

The Community Life Center platform

A community-driven and holistic platform for strengthening primary healthcare



Creating Access through CLC platforms

Supporting the drive for
**Universal Health
Coverage by 2030**

Supporting the drive for **Universal Health Coverage by 2030**

Universal health coverage for all (UHC) has been adopted as one of the UN targets under sustainable development goal 3 (Ensure healthy lives and promote well being for all ages). Primary healthcare is an essential part of UHC.

Background

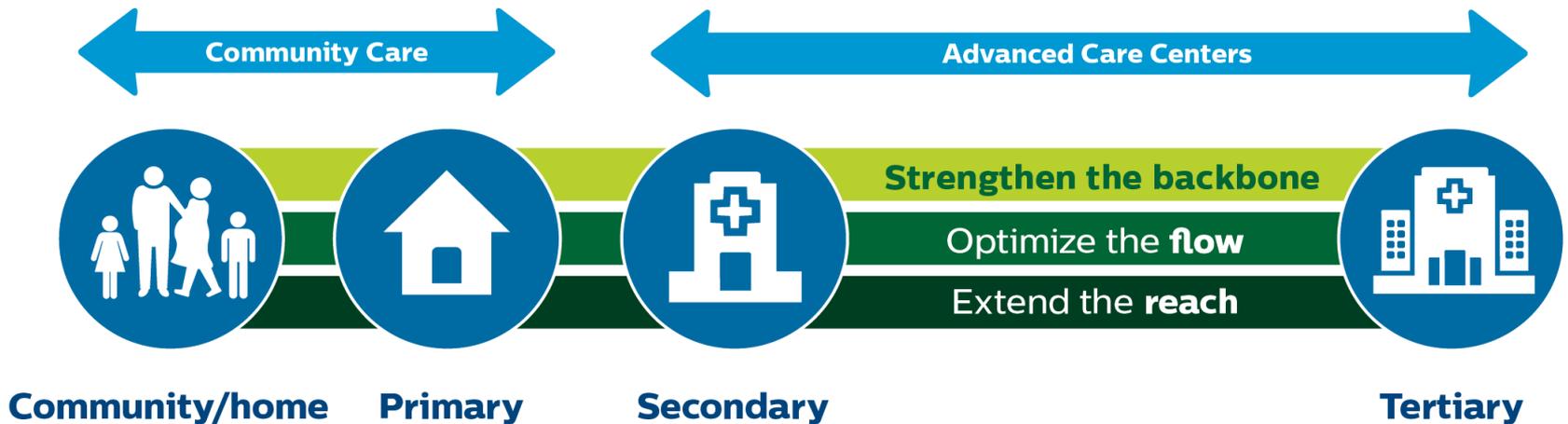
1. 20% of African children does not live to be five
2. New UN SDG targets aim to change this
3. Key issues around Vaccines, drugs, human resources, data, infrastructure, connectivity etc.
4. Strengthening Primary health care is a key ...



Why the need to strengthen primary and community health

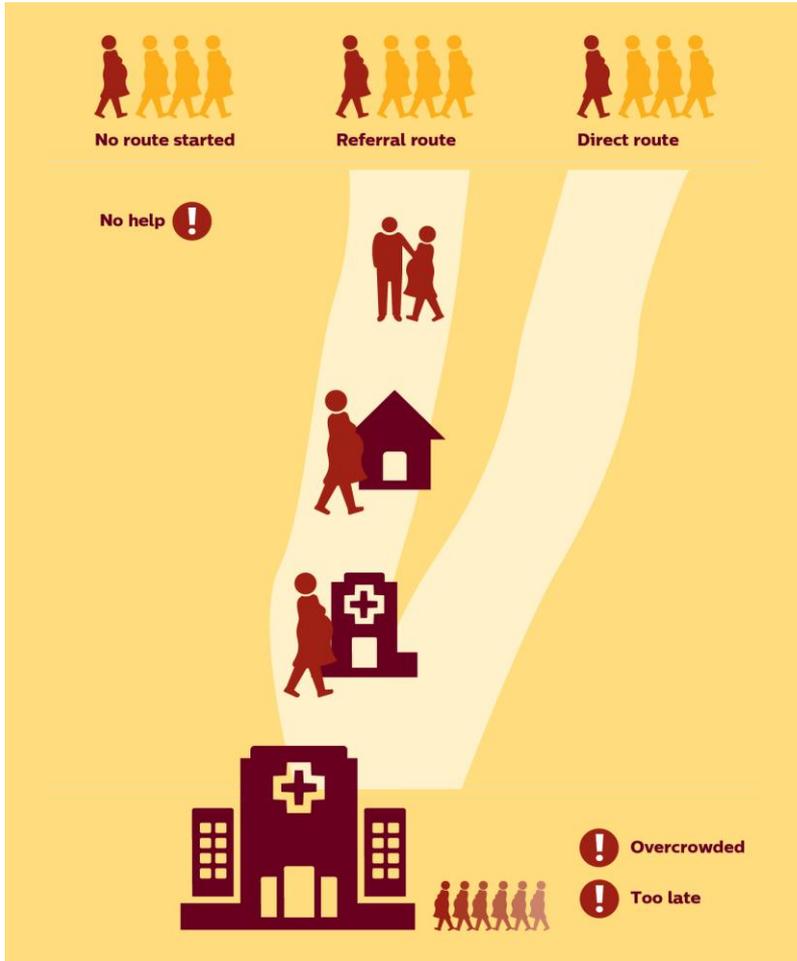
“A primary health care approach is the most efficient and cost effective way to organize a health system”

Dr Margaret Chan – Director General of the WHO



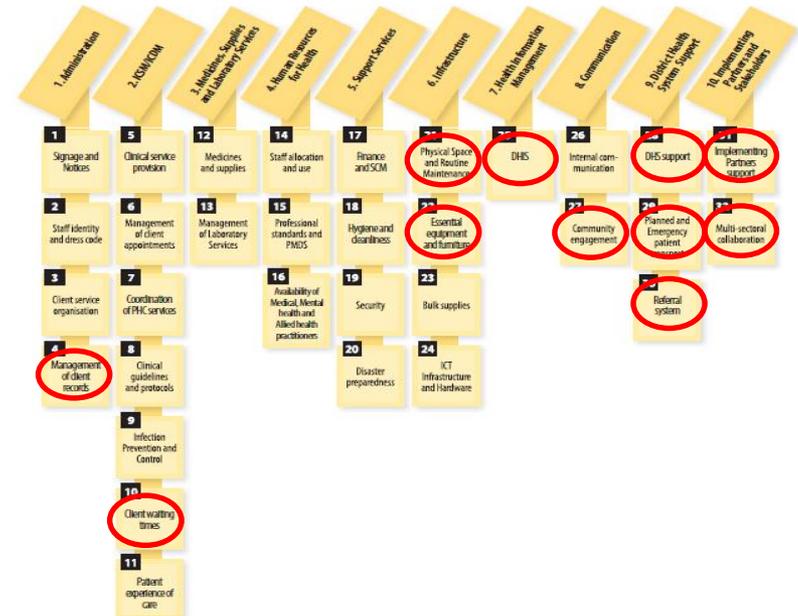
Source: The Primary Care Innovators Handbook, Center for Health Market Innovations, Results for Development Institute, 2015

Why the need to strengthen primary and community health



Supporting the implementation of
NHI – Ideal Clinic

National Health Insurance - Ideal Clinic



As part of the Leapfrog initiative is to provide access of quality of care and strengthening the healthcare system, “Project Phakisa- The ideal Clinic” was launched in 2014. An initiative focus on the reengineering of Primary Healthcare. It is envisaged that the scale up to 3507 PHCs in South Africa.

The Model: Community Life Centre

We start by listening to the needs of the local community



Examples of CLC platforms and case studies

The full Philips Community Life Center platform

Catchment area 10 000, 25.000-30.000 people +



Philips medical Equipment for diagnosis referral and minor operations

Training provided for all aspects - Clinical, application and technical



Enables job creation

Example Langata dispensary, Kiambu Kenya

1000m2 of outdoor LED lighting - enables social activities

Philips medical outreach kit for Community Health Workers (CHW) enables community outreach program

Water container and solar pump & waste management incinerator

Monitoring, outcome evaluation and support service/warranty

Patient referral/transport linked to existing health care infrastructure

Quality control/assurance patient flow improvement

Solar powered - with back up generator and remote monitoring

Tables chairs TV/DVD - laptop enabling connectivity



Example of Mini CLC platform

Tadu Village DRC

Catchment area 40,000 people

Training provided for all aspects - Clinical, application and technical



Philips medical equipment for diagnosis triage and referral



Water container and solar pump

100% solar powered with remote monitoring

Quality control/assurance patient flow improvement

Tables chairs TV/DVD laptop enabling connectivity



1000m2 of outdoor LED lighting - enables social and commercial activities



Patient referral/transport linked to existing health care infrastructure

Two prefab buildings one medical & one social

Enables job creation

Monitoring, outcome evaluation and support service/warranty



Example of Full CLC platform Kiambu County Government Kenya



Number of outpatients visiting per month increased from 900 to 4080



Number of women attending at least 4 antenatal care visits grew from 6 to 94 each month



Number of children being treated quadrupled from 533 to 2370

Example of a Community Life Center platform Dandu ward, Mandera, Kenya

Catchment area 46,000 people



Assessment, co-creation and project design/ management.



Building refurbishment- Furniture & additional medical equipment



Patient referral /transport linked to existing health care infrastructure



Training provided for all aspects - Clinical, application and technical



Enablement of income generation, local job creation and services



Innovative Philips medical equipment for diagnosis, triage and referral



Solar powered with generator back up



1000m2 of outdoor LED lighting - enables social and commercial activities plus indoor LED lighting

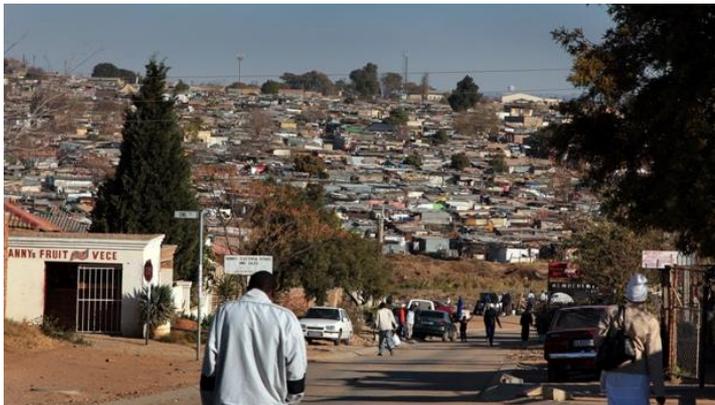
Monitoring, outcome evaluation and support service/warranty





Diepsloot Township in Johannesburg, South Africa

- Diepsloot is a **densely populated township** in the north of Johannesburg
- It is made up of:
 - **fully government-subsidised** housing (Extensions 4, 5, 6, 9, 10),
 - **brick houses** built by landowners (Extensions 2 and 7),
 - **partially government subsidised houses** (Extension 3/Tanganani)
 - **shacks** (the biggest sections being Extensions 1, 12 and 13).
- Diepsloot **tripled in population** expansion from 2010 - 2017 to a township with at least **450 000 inhabitants**



Diepsloot Township in Johannesburg, South Africa

- only **two** government clinics. (*Diepsloot South and OR Tambo Clinic*)
- *45km to the referral hospital Helen Joseph*
- The issues that this caused were related to **access to primary healthcare facilities, mother and child care, HTC(HIV/AIDS) and dental care.**
- Other major issues were **teenage pregnancies** and a **lack of access to healthcare services for immigrants.**
- Particularly the **children of immigrants often default when it comes to vaccinations.**

Partnership

- In 2015 Philips, Rhiza Babuyile the Department of Health Gauteng and a number of corporate partners to effectively address these problems through a Mobile Clinic initiative that was targeted primarily at preventing teenage pregnancies, HIV/aids and providing primary health and dental care services to the community.



GAUTENG PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA



N O Z A L A
TRUST



What challenges does the mobile clinic address in the townships?

- Maternal screening allows for early detection of complications
Women in semi-urban and rural areas across South Africa (in fact all of Africa) often die due to preventable complications during child birth as they have no access to ultrasound screenings to detect critical conditions. Many of these deaths can be diagnosed with basic imaging technology.
- Other major issues were **teenage pregnancies** and a **lack of access to healthcare services for immigrants**. Particularly the children of immigrants often default when it comes to vaccinations.

What is the main goal of the clinic?

- The **main goal** of the clinic is to improve the quality of life and provide access to **Primary Health Care services** for all patients and
- **Dental Care**
- Within the **Mother and Child Department** the aim is to help **young women** with family planning and their children through:
 - Vaccinations
 - Family Planning
 - General PHC examination
 - Blood Pressure
 - Glucose
 - Pap smear
 - ANC (Ultrasound)
 - PNC



Operations

- The Mobile Clinic is **situated at Akani Foundation** within **Bophelong Centre** of Life close to Diepsloot Mall.
- The Mobile Clinic operates from **Monday to Friday** between **8:00 and 15:00** before it goes back to park at our Northriding offices for safety.
- We currently see between 700 and 1.000 patients per month. From September onwards, due to the implementation of the Mini CLC this will most likely grow to 1.600 patients per month.
- We have recently implemented the *Theory of Change* in order to effectively measure the change and impact we have through the Mobile Clinic project. The theory of change mobile clinic will be included in the August report. The data capturing is done through a custom made telemedicine system.



What services/ healthcare technology does the mobile clinic offer the community?

- Coming on board as the clinical technology partner in this project, Philips said it had equipped the Mobile Clinic with its innovative VISIQ ultrasound; the size of a tablet, the VISIQ is the first ultra-mobile ultrasound system from Philips. The unit was equipped with Colposcope for Cervical Cancer Screening and Patient monitors to triage the patients with build in EWS protocols.
- Phase 2 is to introduce Remote Monitoring Software



Human Resources

- 5 full time staff members and an intern who form the Mobile Clinic team. The team is under the leadership of Registered Nurse, Thandi Mgcina who has been part of the Mobile Clinic for about 18 months now.

Name	Position	Race	Gender
Lunga Nkewana	Driver	Black African	Male
Lydia Monyepao	Dental Nurse	Black African	Female
Thandi Mgcina	Registered Nurse	Black African	Female
Natasha Maseko	Dental Assistant	Black African	Female
Queen Makhubele	Enrolled Nurse	Black African	Female
Moratela Mothapo	Patient Registration	Black African	Female

- The Department of Health (Oral Health) has recently renewed the SLA to providing Oral Hygienist (2 days a week) and a Dental Therapist (3 days a week). This forms part of Rhiza Babuyile's exit strategy to charge the patients with a small patient fee of R20.
- The aim is to run the clinic with 50% Rhiza Babuyile staff and 50% with Department of Health staff.
- Current intern Moratela has finished an IT course with Rhiza Babuyile and has been selected for an internship in Diepsloot including at the Mobile Clinic she will also running Philips Remote Monitoring services.

June Statistics :

June	Immunization and family planning			
	Total	Immunization	Family Planning	Curative
5 – 9 June 2017	706	486	196	23

- **Total number of other PHC patients seen** - 363 (of the patients were from 58 Zimbabwe, 21 from Malawi, 11 from Mozambique)
- **Number of children who defaulted immunization:** 14
- **Number of kids who came to catch up:** 16

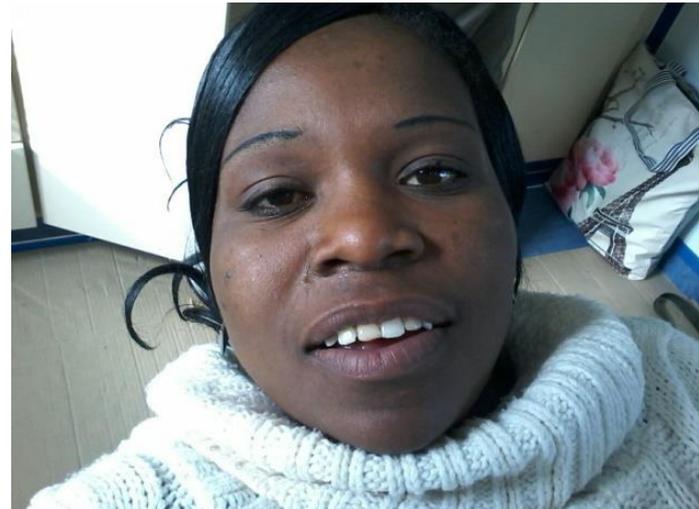
Abnormal high blood pressure from Family planning patients:

- **Total number of the abnormally high blood pressure patients – 7**
 - The patients were given education on how to leave a healthy life style

June Statistics:

Dental:

- **Number adult patients: 87**
- **Children: 139**
- The kids that were given 6 months check-up have started coming.
- Doing oral education and cleaning of children's teeth.
- 2 patients referred to Witkoppen clinic for extraction of wisdom teeth.
- 2 person came back for their routine check-up after their scale and polishing



Overall:

*As a result for the years June 2015 – June 2017 we have **ouched the lives of 20 400 direct beneficiaries** through the mobile clinic.*

Scaling from Mobile Clinic to Mini CLC

Objective:

To implement a **mini CLC concept** into the community that will include delivery access to quality of health services to the community by means of a more **fixed structure** and provide **light to the community soccer field including setting up social economic element.**

By providing a fixed structure to the community centre we are **enabling the mobile clinic to serve a different community** within Diepsloot (Diepsloot West). This will impact the lives of 20 000 living population in the new identified community.

Post this we have a 2 year plan to implement a Full CLC (CHC) in the Diepsloot area in collaboration with Gauteng Department of Health.

- Mini CLC - Diepsloot (Aug 2017)
- Launch Orange Farm Mobile Clinic - JHB (Nov 2017).
- Launch Hani Park Clinic – Welkom FS(Oct 2017).

