

# How we're defying load shedding and its impact on patient medicine regimes -Bonitas

By [Morgan Mkhathshwa](#)

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Load shedding in South Africa has significant effects on both private and public healthcare. These are far-reaching and can have severe consequences for patients, medical facilities and healthcare professionals. So just what is the impact of load shedding on healthcare in South Africa?



Source: Supplied. Morgan Mkhathshwa, clinical executive of Bonitas Medical Fund.

In the realm of healthcare, load shedding exacerbates the existing challenges faced by hospitals and clinics. Load shedding further strains infrastructure and compounds existing shortages, compromising patient care.

New regulations allow larger public hospitals exemption from load shedding however, Eskom has warned that it would be technically impossible to isolate and exclude most healthcare facilities from load shedding.

The challenges posed by load shedding and its impact on healthcare facilities are further exacerbated by the fact that prolonged or frequent loss of basic services, including the lack of electricity, has been shown to have financial, psychological, and physical implications. This reinforces the importance of private healthcare, which was already highlighted during the Covid-19 pandemic when medical aid transformed from a grudge purchase to an absolute necessity.



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The electricity crisis and load shedding serve as yet another reminder of the critical role private healthcare plays in ensuring uninterrupted access to essential medical services. While private hospitals are predominately well equipped with generator banks and/or inverters, medical aids take every precaution to ensure other services are available at optimum levels and of the highest quality.

## Ensuring uninterrupted medication integrity

To ensure the delivery of cost-effective healthcare, we have a network of hospitals and clinicians with whom we have negotiated favourable rates to minimise co-payments for our members. All of these hospitals and clinician practices have put effective contingency plans in place to ensure they are able to generate sufficient back-up power for uninterrupted patientcare and that they are able to provide pharmaceuticals. These include vaccines, insulin and certain antibiotics, which are sensitive to temperature fluctuations and require refrigeration and strict maintenance of the cold chain.

During power outages, the lack of electricity can compromise the integrity and efficacy of these medications, rendering them ineffective or potentially harmful. This does not only pose a risk to patient health but also leads to financial losses as medications and vaccines may need to be discarded, due to compromised storage conditions.

The provision of chronic medications is essential to ensure members are able to adhere to their medicine regime.

## **Proactive measures for members**

The Fund ensures their designated service providers are proactive in developing contingency plans to ensure an uninterrupted medicine supply to its members. This includes having generators and backups, double dispensing of medication to ensure chronic-medication deliveries are doubled up and developing communication tools to inform and educate members about medication supply.

It's worth noting that more than 80% of South Africans are reliant on public healthcare services at the approximately 420 state-run hospitals and more than 3,000 state-run clinics. While private facilities, secondary- and tertiary-level public hospitals appear to be well equipped with generator banks, smaller healthcare facilities including primary healthcare clinics, are often left in the dark.

The cost of alternative sources of power can be substantial, with a private hospital group recently reporting an average monthly expenditure of R800k to run its generators. The situation is not only unsustainable but is also putting the healthcare of our citizens at risk and, once again, it is the most vulnerable who are compromised the most.

## **ABOUT THE AUTHOR**

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