

P60 Investigating opportunities for reducing the lead time for Medical Aid at the Sangre Grande Hospital using a Baseline Time Function Map for the period February to July 2012

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METHODS

Time function process maps were used to depict the steps taken to access medical funding. The first map depicted the present process to access medical aid; the second and third maps revealed the process after the recommendations for improvement were implemented. The sample comprised of the total enumeration. That is, the entire patient population accessing medical aid for the period February to July 2012 was used. This offered a high level of accuracy and provided a complete statistical coverage over space and time.

RESULTS

The map revealed a seven to twelve month waiting time for financial aid. Twenty doctors who refer patients at the hospital for medical aid were interviewed to determine the effect of the waiting time on the patients' prognoses. The doctors reported that patients' prognoses sometimes remained the same, worsened and sometimes led to the patients' death.

OBJECTIVES

The Financial Assistance for Necessitous Persons Programme also called the medical aid programme is aimed at funding procedures not available at public healthcare facilities and provides a safety net for the poor and vulnerable to avoid impoverishment or death due to their inability to fund required procedures that will assist in their course of treatment. This study seeks to map the process for patients accessing medical aid funding at the Sangre Grande Hospital to discover the gaps and shortcomings that delay the patients waiting time for service.

CONCLUSION

An evidenced-based and robust health management information system, weekly medical aid committee meetings and the employment of medical social workers to meet the demand for medical aid become is advised for the programme to maximize its efficacy. The first and second recommendations combined resulted in a reduction from seven to twelve months waiting time to one to five months waiting time. The third recommendation to establish a public private partnership reduced patients' waiting time for procedures from seven to twelve months waiting to two weeks waiting.

