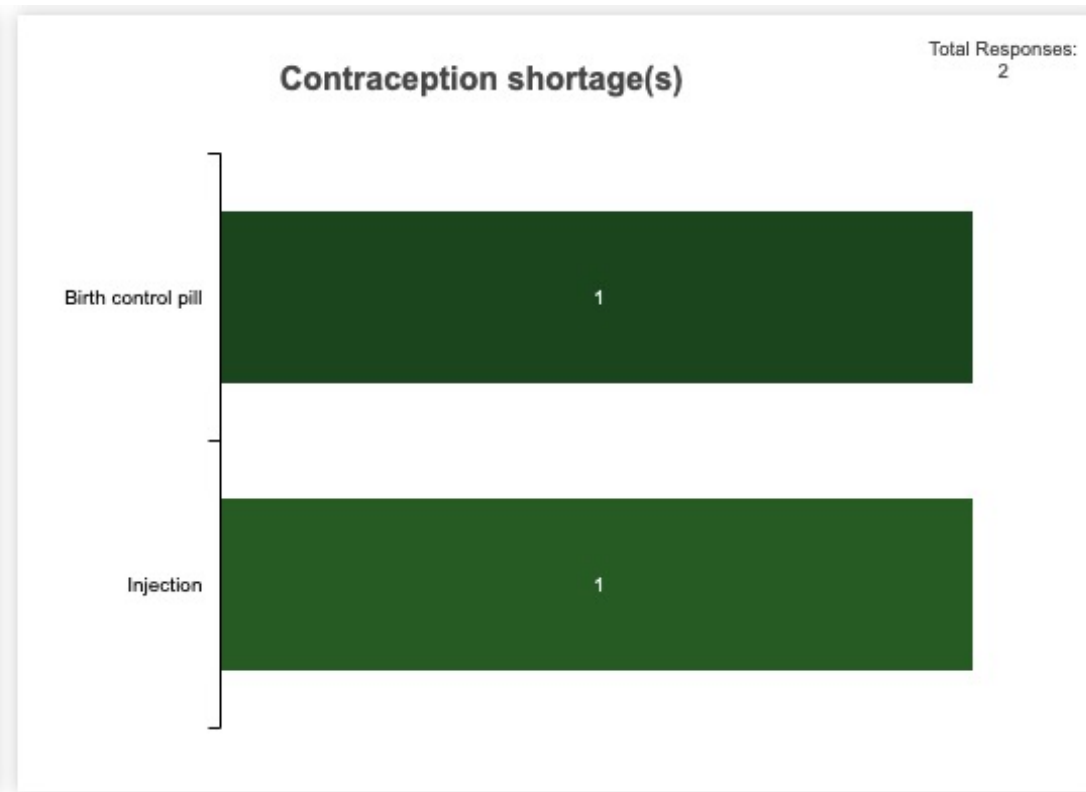
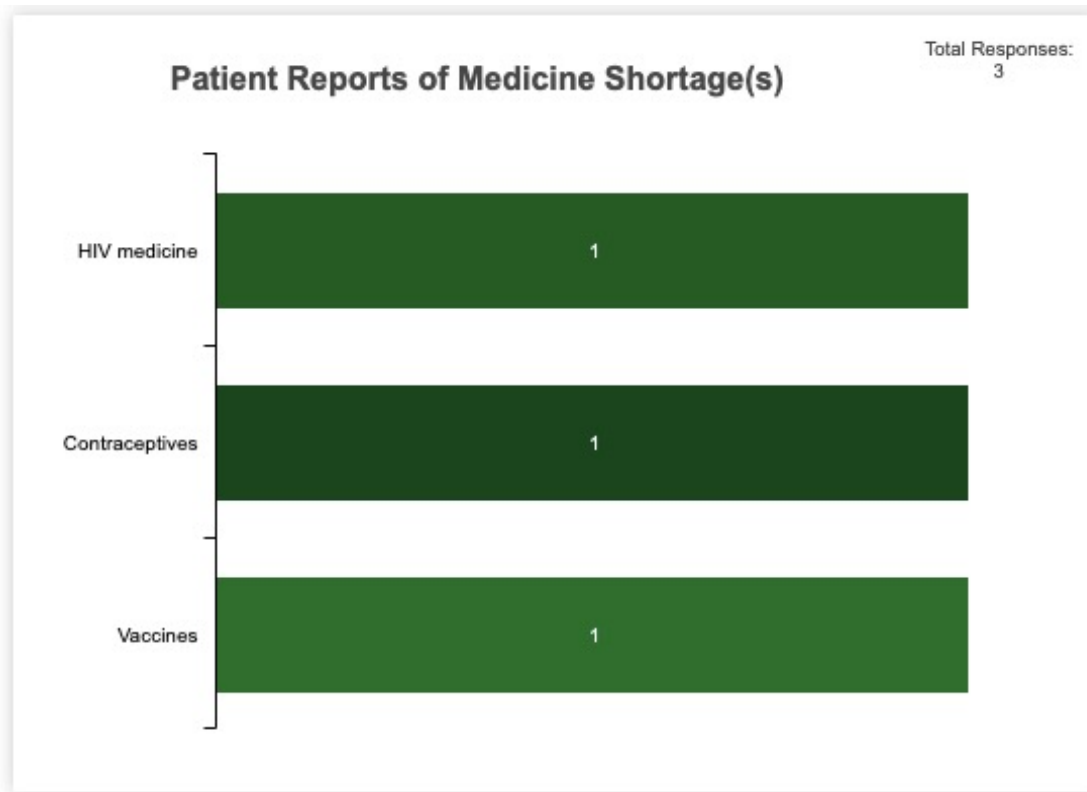


- Index testing should be conducted in a manner that does not cause harm to patients

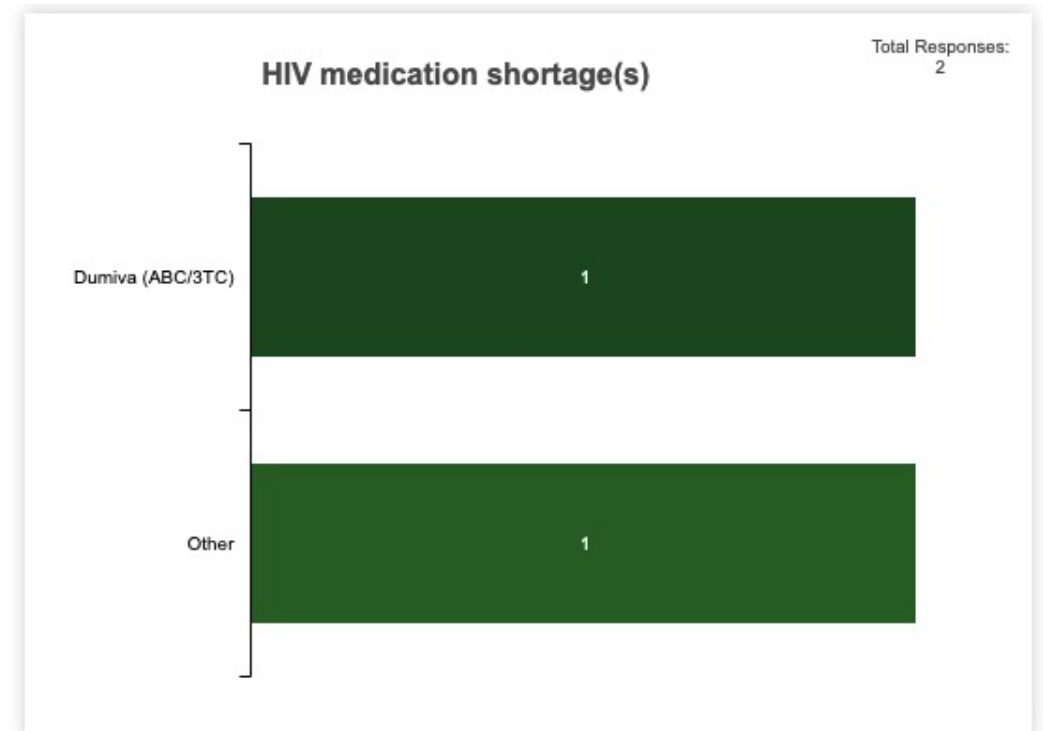
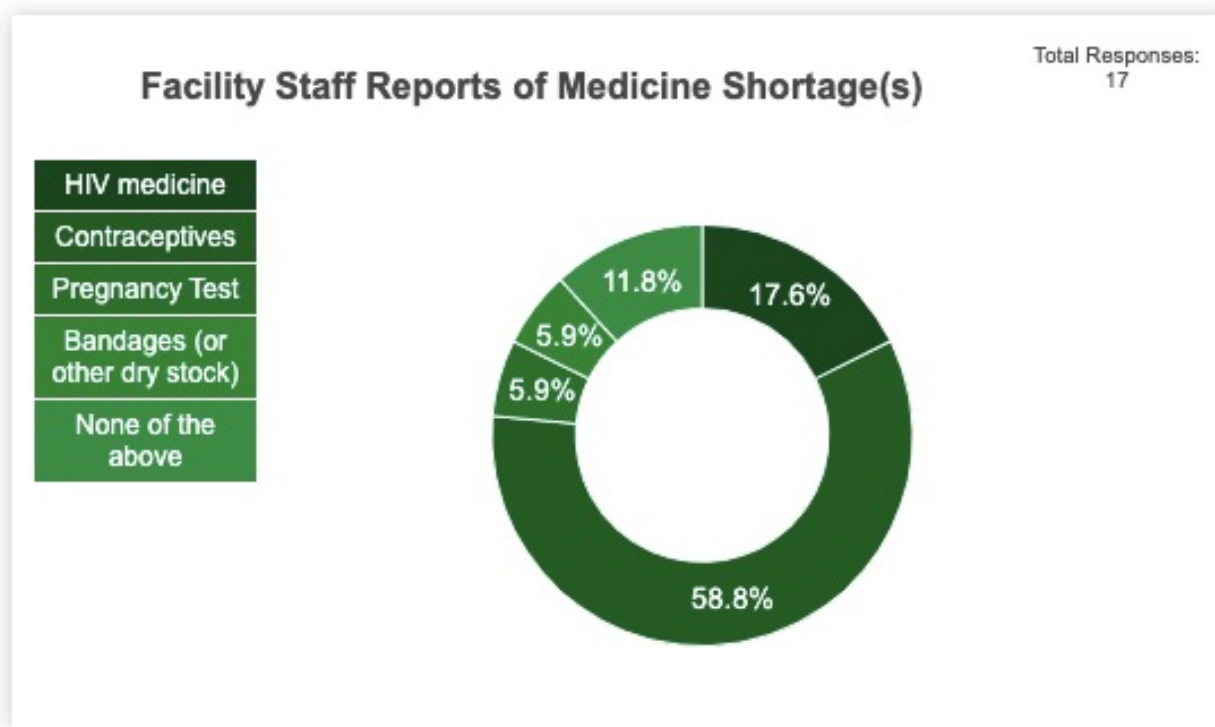
ACCESS TO MEDICINES & STOCKOUTS



Approximately 22.2% of patients report that people left without the medicines they needed in last 3 months — varying across facilities. HIV medicines & contraceptives most commonly reported.



Facility Managers reported stockouts and/or shortages in last 3 months across provinces. Contraceptives was most commonly reported





PROPOSED SOLUTIONS



- The District office should monitor stock levels and storage of medicines and medical supplies must be managed appropriately.
- Where unavoidable stockouts arise (e.g. global shortage), The district Depo must ensure that facilities get communication prior to avoid delays and shortage from the clinic level and in ensuring that all patients are put on alternative medicines should be informed adequately on time .
- No patient should leave the facility empty handed in order to avoid high number of defaulters due shortage/ Stockout.

Thank you

www.data.ritshidze.org.za

