



## Improving safe quality patient care

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### Engagement with President Ramaphosa

#### 1 Introduction

Research has consistently shown that poor quality healthcare services are an important driver of mortality among users of health establishments

NRF funded research on malpractice litigation in nursing practice in South Africa has shown that there is no statistical difference in the clinical management of patients between private and public health care.

A number of factors have been identified that contribute to malpractice litigation that include behaviour, not following guidelines, not responding to clinical manifestations, poor supervision and lack of training among others (Stellenberg et al. 2019).

#### 2 Office of health standards compliance (OHSC)

The OHSC was established in terms of the National Health Act, 2003 (Act No. 61 of 2003) (“the Act”) as a juristic person under the oversight control and leadership of a Board appointed by the Minister of Health under the Act.

The entity is further governed through the Public Finance Management Act, 1999 (PFMA) and has been listed by the Minister of Finance under Schedule 3A of the PFMA as a public entity. The vision of the OHSC “Safe and quality Healthcare for all South Africans” and their mission “We act independently, impartially, fairly and fearlessly on behalf of the people of South Africa in guiding, monitoring and enforcing health care safety and quality standards in health establishments”. A major challenge for the OHSC in South Africa today.

#### 3 The Norms and Standards Regulations for different categories of Health Establishments: implemented February 2019

Despite the challenges, the OHSC is leading much-needed improvements in health service quality, change in public health care management, and implementation of promulgated norms and standards in public and private service providers.

The work of the OHSC will pave the way for the implementation of the National Health Insurance initiative. However, in an ideal environment, the OHSC should inspect 25% of all health facilities on an annual basis with the implementation of the regulation

**Thus for an effective and efficient execution of the task of the OHSC, funding is required to meet this goal of inspecting 25% on an annual basis.**

#### 4 CONCLUSION

Continuous quality improvement implemented measures are thus urgently required to address the clinical management of patients in both public and private health care which include continuous quality improvement programmes, CPD, improvement in nurse training, Capacity building in leadership and management of nurse leaders on all levels to meet the norms and standards set by OHSC.

Implementation of the Market Inquiry Report with reference to the OHSC and recommendations of the Lancet report about improving quality healthcare.