

Research Programme

A Framework for Health Systems Research 1999 - 2001



Overview

The Health Systems Trust continues to rise to the challenge of supporting health sector reform. In so doing, the Trust recognises the role of district health system in attainment of equity in health service provision. Support of District Systems development, as well as monitoring progress towards equity in health care are thus central elements in all activities of the Trust.

Over the years the Research Programme of the Health Systems Trust (HST) has become a recognised funder of policy relevant health systems research. The programme is also a resource for capacity development in health systems research. An underlying principle of the Programme is its commitment to link research to implementation while fostering partnerships between researchers, health services and communities. This is in line with the Essential National Health Research strategy adopted by the Department of Health.

As transformation in the health sector continues, the Research programme will also continue to inform national policy debates on a variety of topical issues. However, there is now a clear need for a new health systems research agenda that mirrors the shift from policy formulation to the mechanics of implementation.

Underpinning the shift towards research that is linked to implementation are the principles of equity, efficiency, effectiveness and access to services. These principles will guide the research agenda of the HST. Promoting the use of research findings as well as increasing health systems research capacity remains an integral component of the research programme.

Research Programme Objectives

To commission and support research projects which:

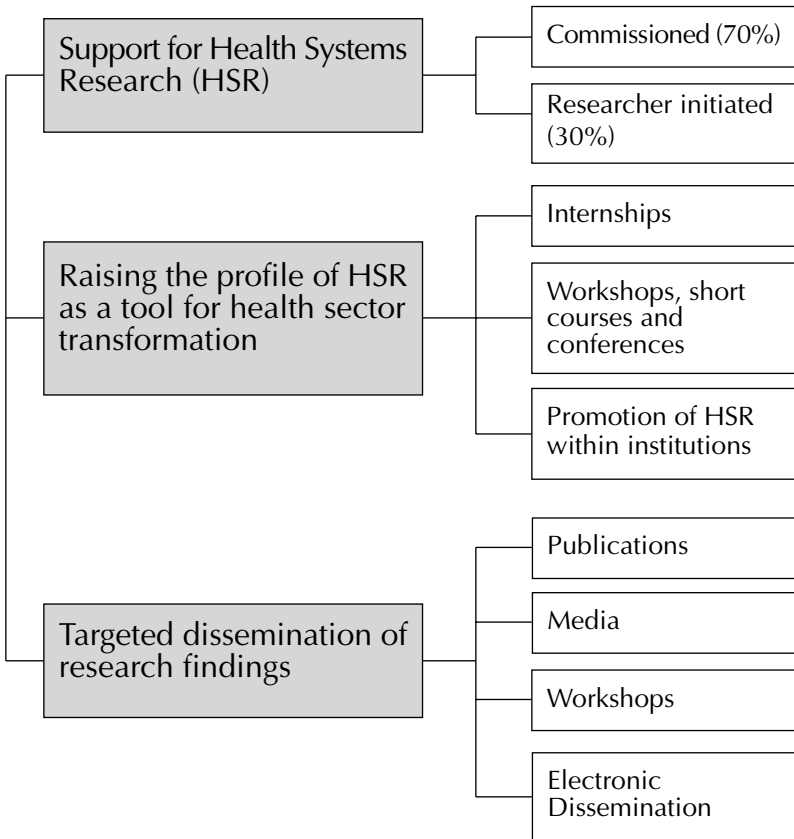
- ◆ Address unresolved issues around equity in health and health care
- ◆ Facilitate, monitor and evaluate implementation of specific programmes and support services within the health systems, particularly the district health system

- ◆ Contribute to processes of strategic planning of the health systems by supporting research oriented to the future and consultative workshops
- ◆ Enhance research capacity and quality of HSR in concerned institutions throughout the country on a continuing basis

Key Strategies

Figure 1 highlights the key strategies used by the Research Programme in fulfilling its mandate.

Figure 1



Development of a Framework for HSR:

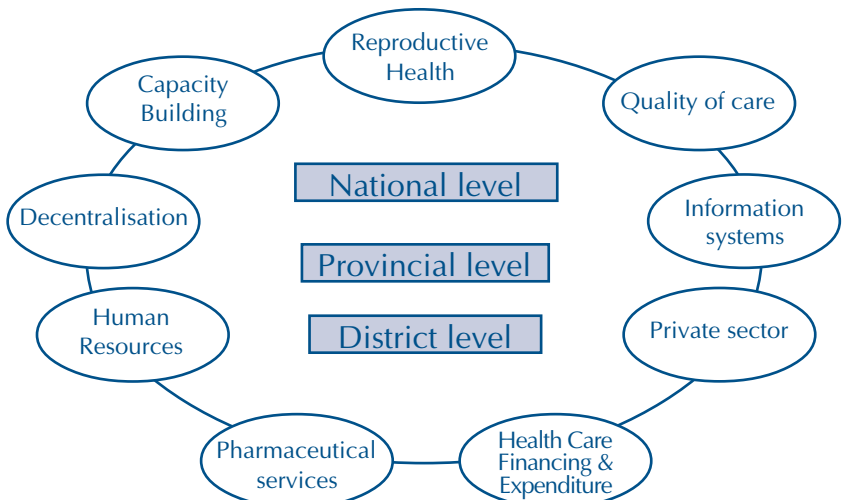
The process of developing a framework for HSR was informed by the three areas of focus for the organisation i.e. equity in health and health care, district health systems development and forward planning around future health care. Within this context, there is a recognition that various levels of health care systems have different needs.

While National Department of Health focuses primarily on developing policies, Provinces have to co-ordinate, monitor and evaluate implementation of programmes. Districts on the other hand, remain the main vehicle for delivery of PHC services. These levels of service delivery are used as a template for locating the research themes that emerged from an extensive consultative process with various stakeholders.

Research Themes

The following themes define broad areas of research. It is envisaged that by providing such a broad framework researcher initiated projects seeking to address issues of National, Provincial or District significance will not be excluded. A range of key questions will also be commissioned by the research programme.

Figure 2



QUALITY OF CARE

Parallel to expansion and increased coverage of health care services, it is equally critical to give attention to issues of quality of the health care services being provided – from both the service providers’ and consumers’ perspectives.

Studies that look into development of effective quality management systems both within the public and private health service institutions, with in-built mechanisms for monitoring and evaluation would be supported.

Examples of possible research issues:

- ◆ Developing quality assessment tools and adapting these for routine application by regular programme staff. (as part of supervision and or peer review process)
- ◆ Measuring compliance to standards
- ◆ Impact of organisation of services to quality of care e.g. relationship between integration of services to quality of care
- ◆ Mechanisms for engaging clients in addressing quality of care issues

PRIORITY PROGRAMMES

Provinces need to have policies and guidelines to support implementation of various priority programmes. Although programmes form part of the horizontal implementation, vertical support is still required.

Examples of possible research issues:

- ◆ Development of district based TB reporting and recording systems
- ◆ Evaluation of vertical support for key programmes such as TB, HIV/ AIDS and STDs EPI
- ◆ Collation of lessons emanating from mental health research and explore mechanisms for enhancing implementation

REPRODUCTIVE HEALTH

Ever since integration of services moved to the fore front of district health system a number of challenges, mostly relating to programme implementation have been identified. The specific focus on Reproductive health as a priority programme is merely a recognition of the fact that RHF is a distinct programme of the Trust, with earmarked funding – rather than an implication of its superiority over other priority programmes.

Examples of possible research issues include:

- ◆ Determination of indicators which can be used to measure performance of reproductive health services as part of integrated PHC services. These could be used to assess the current status of reproductive services in specific groups, or as part of a monitoring systems. Better still, other indicators may be field tested, and used for programme evaluation in selected sentinel sites
- ◆ Does implementation of a core package eliminate missed opportunities
- ◆ Determination of the cost of integrating services
- ◆ What is the function of a multi purpose provider of holistic care e.g. to women

HIV/ AIDS / STDs

- ◆ The identification of models for care for persons with HIV outside of health facilities
- ◆ The development of tools to determine risk of HIV in the community and plan programmes
- ◆ The management of STDs in women to prevent HIV
- ◆ Comparison of the HIV programmes in different province to identify success factors and impediments to programme implementation

Implementation of the Choice on Termination of Pregnancy Act

Research that will look into:

- ◆ Facilities - e.g. why do some designated abortion facilities not provide abortions?
- ◆ Training – e.g. evaluation of existing training programmes
- ◆ Quality of care – determination of tools for improving QOC
- ◆ Access – e.g. why these services are mainly accessible to adults
- ◆ How abortion services can be made an integral component of comprehensive reproductive health services
- ◆ Referral system – e.g. how can we engage general practitioner in enhancing TOP services
- ◆ Impact – e.g. assessment of the impact of Choice on Termination of Pregnancy Act on incomplete abortions, unsafe abortion rates etc.

Cervical Cancer

- ◆ The development of guidelines for the implementation of cervical screening viz referral systems; determination of skills requirement, costing of infrastructural requirements etc.
- ◆ Can the existing system cope with screening and what are possible knock on effects to other systems e.g. STDs and oncology
- ◆ Cost benefit analysis of cervical screening per province

DECENTRALISATION

Decentralisation of health service delivery from the central level of government to the district has been agreed to by all concerned parties as an essential measure for promoting equity and efficiency in health care delivery.

Research that will assist address bottlenecks at various levels in the decentralisation process is encouraged and will be supported – e.g.:

- ◆ Increasing efficiency of primary care and the referral system. Research could be directed towards increasing the efficiency of primary care provided by clinic, health centres and community hospitals, as well as

developing appropriate models for primary care in urban areas that would help reduce an unnecessary influx of patients to large hospitals

- ◆ The impact of decentralisation in the health sector e.g. setting up of sentinel sites to monitor health facility equity and to look into, among other things the following:
 - Do decentralised systems increase inequity among regions?
 - Do decentralised systems encourage greater access to health services, especially for the vulnerable groups?
 - Does decentralisation result in more efficient use of resources?
 - Which functions are more efficiently performed at the central level?
 - Does decentralisation result in the provision of more effective and appropriate types of services for improving health?
 - Are decentralised systems more responsive to consumer / community defined needs?

HUMAN RESOURCES

With the emphasis on primary health care and preventive care, priorities in terms of human resources have changed. The role of the nurse and doctor in health care has been re-examined. The maldistribution of health personnel is also acknowledged. A number of studies that have looked at productivity and work load of health professionals have produced unexpected results. The distribution and productivity of health professionals needs to be addressed.

Examples of possible research issues include:

- ◆ An organisational audit of human resources
- ◆ A model for human resource management in the public health sector
- ◆ The development of a professional ethos amongst health workers
- ◆ An audit of health workers trained in primary health care?
- ◆ Mechanisms for bringing GPs into the district health system
- ◆ Determination of the skills mix is necessary for comprehensive PHC services

HEALTH INFORMATION

Monitoring and evaluation is an essential part of management of health services. For this purpose health information is required. In the past this has been largely neglected. Large amounts of information has been collected with little use thereof for management purpose.

As the National Health Information System evolves, research initiatives which will facilitate improvement of the methods of collecting, analysing and presenting data needs to be supported.

Efforts to design and implement systems that link data analysis with plans of action - such as district based information systems, will be particularly encouraged. Monitoring and evaluation is an essential component of health planning. Models of collection, analysis and use of data from health services need to be identified.

Examples of possible research issues:

- ◆ Development of functional information infrastructures determining minimum data sets / indicators (Provincially); development of realistic sets of indicators; training of district staff on information analysis and use
- ◆ Development of tools for data collection and use of data for the effective management of available resources
- ◆ Guidelines by National DOH, for provincial health information systems
- ◆ Promoting the use of data for planning
- ◆ Development of district health information systems
- ◆ Evaluation of the notification system

HEALTH CARE FINANCING AND EXPENDITURE

Health care financing and particularly social health insurance, has been a major talking point since 1994. There have been increases in government spending on health and yet this appears to have had little impact on health provision and or access to health care for the entire population. Seeking

alternative sources for financing public health facilities therefore remains a priority.

We call for research that will explore amongst other issues the following:

- ◆ Reducing barriers to primary care access by exploring possible alternatives for health care financing
- ◆ The long-term impact of free health care
- ◆ The impact of changes to the Medical Schemes Act e.g. what are the cost implications, will it push premiums up, how those services will be provided

Previously certain provinces were disadvantaged when resources for health were allocated. New formulae for resource allocation have been developed. Large amounts of resources have been expended on tertiary hospitals with limited allocation to primary health care facilities. However the major hospitals in certain centres continue to tend to clients from other provinces, placing a heavy load on resources. Improving the geographic distribution of resources between provinces and ensuring the monitoring of resources is a priority.

Examples of possible research issues include:

- ◆ Improving the geographic distribution of public sector health care resources between and within provinces - as well as developing mechanisms for monitoring inter- and intra-provincial equity in resource allocation
- ◆ The impact of the re-allocation of resources to primary health care
- ◆ Accessibility of services (affordability). Increasing primary care utilisation levels, particularly for currently disadvantaged groups, including:
 - Redistributing resources between levels of care to improve resources available for primary care services, while still maintaining adequate referral services
 - Reducing barriers to primary care access e.g. by exploring alternative financing sources, such as social health insurance

PRIVATE SECTOR

Private health care systems have the potential of contributing towards development of the overall national health system that aims at attaining efficiency and equity. A large proportion of health expenditure is to the private sector yet this does not necessarily translate to optimal quality of care. In recent years on the other hand the introduction of private low cost health care in a number of centres has been observed. A balance between controlling the private sector by laws or regulations and promoting an appropriate role for this sector in health care delivery is necessary. Research directed towards developing a system for monitoring whilst encouraging private health care organisations to undertake an appropriate role in delivering health care services is needed.

Examples of possible research issues:

- ◆ Review of the distribution of private hospitals as well as private primary health care providers around the country and the population they serve. This should subsequently be reviewed against the desirable pattern of hospital/ primary health care facilities in each specific area – with a view to promoting distribution to under-served areas
- ◆ Identifying ways of working with the private sector to improve quality of care
- ◆ Mechanisms for monitoring of private sector services

PHARMACEUTICAL SERVICES

There have been significant developments in terms of health care in South Africa, but none more significant than the development of Essential Drug Lists for Primary Health Care; for the treatment of patients in the public health sector. The basis of such policies has been the need to rationalise the number of drugs available within the public sector, with the aim of ensuring availability of such essential drugs and to ensure rational and cost-effective drug use in this sector. It is thus vital to assess the impact of the Essential Drug Lists in the light of these hoped for outcome measures.

Possible research issues:

- ◆ Evaluating the impact of the Essential Drugs Programme

DEVELOPMENT OF HEALTH POLICY AND SYSTEMS RESEARCH (HPSR) CAPACITY

In promoting HSR as a tool for health planning and problem solving, there is a need to address HSR capacity among concerned personnel at various levels of health care system

Possible research issues:

- ◆ Development of a plan for promoting the use of research findings and increasing HSR capacity
- ◆ Increasing the level of understanding and commitment of district health authorities – through research that is based in their areas and focusing on the issues that are under their direct responsibility. Whilst this should ultimately lead to a development of appropriate responses and effective problem solving, it will also build research capacity. Such a promotion of area based problem solving will also enhance provincial personnel capability and readiness to meet the challenges of decentralised health systems
- ◆ Capacity development in the context of understanding the importance of research in health and development, utilisation of research findings in decision making, the process of policy formulation and other collaborative issues
- ◆ Assessment of health systems research skills in South Africa

Notes

Funders:

- ◆ National Department of Health - South Africa
- ◆ Henry J. Kaizer Family Foundation (USA)
- ◆ The Department For International Development (UK)

Notes

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