

Improving Youth Health Services



With the support of European Union Funds for improving Primary Health Care, the NGO Mpilonhle has been working since 2014 with the rural uMkhanyakude District in northern KwaZulu-Natal Province to increase the efficiency and effectiveness of the Integrated School Health Programme mobile teams by introducing an electronic medical record and reporting system. The project has also worked to introduce HIV testing into schools for those 12 years and older.

Improving health services for youth is one of the pillars of the “Reinventing Primary Health Care” initiative of the Government of South Africa, an initiative that since its inception has received support from the European Union. Improving youth health services has focused on revitalizing school health services through the Government’s new Integrated School Health Programme (ISHP).

The ISHP uses mobile teams to take health services to youth in schools. Such a mobile approach is especially important in rural areas, where 40% of South Africa’s population still live, and where it is difficult for youth to access fixed clinics, both because of the distances involved, and because attending clinics requires timeout from school.

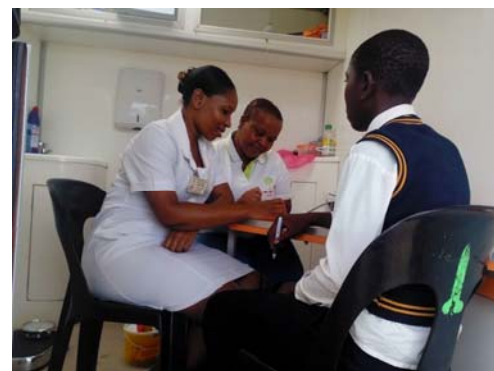
Nurses form the backbone of the school health programme. Their recruitment, retention and job satisfaction are essential if the ISHP programme is to be a success, and youth are to benefit from these health services.

A major tension in the Integrated School Health Programme has been between the need for monitoring performance, versus providing services to the maximum number of youth. The former has required nurses on the mobile health teams to laboriously complete paper forms, and then tabulate and summarize those results, passing them on up the

through the clinic and hospital system, where the data has to again be hand tabulated at each step.

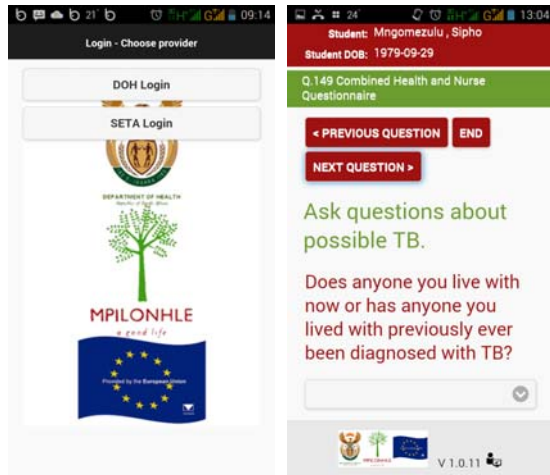
Health team nurses can spend as much as 50% of their time on paper work, substantially reducing the amount of time they can spend on seeing youth. To increase the efficiency of the programme a grant from the European Union has paired a rural District Health Programme with the NGO Mpilonhle, which has been active in providing health care to youth for over 10 years. Mpilonhle has assisted the ISHP teams in uMkhanyakude District to use an electronic medical record to greatly increase the efficiency and accuracy of both collecting and reporting the results of the health services provided to youth.

Sister Sthembile Jele – the ISHP Nurse Team Leader for the mobile clinic at remote Bethesda Hospital – raves about the improvement that the electronic record has made in their ability to provide services. “The use of the electronic application has almost doubled the number of youth that we can see at schools. It lets us focus on the reason we are here – to provide services to youth – and free us up from the burden of paperwork.”



Mpilonhle Counsellor Nompumelelo Mthembu working with DOH ISHP nurse Sthembile Jele on the use of the electronic medical record.

The electronic medical record is user friendly, with screen interfaces on mobile phones that mimic the actual paper forms.



Example of screens seen by ISHP team members when using the electronic medical record

Monitoring and Evaluation Coordinator for the uMkhanyakude District – **Ms. Sbhongile Mthimkhulu** – is confident that the electronic record and reporting system will bring important advances in the functioning of the school health teams. “Not only does the electronic record and reporting system allow the ISHP teams to service many more persons, it also helps ensure that we get accurate information daily.

We can download the information from the District Health Information System that we are connected to at every District Office and Hospital – and see what the progress of the team has been, and the health problems that they are encountering. The electronic system also lets us monitor how effectively the teams in the field are working”.

Mpilehleh working with the DOH ISHP teams has also introduced HIV testing in schools. The uptake rate has been impressive – with more than 75% of youth offered HIV testing on an opt-out basis accepting it.

According to Mpilehleh health counsellor **Vanessa Chonco**, the offering of HIV testing in schools has helped learners overcome the stigma that has surrounded HIV, and helped them talk more openly about risky behaviours, and what they can do to reduce their own risk. “It makes the issue of HIV more real. And it can benefit those who are infected and not aware they are – especially older children in the higher grade in secondary schools”.



Testing for HIV as part of the School Health Programme

In this project Mpilehleh has also worked closely with the DOH staff to increase the use of para-professional staff in providing services. This is facilitated by the use of the electronic medical record, which provides a structured approach to services (including HIV-testing) and prompts to ensure that all information is recorded, and that the information recorded is accurate. This decreases the need for scarce professional nurses, and also lessens the risk of “burnout” from professional nurses.



EU Involvement

The European Union has been instrumental in the effort to improve primary health care services in South Africa. This effort to improve the efficiency and effectiveness of the school health programme has been conducted under a grant from the European Union to Mpilehleh, a non-profit organization that has focused on bring health services to youth in rural KwaZulu-Natal.

The programme is being piloted in the uMkhanyakude District. With successful implementation in this District, the intention is to now rollout the use of the electronic record to ISHP teams in other Districts. This is facilitated by a recent grant to Mpilehleh from the Global Fund to fight AIDS, Tuberculosis and Malaria to work with youth in an adjacent rural district.

Websites:

EuropeAid-funded project: www.mpilonhle.org