

# Collaborative efforts needed to fix Buffalo City clinics

**An Ideal Clinic has “good infrastructure, adequate staff, sufficient medicine and medical supplies, as well as good administrative processes” according to the Health Department’s Ideal Clinic Framework.**

Since 2021, Asivikelane Health has worked alongside clinic staff and residents in Buffalo City to achieve the goals of the Ideal Clinic model. 84% of residents say that Asivikelane Health has made a positive difference in their community. Much of this progress is due to residents and nurses working together to fix problems, including improving the functioning of clinic committees.

However, systemic problems remain, and 26% of Buffalo City residents report challenges at their clinics. Key issues include insufficient nurses, weak patient-management systems, and inconsistent medicine supply. **Clinics cannot fix these problems alone.** The government, the private sector, and non-governmental actors must work together to find lasting solutions. **Collaboration could spark innovation, enhance accountability, and lead to more effective resource utilisation.**

- +** Key government stakeholders include the Health District Manager for Buffalo City Metro, the Eastern Cape Quality Assurance Manager, the Manager of the Ideal Clinic unit, facility managers across the district, and the District and Provincial Health Councils.
- +** Key non-government and independent stakeholders include the Auditor-General of South Africa, the Border-Kei Chamber of Business, and local NGOs such as Beyond Zero, MatCH and the Bumb’INGOMSO intervention.

## ‘HOTSPOT’ CLINICS IN BUFFALO CITY WHERE SERVICE DELIVERY PROGRESS IS LAGGING

Needs Camp	Mpongo	Qhuru	Berlin	Petros Jobane	Zikhova	Drake Road	John Dube	Mncotsho	Openshaw	Greenfields	Fort Grey
Long waiting times, shortage of staff, inadequate waiting areas, shortage of medication.	Long waiting times, shortage of staff, inadequate waiting areas, shortage of medication.	Poor building infrastructure, shortage of staff, no waiting areas, shortage of medication, no youth services, appointment system not working.	Small facility, no fencing, no waiting areas, limited electricity supply.	Inadequate medical waste management, long waiting times, no waiting areas, no fencing, shortage of space, e.g., the consulting room is also the filing room.	Shortage of staff, prescribed medication supplied inconsistently, no youth services, appointment system not working.	Poor clinic infrastructure, non-functioning appointment system, long waiting times.	No fencing, long waiting times.	Old building with no waiting areas, broken windows, shortage of medication, lack of clinic resources such as wheelchairs.	Shortage of staff, prescribed medication supplied inconsistently, no youth services, appointment system not working.	Shortage of staff, inadequate infrastructure, prescribed medication supplied inconsistently, no youth services, appointment system not working.	Shortage of staff, prescribed medication supplied inconsistently, no youth services, appointment system not working.