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OVERVIEW OF CHRIS HANI BARAGWANATH ACADEMIC HOSPITAL

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1. INTRODUCTION

The delegation will be visiting Chris Hani Baragwanath Academic Hospital as part of its oversight visit of health service delivery during Provincial Week 29 March – 1 April 2022. This paper will provide brief background information specific to Chris Hani Baragwanath Academic Hospital.

2. BACKGROUND

Chris Hani Baragwanath Academic Hospital (CHBAH) fondly known as “Bara” is the largest hospital in South Africa and the African continent, and one of the top ten largest hospitals in the world in terms of size and beds served.¹² It is housed on around 70.01 hectares (173 acres or 0.70 km²), with approximately 3200 beds, and employs about 6760 staff members.³ The facility is housed across 429 buildings, with a total surface area of 233 795 m².



The hospital is located in Soweto, Johannesburg. CHBAH is a teaching hospital for the University of the Witwatersrand Medical School, along with the Charlotte Maxeke Johannesburg Academic Hospital, Helen Joseph Hospital and the Rahima Moosa Mother and Child Hospital. It is a referral hospital for various facilities in its cluster, which includes Thelle Mogoerane, Kopanong, Bertha Gxowa, Bheki Mlangeni and Leratong hospitals. All complicated illnesses or injuries in the cluster are referred to CHBAH for further management.

¹ Africa Check (2016)

² Seventh largest according to Healthcare website (2021)

³ Chrishanibaragwanathhospital.co.za [website]



CHBAH serves an immediate population of at least 1.5 million people in surrounding Soweto, while simultaneously serving as the tertiary referral centre for much of the Gauteng (11.4 million), North West province (3.7 million),⁴ parts of the Northern Cape, and informally the rest of South Africa, except the Western Cape.

3. SERVICES OFFERED

Approximately 70% of all admissions are emergencies, including approximately 160 gunshot wounds victims per month.⁵ Accident, emergency and ambulance represent the busiest services, with over 350 patients daily. Every year approximately 150 000 inpatient cases are registered.



CHBAH manages about 592 000 outpatients yearly, 51 000 “normal-hours” casualties and 21 500 “after-hours” casualties. In the region of 60 000 patients are treated in the Maternity Hospital annually. Nearly 8000 caesarean section deliveries and 19 000 live births are performed annually.⁶ The Department of Ophthalmology, the St John Eye Hospital, has 111 beds and consults around 50 000 patients per year.⁷ CHBAH offers management of non-communicable diseases, including cancer.

The Main Intensive Care Unit (MICU) at CHBAH is a combined Adult and Paediatric unit with 9 paediatric beds, 9 adult medical and surgical beds, 9 trauma and 6 adult surgical post-op high care beds. Neurosurgical and burns patients are managed in dedicated ICUs. Adult ICU beds represent less than 1% of total beds, while paediatric ICU beds (excluding neonatal ICU) are approximately 2%. These numbers are considerably lower than the number of acute care beds designated for intensive care in European high-income countries⁸. The ICU offers mechanical ventilation and continuous renal replacement therapies, which necessitates a one nurse per patient ratio.

The demand for critical care beds, both adult and paediatric, far exceeds the resources available under ordinary circumstances. This has led to the development of a set of triage principles designed to optimise these scarce resources. This has resulted in criticism such as that “patients requiring intensive care are denied access on a daily basis by the attending intensivists with full appreciation of the dire consequences of these decisions”.⁹ The patients reportedly negatively affected include both in-patients, as well as referrals from outside hospitals.¹⁰

The CHBAH Palliative Care Centre (PCC) is one of the few public palliative care programmes in South Africa. A multidisciplinary team provides typical palliative care services, i.e. symptom

⁴ Naidoo et al (2020)

⁵ Chrisanibaragwanathhospital.co.za [website]

⁶ South African Government website (2017)

⁷ Chrisanibaragwanathhospital.co.za [website]

⁸ Rhodes et al. (2012)

⁹ Naidoo et al (2020)

¹⁰ Ibid.



management, spiritual and psychosocial support, referral to the few inpatient hospice units in Johannesburg. Staff also conduct home visits to support patients and their families.¹¹

Cardiac surgery has not been available at CHBAH since 1998, and there have been calls for it to be re-commenced after the forced closure of Charlotte Maxeke Johannesburg Academic Hospital due to fire.¹² In the early 1980s, CHBAH together with the former J G Strydom Hospital (renamed 'Helen Joseph'), was reputed to provide world-class cardiac surgical services, performing over 1 000 open-heart procedures annually.¹³ It also trained some internationally acknowledged surgeons. However, the need for cardiac surgery never abated, but in fact continued to increase. Until recently, CHBAH patients could only access cardiac surgery at Charlotte Maxeke Johannesburg Academic Hospital (CMJAH), approximately 20 km away. Interestingly, approximately 60-70% of cardiac patients operated on at CMJAH were referrals from CHBAH. However, there are calls for such services to be made available where the bulk of the patients are.¹⁴ The fire that destroyed parts of CMJAH, meant that CHBAH patients can only access cardiac surgery once a week at Steve Biko Hospital in Pretoria, over 70 km away. This has reportedly had a severely negative impact on the survival of cardiac patients.¹⁵

4. SIU INVESTIGATIONS



The Special Investigations Unit (SIU) is conducting investigations into the procurement of goods works and services in relation to the National State of Disaster.¹⁶ Five hospitals in Gauteng are the subject of an ongoing investigation by the SIU as part of its COVID investigations under "Proclamation 23 of 2020"¹⁷ including CHBAH. Four (out of five) of these hospitals were sites for what is referred to as Alternative Building Technology (ABT) field intensive care units, which were commissioned in March 2020 to provide extra bed capacity for the first wave of the COVID-19 pandemic.¹⁸ Despite opposition from medical professionals and wider criticism, the province went commissioned 1,400 extra ICU beds including:¹⁹

- 500 at Chris Hani Baragwanath hospital in Soweto;
- 300 at George Mukhari;
- 300 at Kopanong hospital in Vereeniging; and
- 200 beds at Jubilee District Hospital in Hammanskraal.

¹¹ O'Neil et al (2018)

¹² Nethononda et al (2021)

¹³ Ibid

¹⁴ See Nethononda et al (2021)

¹⁵ Ibid

¹⁶ Proclamation No R23 of 2020

¹⁷ The others are Kopanong Hospital, George Mukhari Academic Hospital, Tshwane District Hospital and Jubilee Hospital.

¹⁸ Daily Maverick (2022b) < <https://www.dailymaverick.co.za/article/2022-03-25-gautengs-new-r1-2bn-covid-19-icu-hospitals-still-lie-abandoned-unfinished-or-underused/> >

¹⁹ Daily Maverick (2021)



The Gauteng government stopped publishing its monthly COVID-19 Expenditure Disclosure reports in January 2021, making it difficult to publicly track related expenditure.²⁰ It is reported that spending to date at CHBAH amounts to over half a billion rand – i.e., R528,277,993.30.²¹

According to the Gauteng Department of Health, the new 500-bed facility was utilised during the third wave of the COVID-19 pandemic. The facility is used to accommodate COVID-19 patients who are stepped down from COVID-19 designated wards in the main hospital. Some wards in the facility are used to step down non-COVID-19 patients from the medical wards. This decision was taken to de-congest the medical wards and create space to accommodate newly admitted patients with a high acuity level. It is reported that 200 of the 500 beds are allocated to the University of Witwatersrand Oral Health to accommodate dental services, and that once the COVID-19 pandemic has passed, the ABT facility will be “repurposed to accommodate multidisciplinary Oncology services.”²²

However, significant additional costs will be incurred in the repurposing of these facilities. Furthermore, despite the decision being made in September 2021 to relocate the dental hospital from Charlotte Maxeke Johannesburg Academic Hospital to CHBAH by the end of March 2022, it is reported that there is to date no plans for finalising the repurposing of the ABT.²³ This may pose a significant risk to dental services in Johannesburg, as well as to the training of oral health science students.²⁴

5. PUBLIC PROTECTOR'S REPORT

Following media allegations about health facilities in Gauteng, the Public Protector (PP) conducted site inspections at six hospitals during August 2020, including CHBAH. The PP found that at CHBAH administrative deficiencies led to systematic challenges in the delivery of primary health care services. Amongst others, it found that vacant posts were not filled, and that a significant human resource capacity constraint existed at the hospital.

The remedial action ordered included:

- Consider identifying a dedicated ward for COVID-19 positive psychiatric patients for the duration of the pandemic.
- Ensure there are sufficient porters available at the hospital
- Ensure that the human resource capacity challenges at the hospital is resolved amicably²⁵

²⁰ Daily Maverick (2022b)

²¹ Ibid.

²² K. Kekana in Daily Maverick (2022) 25 March

²³ S. Madhi in Daily Maverick (2022) 25 March

²⁴ S. Madhi in Daily Maverick (2022) 25 March

²⁵ Public Protector (2021) pp. 300-301.



6. DEBT AND ACCRUALS IMPACTING SERVICE DELIVERY

Of the more than R556 million in debt owed by the national and provincial governments to the City of Johannesburg, three hospitals account for more than half the debt including:



- **Chris Hani Baragwanath Academic Hospital — Over R66 million.**
- Charlotte Maxeke hospital — Over R200 million.
- Helen Joseph hospital — Over R44 million.

This is a significant amount of debt for basic services including water and electricity, necessary for the functioning of the hospital.

There have been numerous reports of doctors, nurses and other health professionals providing food for patients.^{26, 27} Food contracts reportedly expired, and the hospital had to order essentials on a Request for Quotation basis. Furthermore, medical waste has been piling up and not collected as required. This was as a result of non-payment of service providers. In response to this, as well as the non-renewal of 819 COVID-posts, on the 10 March 2022, staff at the CHBAH protested and picketed.²⁸ The lengthy closure of Charlotte Maxeke hospital has also meant that a greater burden of the health service delivery is borne by CHBAH. It is important to note that on the 21st March 2022, the Minister of Health announced that contracts for COVID-posts, which were about to expire, have been extended by another year.²⁹

In a meeting with the Portfolio Committee on Health on 23 March 2022, the Auditor General reported that the Gauteng Department of Health had accruals of R5.1 billion, as well as medico-legal claims against the Department amounting to R24.3 billion.³⁰ This is against an appropriation of only R21.4 billion in 2021/22. Urgent and significant intervention is required to deal with current and prevent future accruals, as well as material irregularities identified.

7. CONCLUSION

The Chris Hani Baragwanath Academic Hospital (CHBAH) is undeniably a critical part of the Gauteng, and indeed the South African, health system. It is imperative that serious issues be addressed as a matter of urgency. It is likely that what is required to improve issues at CHBAH would require broader intervention as the impact of the closure of Charlotte Maxeke Johannesburg Academic Hospital may be a significant factor.

²⁶ ENCA (2022) < <https://www.enca.com/news/da-says-chris-hani-hospital-not-only-one-food-shortages> >

²⁷ The Citizen (2022)

²⁸ Newzroom Africa YouTube (2022) < <https://www.youtube.com/watch?v=RivyBHaOopk> >

²⁹ ENCA YouTube (2022), Minister Joe Phaahla

³⁰ Parliament of the Republic of South Africa YouTube (2022) < <https://www.youtube.com/watch?v=kHGuEhsNNvc>>



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