

Improving the Quality of Service in the Public Sector

People who use Public Health Services experience many problems. Facilities are far from their homes and they have to travel long distances. They have to queue for long periods. Facilities are often closed when they are needed. The services offered are of poor quality and limited range. Most people cannot afford the fees and many are turned away if they cannot pay. Health workers, especially doctors and nurses, look down on them and are often uncaring and rude, blaming them for being sick and for other problems beyond their control. In some areas people have been unable to utilise facilities because of violence.

Causes:

The conference found that the above problems have deep rooted origins in the public sector and include a lack of:

- a common philosophy and PHC vision;
- an intersectoral approach;
- effective and efficient financing mechanisms;
- resources for PHC;
- genuine community involvement;
- respect for people;
- a comprehensive range of available resources;
- clear conditions of service;
- improved planning;
- effective human resource programmes; and
- effective management styles and approaches.

Recommendations

The basic solution to these problems was seen in a reorganised restructured, transformed public health service oriented towards PHC and not in privatisation or procurement by the state. The PHC service should be accountable to a democratically elected local government and the community. Imperative during the transition would be the implementation of an affirmative action programme.

We hereby call on government to:

- stop unilateral restructuring;
- stop cutting the public sector including the retrenchment of staff;
- create incentives to encourage staff to stay in the public sector;
- make all health sector information open to the community while maintaining confidentiality;
- involve staff and communities in planning;
- abandon top-down, authoritarian management styles and retrain managers for a more participatory approach;

- finally abandon racism and penalise staff who remain racist;
- urgently provide primary care facilities and services near where all South Africans live on the basis of equity;
- provide a standard and range of facilities suitable for a lower middle income country, including emergency, maternity and rehabilitation services.
- ensure a supply of essential drugs and equipment;
- implement a Patient's Charter of Rights;
- stop refusing care to people who cannot pay;
- develop a family centred patient kept record system;
- ensure safety and rights of health workers in health care institutions;
- actively root out corruption;
- institute credible public monitoring of the implementation of these measures and make it available on request; and
- democratise and institute legitimate community control of local public health services

