

# Clinics can only go so far on their own: can province or national help?

We have been reporting on several clinic-level improvements over the last six months, but clinics can only go so far with their limited resources. At some point the provincial or national departments of health need to help with additional staff and efficient medicine supply. Without this support, clinics are simply too fragile to respond to crises like the fourth wave of COVID-19.

Of the residents who provided additional comments,

**55%**

expressed concern about the shortage of staff at clinics.

While most clinics have maintained an improved level of service this month, the fourth wave of **COVID-19** has put staff under more pressure than ever before. Outbreaks of infection amongst staff at some clinics have slowed down service delivery. In addition, supply chain issues have resulted in periodic medicine stockouts. In Needscamp, for example, two of the four nurses were absent at the same time. This **immediately** affected services, with the clinic shifting from green traffic lights to red across most Asivikelane Health indicators. As the new wave gathers, more clinics will be impacted in the same way.

Encouragingly, clinics have begun cooperating with each other to cope with the burden of the pandemic. Buntingville and Canzibe have, for example, recently implemented a staff-sharing arrangement to deal with capacity shortages. Clinics are also sharing ideas about how to manage the increased demand for vaccinations, in addition to other demands for care. But this innovation should be supported by provincial and national departments of health.

## GOOD NEWS

- **Ntibane** residents successfully advocated the District Health office for a permanent Operational Manager at their clinic and for the formalisation of their clinic committee.
- Waiting times significantly improved in **Zikhova, Ncera, Ngqeleni** and **Ntibane**.
- Medicine availability increased to 100% at **Zikhova** and **Qhuru**.
- Cleanliness of the waiting areas at **Ncera, Qhuru** and **Zikhova** improved.

## HOTSPOTS

- 50% of residents at **Buntingville** did not receive their medication and all residents waited longer than 2 hours as a result of the medicine stockout and staff COVID-19 infections.
- 60% of **Maqanyeni** residents spent more than two hours at the clinic.
- 30% of **Newlands** residents said nurses did not give them enough information to understand their health issue or diagnosis.

DATA NOTES: 232 residents were interviewed in the last week of November 2021, from across 25 clinics in the Buffalo City and OR Tambo Health Districts. Detailed results and comments from residents are available at [www.asivikelane.org/health](http://www.asivikelane.org/health). For more information please contact: [infos@internationalbudget.org](mailto:infos@internationalbudget.org) or [kaugust@spf.org.za](mailto:kaugust@spf.org.za) Facebook: [@smallprojectsfoundation](https://www.facebook.com/smallprojectsfoundation) Instagram: [@spfinfo](https://www.instagram.com/spfinfo) Twitter: [@FoundationSmall](https://twitter.com/FoundationSmall) website: [www.spf.org.za](http://www.spf.org.za)

## ON YOUR MOST RECENT CLINIC VISIT IN THE LAST MONTH...

CLINIC NAME	...WERE YOU ASSISTED WITHIN 2 HOURS BY A HEALTH CARE PROVIDER?	...DID YOU SPEND LESS THAN 3 HOURS IN TOTAL AT THE CLINIC?	...IF YOU NEEDED MEDICATION, WAS THE MEDICINE AVAILABLE FOR YOU ON THE DAY?
<b>PHASE 1 CLINICS</b>			
THEMBALETHU	●	●	●
NEWLANDS	●	●	●
POTSDAM	●	●	●
NEEDSCAMP	●	●	●
NCERA	●	●	●
MPONGO	●	●	●
TWECU	●	●	●
OPENSHAW	●	●	●
ZIKHOVA	●	●	●
MASIPHILE	●	●	●
<b>PHASE 2 CLINICS</b>			
QHURU	●	●	●
MNCOTSHO	●	●	●
ILITHA	●	●	●
TSHABO	●	●	●
BERLIN	●	●	●
NGQELENI	●	●	●
PHILANI	●	●	●
BUNTINGVILLE	●	●	●
MAQANYENI	●	●	●
NKUMANDENI	●	●	●
NTIBANE	●	●	●
NQANDA	●	●	●
CANZIBE	●	●	●
NTAPHANE	●	●	●
LUJIZWENI	●	●	●

Respondents that said YES: 60% or less 61 – 75% 75 – 89% 90% or more