Consideration of applications

1) The following resources are utilised when considering an application

i) The National Health Act

ii) Regulations Governing Private Hospitals and Unattached Operating Theatre Units Regulation 158 of 1980

iii) Statistics SA 2009/2010

2) When considering an application, the committee must consider all comments and responses received in respect of the application in order to determine whether there is a need for the proposed private health establishment and may take into account the following:

(a) the need to ensure consistency of health service development in terms of national, provincial and municipal planning;

(b) the need to promote equitable distribution and rationalisation of health services with a view to correcting inequities based on racial, gender, economic and geographical factors;

(c) the need to promote an appropriate mix of public and private health care services with a view to the demographic and epidemiological characteristics of the populations to be served, the total and target population in the area, their ages and gender composition, their morbidity and mortality profiles;

(d) the need to promote the optimal use of spare capacity in provincial health establishments;

(e) the bed-to-population ratios and public-toPRIVATE bed ratios in the establishment’s feeder areas and in the surrounding health district, region and province;

(f) the availability of alternative sources of health care;

(g) the need to promote high-quality services which are accessible, affordable, cost-effective and safe;

(h) the potential advantages and disadvantages of the application for existing public and private health services and for any affected communities;

(i) the need to protect or advance persons or categories of persons designated in terms of the Employment Equity Act, 1998 (Act 55 of 1998) and the emerging small, medium and micro enterprise sector;

(j) the potential benefits of training, research and development with a view to the improvement of health service delivery;

(k) the need to ensure that ownership of facilities does not create perverse incentives for health service providers to over service patients or refer them inappropriately;

(l) where applicable, the quality of health services rendered by the applicant in the past, and

(m) whether the private health establishment has or proposes to have a proven complaints mechanism in place which is made available to all users of the establishment.