



Methodological Evaluation of District Hospitals Systems in South Africa: A Randomized Field Trial for Risk Reduction Assessment

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Abstract

District hospitals in South Africa face significant challenges in managing patient flow and resource allocation. A randomized controlled trial was conducted with 100 district hospitals. Hospitals were randomly assigned to either an intervention group (receiving additional training and resources) or a control group (no changes). Patient flow metrics such as waiting times and treatment completion rates were recorded over six months. The intervention significantly reduced patient waiting times by 25% in the intervention hospitals compared to controls, with a confidence interval of [-10%, -40%]. The risk reduction strategy demonstrated promising results in improving service efficiency but required further refinement for sustainable impact. Future studies should explore broader implementation strategies and evaluate long-term sustainability of the intervention. District Hospitals, Risk Reduction, Intervention Study, Patient Flow Metrics Treatment effect was estimated with $\text{logit}(\pi) = \beta_0 + \beta_1 X_i$, and uncertainty reported using confidence-interval based inference.

Keywords: African, Geographic, Methodology, Randomization, Risk, Evaluation, District Hospitals

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