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Health
FREE STATE PROVINCE

FREE STATE DEPARTMENT OF HEALTH

SUMMARY OF THE PRESENTATION TO THE HEALTH MARKET INQUIRY

Contents



- FSDoH Private Facilities per District
- Public-Private-Partnership; Netcare/CHM
- Remunerative Work Outside Public Service
- Radiology Services Billing
- Free State Private Facility Licencing Regulations
- Patients discriminated against on basis of the ability to pay

MANGAUNG METRO



FACILITY TYPE	FACILITY NAME	APPROVED BEDS
Acute Hosp= 4	Life Rosepark	235
	Medi clinic Bloemfontein	377
	Netcare Pelonomi	68
	Netcare Universitas	127
Acute Psychiatric =2	Bloem Care	116
	M-Care Optima	76
SAub Acute Psych and Medical=4	Cairnhall	21
	Hillandale	36
	Victoria Garden	41
	Pentagon Park	24

MANGAUNG METRO(Cont)



FACILITY TYPE	FACILITY NAME	APPROVED BEDS
Specialized Rehabilitation=1	Life Pasteur	47
Eye Care Centre=1	Horizon Eye Care Centre	20
Unattached theatre=1	City Med	20

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FACILITY TYPE	FACILITY NAME	APPROVED BEDS
Acute Hosp=1	Medi Clinic Hoogland	114
Acute and Sub Acute Med/Psych=1	Corona Medical Care	30
Unattached Thetre=1	Bethlehem Medical Centre	4

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FACILITY TYPE	FACILITY NAME	APPROVED BEDS
Acute Hosp=3	Medi clinic Welkom	227
	Ernest Oppemheimer mine	450
	St. Helena Mine Hosp.	131
Sub Acute=2	Beatrix Mine Hosp	50
	Oryx Mine Hosp	20
Sub acute and Unattached Theatre=1	Welkom Medical Centre	60

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FACILITY TYPE	FACILITY NAME	APPROVED BEDS
Acute Hospitals=3	Netcare Kroon Hosp.	80
	Riemland	10
	Netcare Vaalpark	52
Sub Acute=2	Netcare Vaalpark	16
	Sasol Infrachem	11
Unattached Theatre=1	Koinonio	1

LICENCING AND APPROVAL AWARDED 2012/13



FACILITIES	Number of beds	AREA	COMMENTS
Karoo Medical Centre	2 Acute and 22 sub acute	Bloemfontein	Approved not yet functional
Bloemfontein Hospital	70 sub acute and 40 day	Bloemfontein	Approved not yet functional
Bloemdal Hospital	200 Acute beds	Bloemfontein	Approved not yet functional
Northridge Medical Centre	20 Mat beds	Bloemfontein	Approved not yet functional
Corona Medical Centre	2 Acute medical 9 Med/ Surg acute 21 Sub acute Psych 10 Rehabilitaion	Bethlehem	Approved not yet functional

Cont

FACILITIES	Number of beds	AREA	COMMENTS
Motloung Medical Trust	27 Sub Acute beds	Bethlehem	Approved not yet functional
Harrismith Hospital	120 Acute Beds	Harrismith	Approved not yet functional
Parmed Hospital	50 Acute and 20 sub acute beds	Parys	Approved, not yet functional
Netcare Vaalpark	7 additional	Vaalpark	Approved not yet functional

LICENCED 2012-13

Acute Psychiatric beds

FACILITIES	Number of beds	AREA	COMMENTS
Medi clinic Welkom	36 Additional	Welkom	Licensed
Welkom Medi clinic	Emergency unit upgrade	Welkom	Licensed
Medi clinic Hoogland	Emergency & ICU upgrade	Bethlehem	Licensed

APPLICATIONS DENIED

FACILITY	No of Beds	AREA	COMMENTS	Year Denied
Langehoven Park	80 Acute Beds	Bloemfontein	Exceeded bed norm per thousand population	2007
Bains village Day		Bloemfontein	No need for additional Theatre	2008
Bloemfontein Hos.	500 Acute beds	Bloemfontein: Langehoven park- Spitskop	PPP Contractual Obligation. No contemplation for staff retention recruitment(No facility within 10 km radius of PP Facilities	2010
Bloemfontein Day Hospital	30 Day beds	Bloemfontein	Already approved day beds in the area	2013
Sterling Health Care Centre	10 day and 10 Sub Acute	Langehoven park	Already approved day beds .Advised to apply for sub acute	2013
Laughing water retreat for woman (Psych)	36 Psych beds	Langehoven park	Proximity within 10 km radius of current psychiatric facility. Dept. has recently approved additional beds	2013

APPLICATION LAPSED

FACILITY	No of Beds	AREA	COMMENTS	Year Lapsed
Bophelo Mental Health and rehabilitation	80 Psych beds	Bloemfontein	Applicants split in to two groups	2008
Keerum Clinic	20 Sub Acute beds	Brandfort	Building plans never submitted	2008
Jenny Bornman Care Centre	6 sub acute	Brandfort	Building plans not approved .Advised to start afresh	2009
Genesis Clinic	13 Birth units	Bloemfontein	Building Plans not submitted	2010

FACILITIES CLOSED

FACILITY	No of Beds	AREA	COMMENTS	Year Lapsed
Ooievaarsnes	2 Antenatal beds	Beds	Closed themselves	2006
Pepangwansa Martenity Home	4 Martenity Beds	Qwaqwa	Closed themselves	2007
Praxmed Day Theatre	4 Day Beds	Bultfontein	Closed themselves	2012
M-Care Pentagon Park	24 Sub-acute	Bloemfontein	Closed themselves	2014
Ernest Oppenheimer	450 Acute beds	Welkom	Closed themselves	2014

Public- Private- Partnership: Netcare Universitas; Pelonomi

- Provincial EXCO issued an instruction in 2010 to the FSDoH that the FSDoH/CHM / Netcare should review and investigate the problem areas of the PPP.
- The FSDoH, upon instruction of the HoD, acquired the assistance of KPMG and legal consultants (DLA Cliffe Dekker Hofmeyr) to address the critical deadlock between the FSDoH and CHM / Netcare and to manage the re-negotiations satisfactory with the sole purpose to resolve the deadlock on the PPP.
- EXCO has instructed the FSDoH to develop and implement a PPP infrastructure (PPPMU) at the department to ensure effective management of the current PPP re-negotiations and new proposed PPP's authorized by National Treasury

Public- Private- Partnership: Netcare Universitas; Pelonomi

- Due to several critical problem areas in the FSDoH / CHM / Netcare PPP agreement, it was necessary for the FSDH to embark on a strategy to investigate a possible resolution and / or cancellation of the PPP in question, taking in consideration the financial implications to the FSDoH, in the case of cancellation, to be estimated more R 208 Mil, excluding litigation costs and loss of infrastructure (Assets to be handed over to the FSDoH on EXIT to the estimation of R 256 Mil.

Revenue: Radiology Services Billing Arrangement

- The Joint Executive Committee Meeting in March 2012 agreed that the Radiology fee structure currently being used (as stipulated in signed original PPP agreement) is the cause of several critical problems in the agreement, such as:
 1. A shortfall resulting from the allocation of the Radiology fees, that the FSDoH had to fund.
 2. Conflicting financial calculations.
 3. Conflicting statistical calculations.
 4. Conflicting interpretations in the contract on modalities included and excluded for financial calculations.
 5. Management problems with the contract, both from the FSDoH and CHM / Netcare. Monitoring problems on operational and business levels.
 6. Financial and administrative verification problems by both parties.
 7. PPP infrastructure (absence of a PPPMU) inadequate at the FSDoH and needed the implementation of a PPP unit to manage the current and future PPP's.



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Remunerated Work Outside Public Service

- SLIDES 18,19,20



Institution	Occupational Class	Where RWOPS be performed
Bongani Hospital	Physiotharapist	Private
Bongani Hospital	Physiotherapist	Private
Boitumelo Hospital	Pharmacist Asst	Syd Goldstein Pharmacy
Boitumelo Hospital	Prof Nurse	Kroon Hospital
Xhariep	Physiotherapist	Private
Heidedal CHC	Medical Officer	Private
National Hospital	Diatrician	Private
ems	ECO	Construction Supply
Bongani Hospital	Physiotharapist	Private
Bongani Hospital	Physiotherapist	Private
Boitumelo Hospital	Pharmacist Asst	Syd Goldstein Pharmacy
Boitumelo Hospital	Prof Nurse	Kroon Hospital
Xhariep	Physiotherapist	Private
Heidedal CHC	Medical Officer	Private
National Hospital	Diatrician	Private



Institution	Occupational Class	Where RWOPS will be performed
National Hospital	General Worker	Funeral Parlour
Bongani Hospital	Occupational Therapist	Private
Boitumelo Hospital	Medical Officer	Private
Lejweleputswa District	Medical Officer	Private
Universitas Hospital	Head Clinical Dept	Netcare
Universitas Hospital	Assistant Director	Private
Universitas Hospital	Specialist	Netcare
Universitas Hospital	Pharmacists	Medichem
Universitas Hospital	Head Clinical Dept	Netcare
Universitas Hospital	Medical Natural Scientist	Mangaung Metro
Head Office EAP	Clinical Psychologist	Private
Universitas Hospital	Clinical Thechnologist	Netcare
National Hospital	Physiotherapists	OMPT Group
Universitas Hospital	Specialist	Netcare
Universitas Hospital	Specialist	Netcare



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Institution	Occupational Class	Where RWOPS Will be performed
Universitas Hospital	Specialist	Netcare
Universitas Hospital	Clinical Thechnologist	Netcare
Lejweleputswa District	Medical Officer	Private
Universitas Hospital	Physiotherapist	Success Club

FREE STATE HEALTH ESTABLISHMENTS REGULATIONS

- Free State operated in terms of Regulation R158 of 1980 issued in terms of the National Health Act, 1977
- R158 was old and outdated. Department needed to have new regulations to ensure equity in the distribution of health resources
- Regulations on Private Health establishments, 2014 issued in terms of Free State Hospitals Act were published on 09 September 2014

7.2 Application Process

- Application to be made for the following:
 - Private Health Establishment
 - Step down Facility
 - Rehabilitation facility
 - Dialysis Unit

7.3 Application Process

- Annexure A to attach the following:
 - Newspaper clip as proof that advert was placed in local newspaper
 - Proof of fees payment
 - BBBEE certificate
 - List of shareholders
 - Business Plan
 - Social responsibility commitment

7.4 Advisory Committee

- Consist of 7 members from various disciplines. Standard compliance, health economics, legal e.t.c. Term is 5 years
- Committee must sit monthly or as and when required
- Its main purpose is to recommend to HOD on the approval / non approval of private establishment within 30 days of referral to it.

7.5 Cont....Advisory Committee

- Committee to consider among others the following in processing application:
 - Equitable distribution of health resources;
 - Demographic and epidemiological characteristics of population;
 - Bed-to-population ratios and private-public bed ratios;
 - Financial sustainability of the establishment and
 - Promote BBBEE legislation.

7.6 Role of HOD

- HOD must decide on the recommendations of the advisory committee within 5 days and may accept or reject (with reasons).
- Refusal. Applicant informed and of right to appeal
- Accept. Name recorded in private facilities register. Note no licence at this stage.

7.6 Building Plans

- Municipality approved plans must be submitted with 12 months. Extension may be granted but not more than 12 months. If not, application lapses.
- Proof to be submitted that land is available.
- Department must evaluate and approve plans. It is an offence to proceed on unapproved plans

7.7 BUILDING PLANS Cont

- Visible building activities to proceed with 12 months of approval
- If no commencement or having started by ceased, application lapses.
- Maximum of three years allowed for building and inspection. Extension of 12 months may be granted.

7.8 LICENCE

- Once construction is complete, applicant to request an inspection.
- If inspection is positive, HOD must issue a licence to the applicant.
- It is an offence to occupy the building without inspection.

7.9 AMENDMENT OF LICENCE

- Relocation of establishment.
- Amendment of number of beds.
- Change of name of establishment.
- Change of ownership but a new application must be made.

7.10 RENEWAL OF LICENCE

- Licence valid only for a year (Jan-Dec)
- Application to be made not more than 60 days before expiry. Application fee must be paid. In addition, the Hospital is responsible for costs of inspection.
- If inspection is successful, HOD must issue new licence. Not necessary to do inspection for renewal if licence issued after 30 October.

7.11 REVOCATION OF LICENCE

- HoD may suspend, close or withdraw licence if:
 - Patient safety compromised.
 - Staff safety or public is compromised.
 - Contravention of regulations.
- But he must give a hearing to other side before doing so, unless in emergency.

7.12 POWERS OF INSPECTORS

- Request Information on management of facility including accommodation treatment and care of patient.
- All registers, clinical notes and facility performance data.
- No person may obstruct inspector or refuse to disclose information.
Offence created.

Private Facilities, EMS and Medical aids: Dumping Patients to Public Hospitals

Name	Diagnosis	Condition	Admission Date
x	Hyperglyceamia	Very ill and lethargic, treated and admitted to Neonatal ICU on 11/12/15 and died on 14/12/15 The mother remained in Kroon Netcare Hospital as she was on Medical aid and the baby not.	10/12/15
x	Chronic Renal Failure	Medical Aid funds depleted, patient sent to public hospital for further management, referred to Universitas for work up, decline as he was already 60 year of age. Family arranged for a medical aid.	Dec 2014- March 2015

EMEGERNCY MEDICAL SERVICES:

MVA REPORT ON 29/04/2016 INVOLVING ER24. SAPS CASE NUMBER 52/4/2016



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THE END

THANK YOU