

CORRESPONDENCE

Call for closure of Folateng private wards in public hospitals in southern Gauteng

To the Editor: The facilities available in southern Gauteng for severely ill patients with diseases related to internal medicine are currently under severe pressure. Central and regional hospitals in this region have frequently had to close to admissions because their bed occupancies have exceeded 100%. This problem started in 2013 and has become progressively worse. The reasons for this crisis are not difficult to understand: (i) there is a very high burden of illness in the population served by these public hospitals, including communicable (HIV/AIDS, tuberculosis) and non-communicable (cardiac, pulmonary, metabolic, oncological) diseases; (ii) Gauteng is the most populous province of South Africa, with just over 12 million people; and (iii) despite this ever-increasing burden of illness, a decision was taken some years ago to close a number of public health facilities such as Hillbrow and Kempton Park hospitals. In addition, a significant number of public healthcare beds were privatised for use by patients with medical aids - Folateng private wards. It is no wonder that our existing public hospitals are overwhelmed.

The Department of Medicine at Chris Hani Baragwanath Academic Hospital in Johannesburg has a bed capacity of 730, with bed occupancy of over 90%. We admit over 100 patients a day, and not infrequently have more patients than available beds. The result is that very sick people are kept waiting on chairs for long periods of time. The nurses, the doctors and the support services are frequently overstretched, resulting in suboptimal service delivery. This is a totally unacceptable situation that needs a strategic solution.

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We the undersigned, senior consultants in the Department of Medicine at Chris Hani Baragwanath Academic Hospital, are extremely concerned at the lack of available hospital beds for very ill medical patients (level 2 and level 3) who require specialist care. We call on the Gauteng Health Department to do the following to alleviate this serious situation:

- Close all Folateng private wards at Charlotte Maxeke Johannesburg
 Academic Hospital (100 beds), Helen Joseph Hospital (40 beds)
 and Sebokeng Hospital (36 beds), and re-open them for use by
 public sector patients. Staffing would not be an issue, because
 staffing already exists in these wards. The private sector has ample
 capacity for patients who are members of medical aid schemes.
- Consider re-opening hospitals such as Hillbrow, Kempton Park and Lenasia South, since the opening of Jabulani Hospital in Soweto will not have significant impact on its own.

We feel that it is our moral and ethical duty to raise this as a matter of extreme urgency, with the intention of providing better and more humane care to our patients.

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S Afr Med J 2014;104(5):325-326. DOI:10.7196/SAMJ.8178