# Preamble

We are smack in the center of the Infinite Demands against Finite Resources.

Shifting focus from treating one disease at a time to managing the overall health of individuals and populations can assist in building long-term adaptability into the Health System and further improve health outcomes.

Existing and emerging challenges:
The Health Sector faces constantly changing requirements.
"We cannot be "slow to adapt" to the drivers of change."
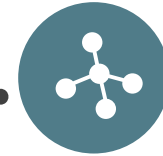
We need to manage our limited resources in a "Health-Efficient Way".

There is an imperative to change.

A Changing National Health Profile:
- Equality, Access, Experience
- Fragmented and inflexible systems
- Are barriers to Integrated Consumer Behavior and Trust.

5 Enabling Themes

01
Empowering consumers.

02
Addressing Health Inequality.

03
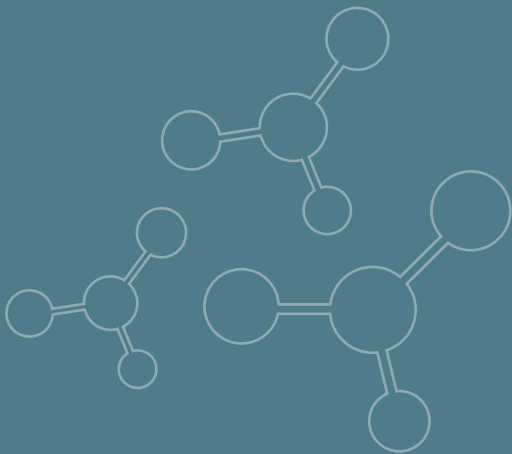Unlocking the value of digital data.

04
Supply Integrated Care and Precision Health Outcomes.

05
Integrating with the Global Sector.

Health Challenges in Sub Saharan Africa

Worldbank: Sub Saharan Africa has the worst Healthcare in the World

- Only 1% of Global Health Expenditure
- 3% of Global Healthcare Workers
- 25% of Global Burden of Disease and disability.

Worldbank assessment report

- SA has 0.9 medical doctors / 1000 citizens
- Kenya has 0.15 medical doctors / 1000 citizens
- Nigeria has 0.38 medical doctors / 1000 citizens

Compare this with

- UK: 2.8 medical doctors / 1000 citizens
- Switzerland: 4.3 medical doctors / 1000 citizens

Other challenges

- Financial constraints
- Resource constraints
- High rural density [deficiency of resources or access to HCW or facilities]
- Challenge to take Healthcare to the people / its citizens.

Frontline medicine arguably is under more pressure now than it has ever been.

This is at least part due to a population living longer than ever before with an increasing number of chronic diseases.

SA: Diabetes and Heart disease – 40% of deaths.
Projections within a decade – leading cause of death.

Management of these conditions is increasingly occurring in the primary and community care setting.

If we are to rise to this challenge and continue to provide UHC, true to its founding principles, we need to embrace new technology and the potential benefits it can offer our patients.

Africa has an emerging Health System, based on 21st century ethos of shifting to preventive care and related treatment options.

This further emphasizes Primary Care as a necessity as we plan and embrace NHI.

A Brave New World awaits GPs
The Technological Health Revolution.

Advances in Technology are disrupting the world around us, and companies like Uber, Airbnb, Microsoft, Google and Amazon are utilizing those innovations to change the way we live our lives.

More and more of our patients want a healthcare system that is personalized and one in which they are empowered to take more control of their health.

What we are seeing is a revolution towards personalized, empowered healthcare.

However, the medical practice has been slow to adapt to this progress.

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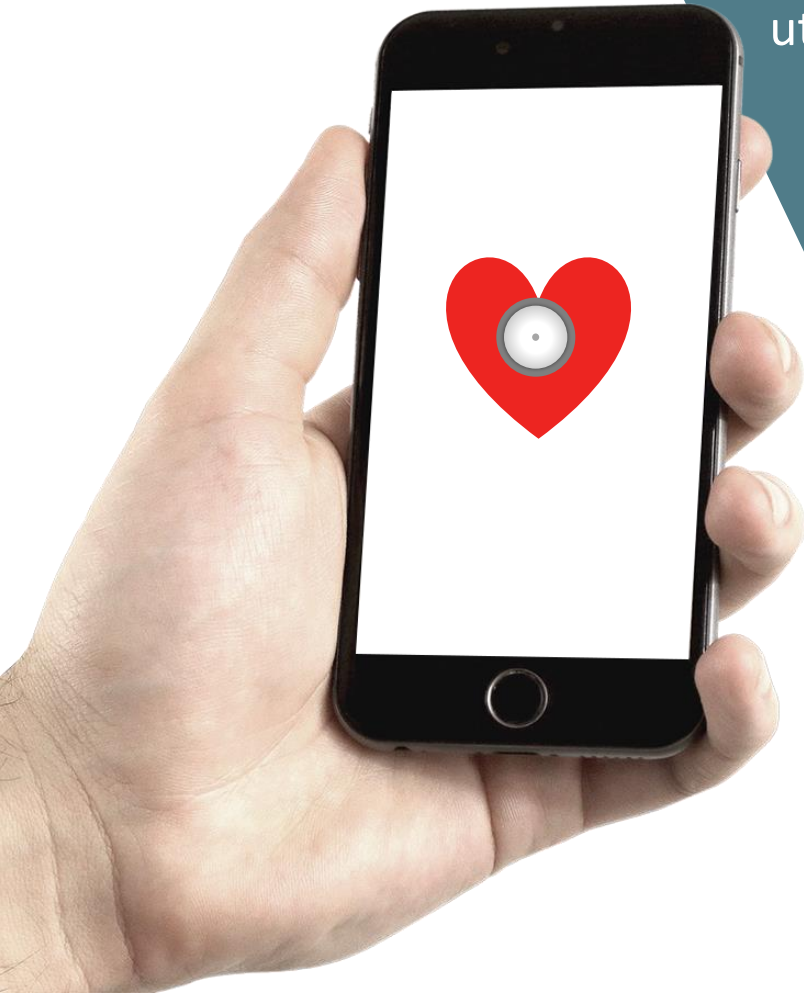
The Economist John Maynard Keynes, perhaps helped illuminate the problem the medical profession faces when he said:

"The difficulty lies, not in the new ideas but in escaping from old ones, which ramify, for those brought up, as most of us have been, in every corner of our minds."

We are fixated on a "legacy system" that has been with us for a long while, served us well, but is now being superseded by new disruptive technological innovations.

These innovations are already finding their way into clinical care, are in our homes and in our pockets.

Patients are already taking control, with more technology directly available to them to help monitor and manage their health than is available in most general practice.
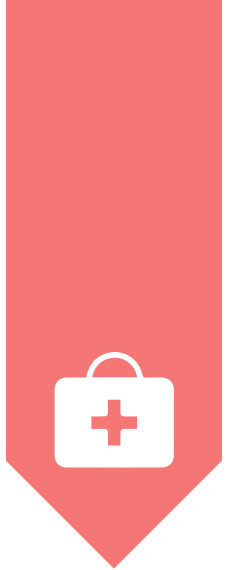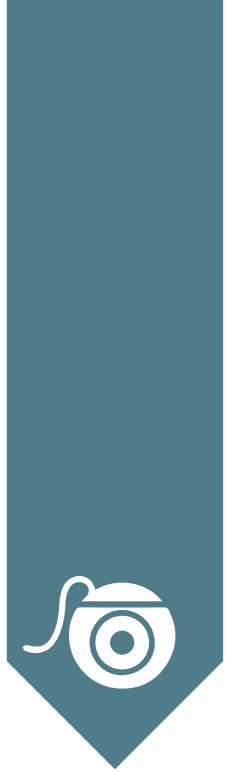
We are moving from an era where doctors were the gatekeepers to [owners of] healthcare technology to a system of personalized healthcare shared with patients.

Here empowered patients have a digital health kit and doctors act as advisers and navigators through the system.

This is onerous and time consuming and introduces the task of being as precise as possible and to avoid any litigious action.
This can be managed.

We are in an era of:

- Smart phones – clip on and plug ins.
- Platforms and condition-specific apps.
- Wearable sensors.
- Advanced technology and AI
- Use of drones
- Etc.

The Key consideration is how do we look to incorporate some of the latest, greatest innovations into <u>Patient Care Pathways</u>.

How do we drive uptake of innovations:
In the words of Maya Angelou:
".... People will forget what you said, people will forget what you did, but people will never forget how you made them feel."

The challenge we face with the current wave of new Technology in Primary Care is how can we help people to connect with it and the feel that it makes a difference to them.

We need to make sure that Technology increases <u>Social Inclusion and Reduces Social Isolation</u>.

What are the pressures on the frontline in Primary Care?

Technology may look impressive, but if they lead to an increased workload on GPs, and reimbursements are inappropriate, it will not be adopted.

To deliver benefits to our patients and be adopted by the professionals, the development and implementation of technology in healthcare, we need to work together to show the impact across the whole care pathway.

Where quality of care is improved, patients and their carers must feel engaged and empowered and the workload on the GP is reduced.

Only then will we be able to deliver our ultimate aim of a high quality, sustainable NHI free at the point of delivery for generations to come.

Digital Technology is the single biggest accelerator of digital disruption and adoption the healthcare sector has ever known.

A seismic transition that has been forced into existence following the Covid-19 Pandemic outbreak.

The Industry will be forced to keep up with the pace of disruption and we will need to realign into the Brave New World of Technology.

We are in the midst of the biggest evolving Natural experiment in General Practice, of our lifetime.

Research into how we practiced and consulted and the urgency to change brought by the Covid Pandemic.

However, in spite of Technological Innovation and Disruption, it will never totally remove the need for the doctor – patient interaction.