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 3

13 November 2024

This marking guideline consists of 10 pages.

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QUESTION 1

1.1
1.1.1 A
1.1.2 B
1.1.3 D
1.1.4 C
1.1.5 D
1.1.6 A
1.1.7 A
1.1.8 B
1.1.9 B
1.1.10 C

(10 × 1) **[10]**

1.2 1.2.1 A system, which is made up of individuals or organisations✓ who, in their private capacity, provide health services on a profit basis. ✓ (3)

1.2.2 Health services for employees,✓ at their place of employment.✓ Consist mainly of primary health care and occupational clinics✓ (3)

1.2.3 An infection, whose development is favoured by a hospital environment.✓ Usually diagnosed after discharge.✓ (2)

1.2.4 People travelling to other countries✓ for the purpose of using their health-care services.✓ (2)

1.3

Type of CSO	Registration
Voluntary Associations	• Exist in common law✓✓
Section 21 Companies	• Established i.t.o. the Companies Act✓✓
Trusts	• Established i.t.o. the Trust Property Control Act✓✓

(3 × 2) (6)

1.4
- Apply to Department of Social Development for funding✓
- Apply to other organisation for funding, e.g., Lotto✓
- Raise funds through selling things or having a fundraising day✓
- Ask donations from people✓
- Register as a Section 18A company that would attract more donors, because donations will then be tax deductible (Any 4 × 1) (4)

[30]

QUESTION 2

2.1
2.1.1 CSO: Civil✓ Society Organisation(s)✓
2.1.2 CBO: Community-based✓ Organisation(s)✓
2.1.3 PBO: Public✓ Benefit Organisation(s)✓
2.1.4 NPO: Non-profit✓ Organisation(s)✓
2.1.5 NGO: Non-government(al)✓ Organisation(s)✓
(5 × 2) (10)

2.2
- Netcare
- Life Healthcare
- Mediclinic (Any 2 × 1) (2)

2.3
- Medical schemes/-aids
- Out-of-pocket payments (2)

2.4
- General wellness (such as management and nutrition)
- Management of chronic diseases (such as HIV/Aids and hypertension)
- Management of behavioural health conditions (such as depression and stress)
- Preventative care in the form of awareness and education on health-related issues and well-being (4)

2.5
- Health facilities
- Private for-profit hospital
- Personnel (health professionals in private practice)
- Workplace-based health services
- Pharmacies
- Traditional health practitioners
- Complementary health practitioners (Any 2 × 1) (2)

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2.6

PRIVATE SECTOR	PUBLIC SECTOR
Most patients treated by a doctor✓	On primary level, most patients treated by a nurse✓
Most patients paid more than R100 per consultation and would pay with medical aid✓	Most patients receive free services✓
Most people patients visiting private health-care centres would rate it excellent. ✓	The majority of patients would not rate the health-care services as excellent. The standard are not always the same as on private sector level. ✓
Usually spends more time with health-care provider than in public sector. ✓	Usually spends less time with health-care provider than in private sector. ✓
Patients are able to afford medication for treatment of STI, because of medical aid.✓	Treatment of STI is provided by public sector, because patients cannot afford it themselves.✓
Provides maternal, child health and family planning to members of medical aids.	Clinics provides maternal, child health and family planning.
Private medical practitioners and pharmacists provide vaccines to children and immunisation to adult travelling abroad.	Immunisation done at clinics, most of the time, and is free of charge.

(Any 5 × 2) (10)
[30]

QUESTION 3

3.1 3.1.1

- First level of care
- First point of entry into health system
- Addresses basic health-care needs
- Essential health-care services
- Play a major role in local communities
- Includes routine check-ups, preventative care and health education
- Continuity of care is a characteristic of PHC
- Referral to other levels of care, if needs are more complex (4)

3.1.2

- Second level of care
- Referred to from PHC
- Intermediate level of health care
- Professionals are usually not the first contact with patients (they were referred to them) (2)

3.1.3
- Third level of care
- Usually provided at a regional hospital
- Very specialised units
- Referred to from PHC and secondary health care
- Training of health-care workers (academic health care medicine)
- and research on health-related issues take place here
- E.g., Groote Schuur Hospital, Red Cross Hospital and Tygerberg Hospital (Western Cape) (Any 3 × 1) (3)

3.1.4
- Fourth level of care
- Extension of tertiary health care
- Experimental medicine and some uncommon diagnostic or surgical procedures are done at this level (Any 1 × 1) (1)

3.2 3.2.1 Provides for an authorisation permit to be issued to a nurse to dispense schedule 1-4 substances at workplace health services.✓✓

OR

Ensures the registrations, safety, quality and efficacy of medicine.

3.2.2 Provides for medical cover and compensation of occupational injuries or diseases arising from workplace exposures.

3.2.3 Allows for the establishment of bargaining councils that have the right to establish and administer pension, provident funds, sick pay and medical aids for the benefit of members.

3.2.4 Ensures a healthy and safe working environment for workers in the mining sector

3.2.5 Allowed for establishment of a Council for Medical Schemes, to regulate the activities of medical schemes and protect the interest of members of medical aid schemes.

(5 × 2) (10)

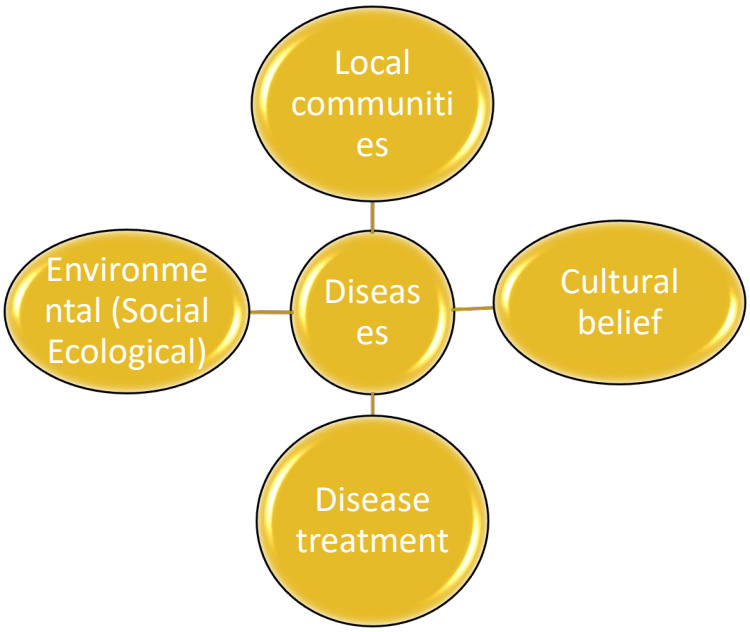
3.3 Benefits:
- Increases work productivity, because it keeps employees mentally and physically healthy.
- Targets employees, who cannot afford or qualify for medical aid.
- Will encourage healthier outcomes for employees, which will lead to more effective working – less people on sick leave.

Disadvantages:
- Some employees do not regard doctors and nurses as neutral, and see them as part of management ,which may impair their ability to really make use of the services.
- Families of employees, who get workplace-based health care, do not benefit from it.
- Are often based in industrial or mining areas that are far away from the communities and villages from where employees originate from.. (10)

[30]

QUESTION 4

4.1



(5 × 2) (10)

4.2 Diverse health practices, approaches, knowledge and beliefs,✓ incorporating plant, animal and/or mineral based✓ medicines, spiritual therapies, manual techniques✓ (*accept any two*) and exercises, applied singularly or in combination,✓ to maintain well-being as well as to treat, diagnose or prevent illness.✓

OR

The sum total of the knowledge, skills and practices,✓ based on theories, beliefs and experiences✓ indigenous to different cultures,✓ (whether explicable or not), used in the maintenance of health,✓ as well as in the prevention, diagnosis, improvement or treatment of physical and mental illness.✓ (5)

4.3
- Traditional medicine was freely practices during precolonial phase.
- During colonial phase, it was prohibited and seen as witchcraft,
- In the modern phase, it is being regulated and accepted in South Africa. (3)

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4.4

TRADITIONAL MEDICINE	WESTERN MEDICINE
Focuses on health and healing the person✓	Focuses on pathology and curing disease✓
Oriented to the community✓	Oriented to the individual✓
Takes place in familiar surroundings✓	Takes place in unfamiliar surroundings✓
Emphasises humanistic care	Emphasises impersonal (clinical) care
Provides holistic care	Provides fragmented care
Diseases do not have a simple explanation	Sees diseases as biological
Treatment does not always produce measurable outcomes	Treatment should produce measurable outcomes
Seeks to understand the disease	Seeks methods of destroying disease
Health history includes environment	Health history focuses on patient and family
Intuition is primary – healing is based on spiritual truths	Intellect is primary
Looks at the big picture	Seeks to link the causes and effects of disease in the physical realm (domain)
Healer is a health counsellor and advisor	Physician is an authority
No formal testing of treatment	Trials are done in the first phase of testing; then efficacy
Uses an unfixed dosage	Uses a fixed dosage
Uses lengthy consultations	Uses brief and focused consultations
Lengthy training	Formal training through colleges and universities

(Any 4 × 2) (8)

4.5

- Traditional healers are well known in the community.
- Health care is holistic, client-centred and personalised.
- Interventions are culturally appropriate and meet the expectations of the patients and clients.
- Is available and accessible.
- Culture-bound syndromes can be treated.
- Consumers like the combination of spiritual and psychological treatment, which involves ancestor worship and divination (prediction). (Any 4 × 1) (4)

[30]

QUESTION 5

5.1
5.1.1 Complementary
5.1.2 Complementary
5.1.3 Complementary
5.1.4 Traditional
5.1.5 Complementary
5.1.6 Traditional
5.1.7 Complementary
5.1.8 Traditional
5.1.9 Traditional
5.1.10 Traditional

(10 × 1) (10)

5.2
- Traditional medicine include the concept of primary health care.
- Traditional healers are important stakeholders in the delivery of PHC.
- They play an important role in the delivery of community-based health services.
- Knowledge of the emotional and spiritual lives of clients enabled traditional healers to influence their behaviours, which are critical in health promotion, prevention of diseases, treatment, care and rehabilitation.
- Health-care providers, practicing in public health, are recruiting traditional healers to assist in the fight against HIV/Aids, diarrhoea, and pneumonia.
- New scientific techniques are applied to traditional medicine in the search for modern drugs.
- Research shows an increase in patients completing TB treatment in patients supervised by traditional healers. (Any 5 × 2) (10)

5.3
- People living more Western lifestyles – development of chronic illnesses that require treatment
- An interest to move away from medical treatment and more holistic treatment
- Perceived benefits of complementary medicine
- Offers alternative methods for treatment of diseases that are responsive to conventional treatment
- Allows for the patients' active involvement in their care and treatment
- Is available and suitable for them
- Is safe (Any four relevant arguments) (Any 5 × 2) (10)

[30]

QUESTION 6

6.1

Main category	Natural products	Mind-body medicine	Manipulative and body-based practices
Examples	Nutritional supplements✓ Herbalism✓ Homeopathy✓ Detoxification therapy✓ Aromatherapy✓	Meditation✓ Yoga✓ Hypnotherapy✓ Anthroposophic medicine✓	Acupuncture✓ Spinal manipulation✓ Massage therapy✓

(Students can do the categories in any order, as long as the examples correspond.) (12)

6.2 6.2.1
- Meditation
- Hypnotherapy
- Herbalism
- Homeopathy
- nutritional supplements (Any 1 × 1)

6.2.2
- Yoga
- Acupuncture
- Spinal manipulation
- Massage therapy (Any 1 × 1)

6.2.3
- Nutritional supplements
- Herbalism
- Detoxification therapy
- Yoga (Any 1 × 1)

6.2.4
- Aromatherapy
- Meditation
- Yoga
- Hypnotherapy
- Massage therapy
- Acupuncture (Any 1 × 1)

6.2.5
- Homeopathy
- Herbalism (Any 1 × 1)

(Any 5 × 1) (5)

6.3 Ethical principles

- Do no harm
- Appropriate use of conventional medicine
- Patient participation
- Promotion of health and treatment of disease
- Healing power of nature
- Respect the rights of patients
- Determine the manner in which social problems and benefits should be distributed among all individuals in the community

Values

- Holism
- Embracing cultural diversity
- Respecting cultural values
- Focusing on the patient, rather than disease
- Open communication and conversation
- Maintain good rapport with clients (Any 10 × 1) (10)

[30]

TOTAL: 180

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