**NEWS RELEASE**

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**New community health platform piloted in Tshwane**

**to bring primary care to millions**

42 million South Africans rely on an under-resourced public healthcare sector Inadequate access to healthcare perpetuate the inequalities that exist here, and the nation faces four epidemics: infectious diseases especially HIV/AIDs and TB), non-communicable diseases (especially diabetes and cardiovascular diseases), high levels of violence and injury, and mother and child illness and death - all linked to, and due to persistent social inequality,

Healthcare in South Africa is increasingly hospital-centred, disease focussed and specialise. This model has led to major advances in medicine, has improved access to healthcare and proven profitable. But it also excludes large proportions of the population and cannot provide universal healthcare access.

The [Department of Family Medicine](http://www.up.ac.za/family-medicine) at the University of Pretoria has created a community-orientated primary care (COPC) model for today’s South Africa. “COPC is a geographically-based, collaborative approach to health that begins with individuals, and families in their homes,” advises Professor Jannie Hugo. “Ward-based health teams where community health workers take primary care in communities rather than restricting primary care to clinics and hospitals.”

Since 2014 the City of Tshwane/UP COPC initiative has created 43 professional nurse -led teams involving some 370 community health workers who work across the city from Mamelodi through the inner city to Atteridgeville, Soshanguve and Olievenhoutbosch. They have provided services to 230,000 individuals in 77,000 households to date. And over 1 000 learners have been trained in COPC.

*Discover more background behind the significance of the research on the quality of healthcare received in South Africa’s communities, at* [*www.researchmatters.up.ac.za*](http://www.researchmatters.up.ac.za)*.*

**The solution**

COPC is primary care where healthcare professionals from different specialisms and approaches work together with organisations and patients in defined communities. The result is a systematic identification and response to health and health-related needs to improve wellbeing. “COPC as a concept is established, but our solution is novel in that it blends academic rigour, public health focus, clinical care and technological innovation and a transformative platform for improving society-wide health outcomes,” explains Professor Hugo.

The power of the model rests in its comprehensive care that integrates the home, clinics, GPs and hospitals to consistently improve individual’s ability to manage their own health. The full impact of the approach is set to revolutionise healthcare in South Africa.

AltaHealth™ is a smartphone application which supports the modern COPC model, and is used by community healthcare workers in the field. Modules in the app collects patient information, guides responses and plans treatment and future visits. “Community health workers through a process and the information entered towards action, be it treatment or testing,” explains Professor Hugo.

The backend of the app has a sophisticated, web-enabled infrastructure so all information and interventions are available to managers to plan service and delivery, and support their team in real-time. AltaHealth™ is linked to a patient record system using Synaxon to provide continuity of information and care by linking people in their homes to professionals in clinics and hospitals.

Education is also enabled through the application too, and is a critical in healthcare, and COPC in particular. “To equip healthcare workers and professionals with knowledge and skills required to carry out the complex tasks of COPC, is necessary for success and sustainable development,” remarks Professor Marcus. Continuous work integrated learning into the implementation plan and is supported by curricula, face-to-face training and specifically developed learning materials. And through workplace learning, health workers transition to higher qualifications and professional development to empower and upskill community members.

The collection of information also provides robust data on the real health situation and services in specific communities. This kind of information means teams can tailor healthcare to individuals in defined areas, and can be used in basic and applied research. And, in time will be some of the most robust clinical and epidemiological data ever recorded.

As a result of this work, the National Research Fund is funding 14 masters and 12 doctorate students who are working on various aspects of learning in community health in order to improve the model, quality of care and the general level of capability in health, including health research.

**Looking to the future**

The project is already supporting the health of communities around Tshwane, and is replicable and scalable which means that it can be extended throughout South Africa. A sustainable and affordable community-based healthcare system, millions more can be benefit from this new approach in both terms of wellbeing, but also upskilling to create more employable citizens who can also contribute to their community’s health.

Discover the story in full at Research Matters, the University of Pretoria research website:

<http://www.researchmatters.up.ac.za/researcher-projects/view/46>

**Video:**

<https://youtu.be/xGUa7MpGm34>

**Images:**

<https://www.dropbox.com/sh/169dxn1f1t01izb/AADIq1jJ7YY9EudmdFhmfvaMa?dl=0>

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**Notes to Editors**

The [Research Matters](http://www.researchmatters.up.ac.za/) website showcases some of the University of Pretoria’s research and innovation output highlighting the impact of its work on socio-economic development in South Africa, Africa and globally.

Throughout Research Matters you will discover case studies on interesting research projects by University staff, infographics and videos that will provide an overview of high impact projects at a glance, as well as information about various institutes, centres and units.

Research at the University of Pretoria is at the heart of its [long-term plan](http://www.up.ac.za/media/shared/Legacy/sitefiles/file/publications/2012/eng/strategic_plan_v11_13feb.pdf), UP 2025, and its vision to be a leading research-intensive university in Africa, recognised for making a difference. Its progress towards achieving this vision and identity is evident in the diversity of research undertaken in the nine [Faculties](http://www.up.ac.za/faculties) and [Business School](http://www.up.ac.za/gibs-business-school), and in the many [Institutes, Centres and Units](http://www.up.ac.za/institutes-and-centres/).