

Presidential Frontline Service Delivery FSD Good Practice Note¹

Document Author	Author Name: Thabo Makhosane Author Designation: Deputy Director: FSD Organization: DPME Telephone: 012 - 308 1425 Email: Thabo. Makhosane@po-dpme.gov.za Co-author Name: Ndhambi Machimana Designation: Deputy Manager Dept. / Org: Department of the Premier Tel. 011 – 355 5660 Email: ndhambi.machimana@gauteng.gov.za	Creation Date	12 August 2013
Acknowledgement for support	Busi Khumalo: busi.khumalo@gauteng.gov.za Thato Mashiane: thatho.mashiane@gauteng.gov.za Vusi Fihla: garth.tshabalala@gauteng.gov.za		
Document Owner	Office of the Premier (Gauteng Province) DPME: FSDM	Version	Final Version

Good Practice Title: Improvements Project at the Diloye Clinic.

Purpose: The purpose of this good practice note is to document and report on the great turnaround with regards to the improvements project at the Diloye Clinic.

Target Audience: Citizens, Sector Departments, OoP.

Glossary:

FSDM	Frontline Service Delivery Monitoring
OoP	Office of the Premier
DPME	Department of Performance Monitoring & Evaluation
DoH	Department of Health

1 Basic Information

Project name	Improvements Project at the Diloye Clinic
Province	Gauteng Province
District	Tshwane District Area (Region 2)
Project Manager & Contacts	Name: Nanly Mashiane Designation: Operational Manager: Diloye Clinic Dept / Org: Department of Health Tel. 083 288 6942

¹ This template has been prepared to serve as a guide for the development of thumbnail good practice or story sketches from projects of the FSDM Programme. The purpose of these "good practice note" is to document, in a standardized and accessible format, cases that highlight key innovations and practices in development programmes/ projects which offer relevant lessons for FSD practice. These good practices are meant to provide readers with an easy-to-grasp-and-understand snapshot of a project, or components of a project, focusing on key learning points that contribute to future practice. Where possible, the good practice should provide references to more detailed reports on the projects covered and to relevant resources for interested readers.

2 The Good Practice Story

<p>Programme Summary:</p>	<p>The aim of frontline service delivery monitoring is to both affirm good performance and assist departments, municipalities and entities to improve service delivery points which are performing poorly. This is done by:</p> <ul style="list-style-type: none"> (i) Assessments of the state of FSD at the points of service delivery, through visits by officials from DPME and Offices of the Premiers (ii) Verification of the progress with FSD at the points of service delivery, through visits by the Executive, (iii) Monitoring by citizens of the performance with frontline service delivery. Verify if government is meeting the expectations of the citizens (iv) Assist DPME and Offices of the Premier to collect and analyse data on service delivery at local level and to identify where improvement initiatives should be targeted (v) Enable DPME and Offices of the Premier and/or other relevant transversal or line function departments to facilitate or put in place interventions to address identified weaknesses (vi) Identify good front line service delivery practice and develop learning networks (vii) Outputs will be reports on quality of frontline service delivery (provided to management of relevant departments and municipalities and Cabinet and Executive Councils) (viii) Results should feed into initiatives to improve frontline service delivery <p>Monitoring process will also catalyse improvements in management of service delivery</p>
<p>Background / Context</p>	<p>An unannounced FSD monitoring visit was conducted on the 24 April 2013, by Officials from Monitoring and Evaluation Branch in the Office of the Premier, as well as officials from the Department of Performance Monitoring and Evaluation in the Presidency to Dilopye Clinic in Dilopye, one of the findings was that the Clinic was too small and overcrowded.</p> <p>Findings report was produced and because of the severity of findings, and agreement was reached between DME, OoP and Department of Health (DoH) to development an improvements plan.</p> <p>An Improvement Plan was developed in collaboration with the Department of Health, the Office of the Premier, and DPME to ensure that service delivery improvement proposals be implemented to address the service delivery shortcomings identified by the public and staff during an unannounced visit to the Dilopye health facility.</p>
<p>Findings & Improvements:</p>	<p>All the eight (8) key performance areas were assessed and the finding were geared and presented to the Clinic management during the feedback meeting dated 23 May 2013.</p> <p>Findings: The Clinic building was too small and overcrowded; it was a normal four (4) roomed house (the floor area is that of a dwelling unit ± 80m²) converted into a clinic. The floor area had the following: Waiting Area, Hall (for screening), three (3) Consulting Rooms, Pharmacy, Kitchen and inside & outside ablution facilities.</p>



Clinic's Floor Plan



Building View & Citizens waiting outside.

Challenges and risks faced by the clinic due to insufficient space were as follows:

- a. Citizens had to wait outside due to inadequate space in the waiting room.
- b. Overcrowding in the Pharmacy due to lack of storage facility.
- c. Lack of privacy for citizens when doing screening.
- d. Cross infection of diseases due to lack of proper ventilation.
- e. Building not fit for purpose / use.



Overcrowding in the Pharmacy



Inadequate space in the waiting room.

Improvements: Subsequent to the feedback meeting with clinic management dated 23 May 2013, there has been a substantial improvement to the clinic. Park Homes structure was constructed, and the extension and improvements include the following:

- a. Additional six (6) Consulting Rooms,
- b. Two (2) Offices,
- c. Kitchen.
- d. Store Rooms,
- e. Three (3) ablution facilities and toilet for persons with a disability,
- f. Carports accommodating six (6) cars, and
- g. Additional paving in the yard.

Before



(Pictures taken on 23/05/2013)

After



(Pictures taken on 13/08/2013)

	<p>Improvements Pictures</p>   <p><i>Clinic extension & improvements</i></p>   <p><i>Inside the Consulting Rooms</i></p>   <p><i>Carports and paving</i></p> <p>All the consulting rooms and offices are fully furnished. <i>The Clinic extension will be officially opened on the 27-28 August 2013.</i></p>
<p>Lessons learned:</p>	<p>Key lessons learned from the good practice note.</p> <ol style="list-style-type: none"> 1. Wheels of change are slow, but surely they do turn. 2. Putting pressure in the system is vital by doing regular monitoring. 3. Constant engagement and communication with your stakeholders is critical. 4. Inter-Departmental collaboration is critical. 5. Proper Project Management (proper monitoring/tracking of activities).

3 References

<p>Contacts:</p>	<p>Name: Ndhambi Machimana Designation: Deputy Manager: Dept / Org: Department of the Premier Telephone: 011 - 355 5660 Email: ndhambi.machimana@gauteng.gov.za</p>
-------------------------	---

Frontline Service Delivery Monitoring Unit

	<p>Name: Thabo Makhosane Designation: Deputy Director: FSD Organization: DPME Telephone: 012 - 308 1425 Email: Thabo.Makhosane @po-dpme.gov.za</p> <p>Name: Nanly Mashiane Designation: Operational Manager: Dilopye Clinic Dept / Org: Department of Health Cellular phone: 083 288 6942</p>
--	---

END

Contact