higher education & training

Department:
Higher Education and Training
REPUBLIC OF SOUTH AFRICA

MARKING GUIDELINE

NATIONAL CERTIFICATE (VOCATIONAL)

THE SOUTH AFRICAN HEALTH CARE SYSTEM
NQF LEVEL 4

12 November 2024

This marking guideline consists of 9 pages.

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QUESTION 1

1.1

1.1.1	D
1.1.2	A
1.1.3	K
1.1.4	H
1.1.5	E
1.1.6	C
1.1.7	F
1.1.8	G
1.1.9	B
1.1.10	I

(10 × 1) (10)

1.2 WHO suggests spending 5% of a country's GDP on health✓
SA spent 8%✓ − more than what is suggested (good)✓
Government − main source of funding for health care✓
Other sources: household spending through medical schemes and out-of-pocket payments✓
2007/2008 budget: 25% was spent on PHC & 38% tertiary health care✓
Sep 2000: Countries adopted the Millennium Declaration designed to improve social and economic conditions in the world's poorest countries by 2015.✓
It is suggested to do this by using 15% of their total budget on health care✓
SA total budget 2014/2015: R1 253 billion of which R146 billion was spent on health (11,6%)✓
SA total budget 2015/2016 : R1 349 billion of which R157 billion was spent on health (11, 6%)✓ (Accept more recent budget updates as well)
That means that SA is in line with what the WHO suggest (5%) but not yet in line with the Millennium Declaration of 15%✓
(Similar wording and answers accepted) (Any 5 × 2) (10)

1.3

FINANCING MECHANISM	ADVANTAGE	DISADVANTAGE
Government taxes	Focus services on the poor and vulnerable groups. ✓✓ Devoted to geographical inequalities. Access to tax revenues.	The people making policies are not always the ones delivering the services.✓✓ Strict regulations limit personal initiatives and innovation. Limited attention to customer satisfaction.
Medical aid	It financially protects you if you suddenly have to pay large, unexpected medical costs.✓✓ Because you have cover, your treatment will not be delayed because of a lack of funds. You can receive treatment by private doctors, specialists and hospitals, instead of overcrowded public health services.	It is expensive and fees are always increasing.✓✓ Having cover still does not address the lack of health facilities in rural areas. Depending on your health plan, your medical scheme might only pay a certain part of your health care costs.

(4 × 2 marks for answers + 2 marks for creating table.)
Accept relevant answers (5 × 2) (10)

1.4 Mandatory health insurance is health insurance that you must purchase.✓✓ The idea behind health insurance is that everyone is required to purchase health insurance✓✓ to reduce the overall health care cost.✓✓ People with access to health insurance tend to use preventative care✓✓ which places less burden on the system.✓✓ (5 × 2) (10)

[40]

QUESTION 2

2.1 2.1.1

- Comprehensive benefits package
- Three streams of primary healthcare re-engineering
- Accredited and contracted private providers
- Management reforms and designations of hospitals (4)

2.1.2

- If the population is healthy it will contribute to wealth creation of its nation.
- Investments in health are safety nets against poverty in times of economic disruptions.
- Employment will improve as staff will be needed in hospitals, provide improved access to quality health services.
- Improved infrastructure will increase attraction to their regions. (4)

2.1.3 To pool funds and purchase health services from contracted public and private health care providers. (2)

2.1.4
- The right to access
- Social solidarity
- Effectiveness
- Efficiency
- Equity
- Appropriateness
- Affordability (Any 5 × 1) (5)

2.1.5
- Waiting times
- Positive and caring attitudes
- Patient safety
- Infection prevention and control (IPC)
- Availability of medicines
- Cleanliness (6)

2.1.6
- Level of income and economic growth
- Size of the formal sector
- Extent of social solidarity
- Acceptance of cross-subsidies
- Administrative capacity
- Level of urbanization (Any 3 × 2) (6)

2.1.7 Yes.✓
It makes health services more accessible.✓✓
It is focused on areas of the population at risk.✓✓
Outreach teams will lower the need for patients to visit clinics, thereby preventing overfilled facilities.✓✓
It is a more affordable health care system for the patient.

OR

No.✓
Health care workers are at risk as going into some communities will be very dangerous.✓✓
People may become dependent on home visits and neglect seeking healthcare when they are sick.✓✓
Limited number of healthcare professionals which limits the impact they have when providing treatment.✓✓ (1 + 3 × 2) (7)

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2.2

COMMUNITY HEALTH WORKER	PROFESSIONAL NURSE
Conducts community, household and individual health assessments✓	Facilitates comprehensive PHC service delivery✓
Promotes the health of the households and the individuals within these households✓	Re-prescribes and prescribes treatment according to treatment and protocol✓
Refers persons for further assessment and testing after performing simple basic screening tests✓	Manages communicable and non-communicable diseases✓
Provides limited health interventions in a household	
Provides psycho-social support	
Manages some interventions, e.g. adherence support	

(Accept any THREE community health worker and any THREE professional nurses) (3 × 2) (6)

[40]

QUESTION 3

3.1

PRIVATE HEALTH CARE SECTOR	PUBLIC HEALTH CARE SECTOR
Medical schemes, hospital plans and out of pocket payments cover for private health services✓	Government taxes cover for public health services✓
Covers mostly employed individuals✓	Covers all SA citizens✓
Can choose private healthcare provider✓	Have no choice which practitioner one sees✓
Serves only a small part of the population✓	Serves very large part of the population✓
Has adequate human and financial resources✓	Has a shortage of human and financial resources✓
Less than 16% of the population	Serves more than 65% of the population
Abundance of resources	Lack of resources
Adequate number of beds	Lack of beds
Manageable workload	Overwhelming workload

Any FIVE private and any FIVE public.
(Any 5 × 2) (10)

3.2 3.2.1 Health is defined as complete✓ physical, social and spiritual well-being✓ and not merely the absence of disease.✓ (3)

3.2.2
- Primary
- Secondary (2)

3.2.3 Tertiary Healthcare is the most specialized form of health care services. Training of health care professionals takes place at tertiary academic institutions. Training is linked to certain universities having partnerships with the hospitals.

(Any 2 × 1) (2)

3.2.4
- Offer specialized health services.
- Train health care professionals.
- Partner with universities for training purposes.
- Have specialist health workers. (2 × 2) (4)

3.2.5
- Steve Biko Academic Hospital
- Chris Hani Baragwanath Hospital
- Kalafong Hospital
- Charlotte Maxeke Hospital
- Universitas Academic Hospital
- Greys Hospital

(An exhaustive list can't be provided as there are too many)

(Any 2 × 1) (2)

3.2.6
- Anaesthetics
- Orthopedics
- Cardiology
- Neurosurgery
- Pediatrics
- Gynecology
- Ophthalmology
- Oncology (Any 4 × 1) (4)

3.2.7 Yes✓
- Health care services offered at government hospitals are free as they are owned and funded through the government.✓✓
- All SA citizens have the right to free healthcare according to the National Health Act.✓✓ (1 + 2 × 2) (5)

3.3
- The quadruple burden of disease
- Serious concerns about quality of the public health care
- And ineffective and inefficient health care system
- Spiralling costs of private healthcare (4 × 2) (8)

[40]

QUESTION 4

4.1 4.1.1 Planning and budgeting
4.1.2 Setting policies, estimating revenue and setting upper limit on spending
4.1.3 Guideline estimations are determined
4.1.4 In-year management (operating, monitoring and safeguarding)
4.1.5 September−October
4.1.6 All entities have a last say
4.1.7 January
4.1.8 Final approval made by Budget Council and Cabinet
4.1.9 Reporting
4.1.10 Budget day and follow-up discussion

(10 × 1) (10)

4.2 4.2.1 Estimate of income and expenses for a set period.

4.2.2 used to refer to the spending of funds.

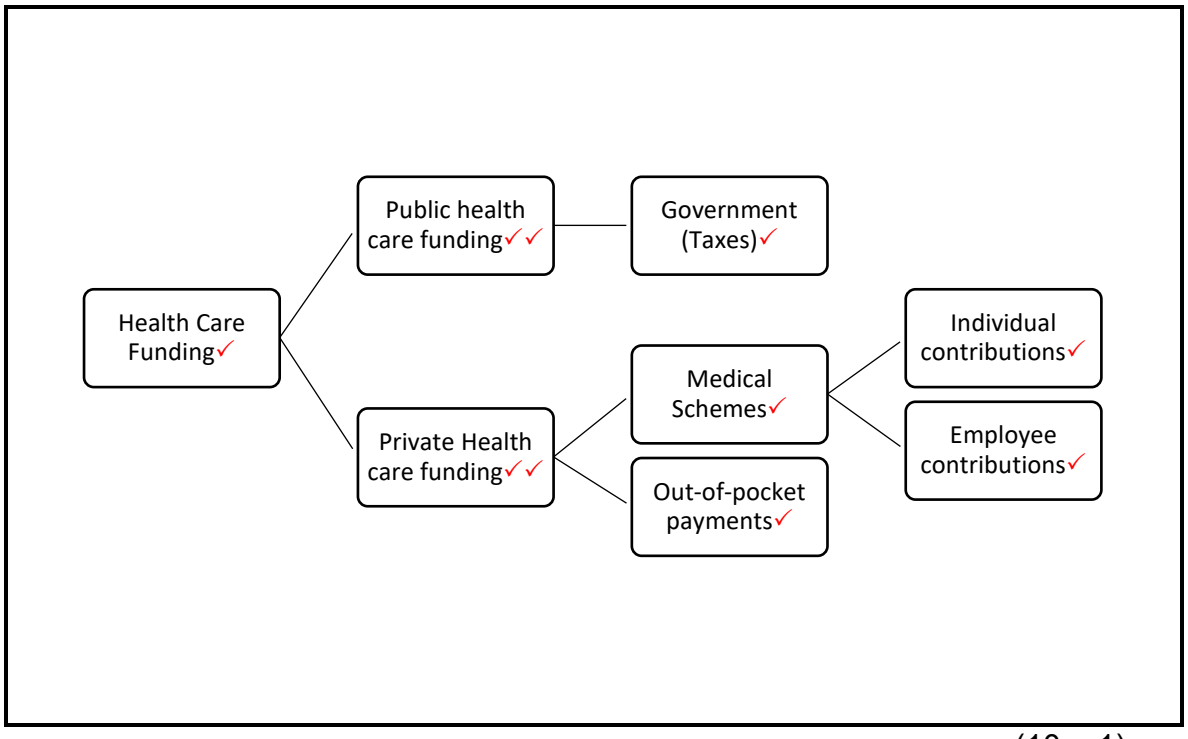
4.2.3 The difference between budgeted expenses and budgeted income.

4.2.4 All funds collected for the National Budget, mostly collected from taxes.

4.2.5 Maintain a certain level of effectiveness regardless of risk factors.

(5 x 2) (10)

4.3



(10 × 1) (10)

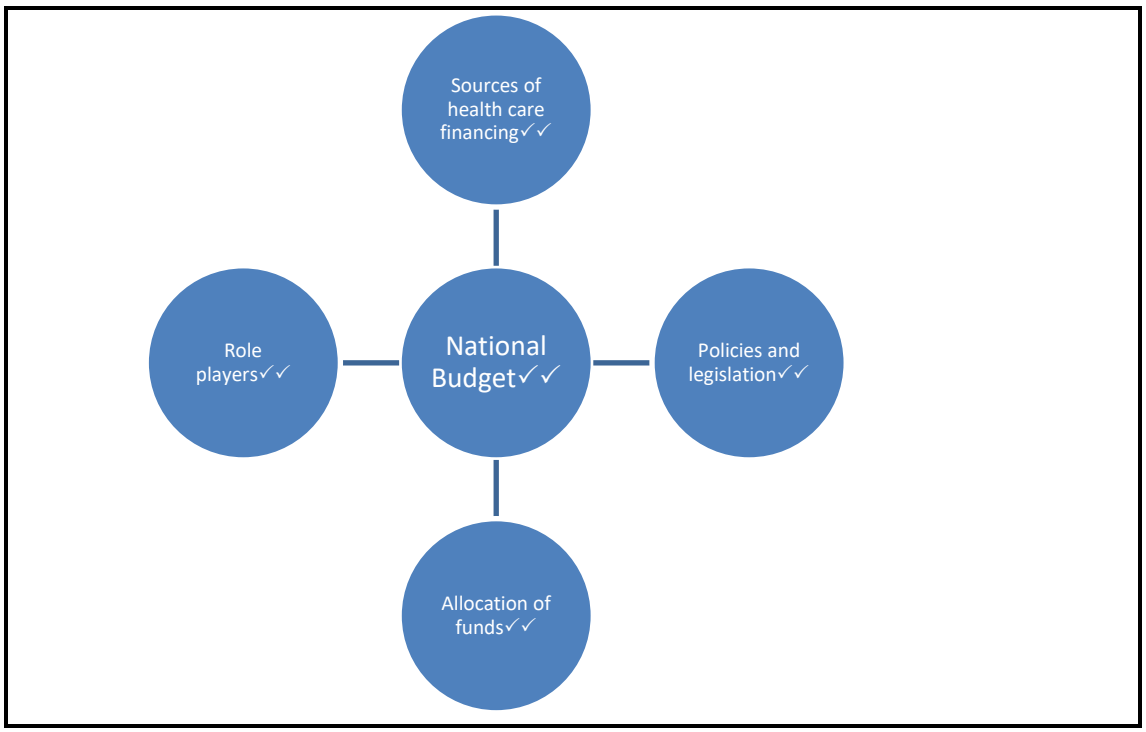
4.4

- Affordability✓ − Ensuring that services are obtained at a reasonable cost to the country and the citizens.✓
- Appropriateness✓ − There should be new and innovative ways to improve service delivery.✓
- Efficiency✓ − Is the ability to accomplish a job with a minimum use of time, effort and resources✓
- Right to access✓ − It is the responsibility of the state✓ to provide optimal healthcare✓
- Equity✓ − Everyone should be treated the same regardless of status and social privilege should be eliminated. ✓
- Effectiveness✓ − Services are improved to deliver care better healthcare.✓
- Social solidarity✓ − Equitable benefits for contributions. (Any 5 × 2) (10)

[40]

QUESTION 5

5.1



(5 × 2) (10)

5.2

- SA medical schemes are very expensive, and most people opt for free services or none.
- People with major health problems usually are unemployed and reliant of government for financial resources which are not sufficient to fund medical insurance.
- The health insurance business model is flawed and will continue to increase health insurance prices as membership decreases.
- Majority of people that need health insurance do not have any health insurance.
- The majority of health insurance members are considered healthy individuals and are not as in need as others.
- Many elderly South Africans do not have access to health insurance

(Any 4 × 1) (4)

5.3

SOCIAL HEALTH INSURANCE	NATIONAL HEALTH INSURANCE
where everyone contributes✓ and everyone✓ benefits✓	only some contribute✓ but everyone✓ benefits✓

(2 × 3) (6)

5.4 The objective of the NHI is to provide improved access✓✓ to quality healthcare for all South Africans.✓✓ They will acquire quality health care✓✓ and control finances by pooling risks and funds.✓✓ This will create a single fund which will strengthen the health care system. By using one fund, all health care services in the public sector will be better resourced and be able to deliver quality health care.✓✓ (5 × 2) (10)

5.5 5.5.1 Encourage training across the health care spectrum or develop health policies to reflect diversities.

5.5.2 Evaluate institutional performance, policy options, and actions or improve the recruitment performance.

5.5.3 Ensure quality and responsive curricula.

(3 × 2) (6)

5.6 Academic medicine is defined as the capacity to study,✓ discover, evaluate, teach and improve health systems.✓ (2)

5.7 The mission of the academic method is to improve patients' lives through clinical care✓ and teaching the next generation of health professionals,✓ as well as service delivery. (2)

[40]

TOTAL: 200

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