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

16 November 2023

This marking guideline consists of 8 pages.

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QUESTION 1

1.1 1.1.1
- Tertiary health care is the most specialised 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 relevant 3 × 1) (3)

1.1.2
- Governance
- Educational services
- Selecting staff
- Financing
- Infrastructure and technology (5)

1.1.3 Groote Schuur Hospital:
- Trains health care professionals
- Has specialised health services
- Partners with universities

(Any relevant 1 × 1) (1)

1.1.4
- Tygerberg Hospital
- Wits University
- University of the Free State

(Any relevant 2 × 1) (2)

1.1.5 No (1)

1.1.6 Health services at government hospitals are free. (2)

1.1.7
- Anaesthetics
- Orthopedics
- Cardiology
- Neurosurgery
- Pediatrics
- Gynaecology
- Ophthalmology
- Radiology
- Oncology (Any correct 4 × 1) (4)

1.1.8
- If the population is healthy it will contribute to the wealth creation of the nation.
- Investment in health is a safety net against poverty in times of economic disruptions.
- Employment will improve as more staff is needed in hospitals to provide improved access to quality health services.
- Improved infrastructure increases interest in those regions.

(Any relevant 4 × 2) (8)

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1.2
- Levels of income and economic growth
- Size of the formal sector
- Extent of social solidarity and acceptance of cross-subsidies
- Administrative capacity
- Level of urbanisation (Any relevant 3 × 2) (6)

1.3

FINANCING MECHANISM	ADVANTAGES	DISADVANTAGES
Government taxes	• Focus services on the poor and vulnerable groups✓✓ • Devoted to geographical inequalities✓✓ • Access to tax revenues✓✓ (Any 2 × 1)	• The people making policies are not always the ones delivering the services✓✓ • Strict regulations limit personal initiatives and innovation✓✓ • Limited attention to customer satisfaction✓✓ (Any 2 × 1)
Medical aid	• It financially protects a person that suddenly has to pay large, unexpected medical costs.✓✓ • Because a person is covered, the treatment will not be delayed because of a lack of funds.✓✓ • Treatment can be provided by private doctors, specialists and hospitals, instead of overcrowded public health services.✓✓ (Any 2 × 1)	• It is expensive and fees are regularly increasing.✓✓ • Having cover does not address the lack of health facilities in rural areas.✓✓ • Depending on the health plan, the medical scheme might only pay a certain part of the health care costs.✓✓ (Any 2 × 1)

(4 × 2) (8)

[40]

QUESTION 2

2.1
2.1.1 C✓
2.1.2 J✓
2.1.3 H✓
2.1.4 K✓
2.1.5 D✓
2.1.6 F✓
2.1.7 A✓
2.1.8 G✓
2.1.9 B✓
2.1.10 I✓

(10 × 1) (10)

2.2

COMMUNITY HEALTH WORKER	PROFESSIONAL NURSE
• Conducts community, household and individual health assessment✓ • Promotes the health of households and the individuals in these households✓ • Refers persons for further assessment and testing after performing simple basic screening tests✓ • Provides limited health interventions in a household✓ • Provides psychosocial support✓ • Manages some interventions, e.g. adherence support✓ (Any 2 × 2)	• Facilitates comprehensive primary health care (PHC) service delivery✓ • Prescribes and re-prescribes treatment according to the required treatment and protocol✓ • Manages communicable and non-communicable diseases✓ (Any 2 × 2)

(Any relevant 4 × 2) (8)

2.3
- Waiting times
- Positive and caring attitudes
- Patient safety
- Infection prevention and control (IPC)
- Availability of medicine
- Cleanliness (6 × 2) (12)

2.4
- Mandatory health insurance is health insurance that must be purchased.✓✓
- 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 reduces the burden on the system.✓✓ (5 × 2) (10)

[40]

QUESTION 3

3.1
3.1.1 False
3.1.2 True
3.1.3 True
3.1.4 False
3.1.5 False

(5 × 1) (5)

3.2 3.2.1 (a)
- Affordability refers to ensuring that services are obtained at a reasonable cost to the country and the citizens.✓
- Coverage should not be determined by socioeconomic status.✓
- The NHI will cover health services for those who cannot afford it. ✓ (Any relevant 3 × 1) (3)

(b)
- Appropriateness of health care in the local context. ✓
- There should be new and innovative ways to improve service delivery.✓
- This will ensure that health care is presented in an appropriate way to all communities.✓

(Any relevant 3 × 1) (3)

3.2.2
- It takes place from February to April✓
- February
  Budget day✓ and follow-up session✓
- March–April
  Portfolio committees and provincial standing committees hold hearings✓ and report to legislators✓ (5)

3.2.3 January✓– February✓ (2)

3.2.4 Vertical division (2)

3.2.5
- Tax
- Social insurance
- Private insurance
- User fees (out-of-pocket payments)
- Community financing
- Donations and grants (Any relevant 4 × 2) (8)

3.2.6 Division of Revenue✓ Act; Act 2 of 2003✓ (2)

3.3

PRIVATE HEALTH CARE SECTOR	PUBLIC HEALTH CARE SECTOR
• Services are not free✓	• Services are free✓
• Mostly seen by doctors✓	• Mostly seen by nurses✓
• Smaller percentage of population uses private health care✓	• Larger percentage of population uses public health care✓
• Funded through out-of-pocket payments and medical schemes✓	• Funded by government✓
• More time with health professional✓	• Less time with health professional✓

(5 × 2) (10)
[40]

QUESTION 4

4.1 4.1.1 Shortage of 44 700✓✓ nursing staff in South Africa since 2010 (2)

4.1.2
- Inadequate training and student output
- Positions not filled
- An ageing workforce
- Poor salaries
- Poor working conditions (Any relevant 4 × 1) (4)

4.1.3
- Administration
- Clinical guidelines and integrated service management
- Medicines, supplies and laboratory support
- Staffing and professional etiquette
- Availability of a doctor
- Infrastructure and support services
- Health information management
- Communication
- District health support systems
- Partners and stakeholders (Any relevant 5 × 2) (10)

4.1.4 (a) No✓✓ (2)

(b) Explanation:
- Inadequate training and student output ✓
- Positions not filled✓
- An ageing workforce✓
- Poor salaries✓
- Poor working conditions✓

Not enough nurses✓ (Any relevant 2 × 1) (2)

4.2
- Medical schemes only cover the private health sector (about 14,8% of the population).
- About 21% use out-of-pocket primary care in the private sector and public health care for hospital services.
- The rest of the population uses public health care, i.e. the public health sector covers a bigger portion of the population than private health care.✓✓
- There are disparities regarding equipment/infrastructure and personnel/staff within the public and private health care sectors. In the public health sector, the ratio per patient is smaller than in private health care.
- The workload of health professionals in the private sector is lower than in the public sector, i.e. they are expected to attend to more patients per day.

(Any relevant 5 × 2) (10)

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4.3 4.3.1
- Budget Council
- Medium-Term Expenditure Framework Committee
- Financial and Fiscal Commission
- Minister's committee on the budget
- Budget Forum
- Civil Servants
- National Portfolio Committees and provincial committees

(Any relevant 4 × 1) (4)

4.3.2
- Pre-budget proposal
- Executive budget proposal
- Enacted budget
- Citizen's budget
- In-year report
- Mid-year report
- Year-end report
- Audit report (Any relevant 6 × 1) (6)

[40]

QUESTION 5

5.1 5.1.1 Budget revenue is all funds collected for the National Budget,✓✓ mostly from taxes.✓✓ (2 × 2) (4)

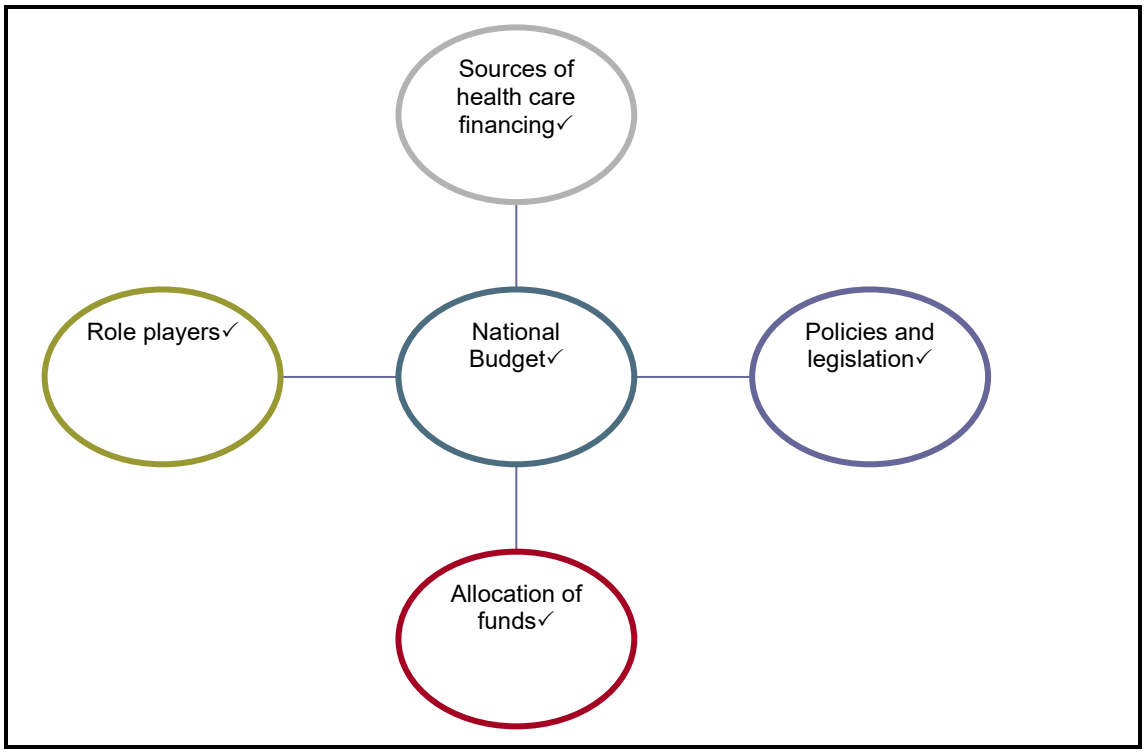
5.1.2 Budget expenditure is the term used to refer to the spending✓✓ of the funds.✓✓ (2 × 2) (4)

5.2 Mr Enoch✓ Godongwana.✓ (2)

5.3
- Estimate what it will cost to run the country.
- Allocate certain amounts to the departments and provinces.
- Monitor the allocations. (Any relevant 2 × 2) (4)

5.4
- Size and demographics of the population.
- Size of its rural communities.
- Poverty level of the provinces. (3 × 2) (6)

5.5



(5 × 2) (10)

5.6

- 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 primary health care (PHC) and 38% on tertiary health care✓
- Sep 2000: Countries adopted 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%)✓
- That means that SA is in line with what the WHO suggests (5%) but not yet in line with the Millennium Declaration of 15%✓

(Similar wording and answers accepted) (Any relevant 10 × 1) (10)

[40]

TOTAL: 200

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