



ANNUAL REPORT GREY'S HOSPITAL 01.04.05 - 31.03.06



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**GREY'S HOSPITAL
PLEDGE TO THE KWAZULU-NATAL DEPARTMENT OF HEALTH**

We pledge our commitment to the achievement of optimal health status for all persons of the Province of KwaZulu-Natal, including meeting the strategic objectives of the KwaZulu-Natal Department of Health, within our scope of clinical practice, i.e. the provision of Regional and Tertiary services.

WE PROMISE TO:-

- Deliver on the KZN Department of Health's strategic health priorities, by providing optimal regional and tertiary care at all times, within available resources
- Support the Department in meeting the health needs of the catchment population
- Live the spirit of a caring ethos and to implement the principles of Batho Pele
- Provide good governance and effective leadership

Signed by:

DR K NAIDU
Hospital Manager

DR K. B BILENGE
Medical Manager

MRS PM BROWN
Nursing Manager

MS Z. K. BUTHELEZI
Finance Manager

MR H S K HLONGWA
Human Resource Manager

MR R Z MKONGWA
System Manager

VISION

The provision of optimal tertiary health level of care, to the people of the western half of KwaZulu-Natal

MISSION

We the staff of Grey's Hospital are committed to service excellence through sustainable and coordinated levels of care, by establishing partnerships with out communities, and through ensuring innovative and cost effective use of all available resources.

CORE VALUES

- Human dignity, respect, holistic healthcare & a caring ethos
- Innovativeness, courage to meet challenges, to learn and to change
- Cost effectiveness and accountability
- Open communication and consultation



MESSAGE FROM THE HOSPITAL MANAGER

INTRODUCTION:

2005 was indeed a momentous year for Grey's Hospital. The institution celebrated its 150th anniversary, which was highlighted by a month of festivities actively supported by our enthusiastic staff. The commitment and dedication of staff together with their drive towards excellence in service delivery in the Public Sector was acknowledged on the 9th December 2005 when Grey's Hospital was a proud recipient of The Premier Service Excellence Gold Award.

COMMENCEMENT OF NEW SERVICES 2005-2006

During the period under review, the following New Terty Services and Hi- Tech equipment was commissioned:-

- Pulmonary Function Laboratory
- Mammography Unit
- Medical Equipment Pool
- Infectious Diseases (sub specialty of Internal Medicine)
- A new building to house the Oncology and Radiotherapy Department was completed on the 24/10/05
- On the 27th January 2006 the University of KZN and Grey's Hospital launched the Grey's Hospital University LAN which is situated in the New Medical Library. This Facility will promote academic training and research.

In addition the following Tertiary Services were strengthened:-

- Pulmonology
- Cardiology (Angiography is being performed in the Cardiac
 - Catherization Laboratory)

PROMOTION OF EXECUTIVE MANAGERS

- Miss HM Findlay, the Nursing Manager was promoted to Hospital Manager at Edendale Hospital with effect from 15/08/06.
- Mr GBC Khawula, the Finance Manager was promoted to Hospitals Manager at Port Shepstone Hospital with effect from 01/08/06.

NEW APPOINTMENTS

- Ms ZK Buthelezi – Appointed as the Finance Manager of Grey's Hospital 07/11/05
- DR ME Senoge, appointed as Chief Specialist in Orthopaedics with effect from 01/05/05.
- Dr Z Farina, appointed as Chief Specialist in Anaesthetics with effect from 01/07/05.

- Dr NJ Titus, appointed as Chief Specialist in Obstetrics and Gynaecology with effect from 01/02/06.
- Mrs NG Mathebula was appointed as principal of the Nursing Campus with effect from 01/02/05.
- Ms N Gasa was appointed as the Public Relations Officer at Grey's Hospital on the 01/02/06

HOSPITAL ACCREDITATION WITH THE COUNCIL FOR HEALTH SERVICES ACCREDITATION OF SOUTHERN AFRICA (COHSASA)

Grey's Hospital once again enrolled with the COHSASA programme to be an accredited facility. At the external Survey in February 2006 all service elements scored over 80%, and we are confident that Grey's Hospital will achieve full accreditation status in September 2006.

STRATEGIC AND OPERATIONAL PLANNING WORKSHOP

A successful Strategic and Operational Planning Workshop took place on the 16th and 17th of March 2006. From the workshop comprehensive Strategic and Operational Plans for 2006/2007 were completed.

FUTURE SERVICES PLANNED FOR 2006

- An Additional 5 Bedded ICU will be completed by the end of June 2006
- A Linear Accelerator used for providing radiotherapy to Oncology patients will be commissioned on 15/05/06
- The Department of Health has identified Grey's Hospital to roll out a Cost Centre Accounting System which will allow individual departments to manage and control their allocate budgets.
- The Antenatal Clinic has been identified to be used as isolation ward for the management of Highly Infectious Diseases. Building renovations will be completed by the end of June 2006.

CHALLENGES

The commissioning of Cardiothoracic Surgery and Neurosurgery still remains a huge challenge.

The constraints in the main are:-

- Shortage of Nursing Staff
- Shortage of Theatre Utilization time
- Shortage of ICU beds

CONCLUSION

I would like to thank my Executive Management team and secretarial staff for their support and encouragement throughout the year. I also express my sincere gratitude to all staff for providing compassionate care to the communities we serve. Appreciation is also expressed to Dr SSS Buthelezi, General Manager – Area 2, Ms M Zuma, the District Manager, members of the Hospital Board, the IMLC and the Community who are valued partners in governance.

DR K NAIDU

CHIEF EXECUTIVE OFFICER

MESSAGE FROM THE HOSPITAL BOARD CHAIRPERSON

FUNCTION OF THE BOARD

Hospital Boards have played a comparatively minor role in the past in ensuring the quality of health care in South Africa and in the province, but new initiatives are being taken to extend their involvement.

Hospital Boards will undergo a major change with far more participation in the managing of hospitals and their funds through Boards and the community.

The Grey's Hospital board is well aware of the challenges. The Board Members attended a Board Training Programme this past year for the Western Region, which fits in with the vision and mission of Grey's Hospital in stepping into the future with our community.

Grey's Hospital can be considered fortunate that we have had an active and enthusiastic, though under-represented, Board over the past years and the public may not be aware that Board members do this on an entirely voluntary basis.

HOSPITAL SERVICES

Grey's Hospital and its Management were delighted and privileged to have been given accreditation as a tertiary hospital, which provides facilities and expertise needed for sophisticated medical procedures.

This has caused some confusion within the community, as those who have used Grey's hospital on an outpatient basis find themselves unaware of the changes and too often are severely inconvenienced because of the patient needs now being attended to at General and District Hospital level. This community awareness still needs to be fully developed.

We are fortunate at Grey's Hospital that we have exceptional leadership in our Hospital Management staff, but financial pressures and unacceptable shortages at professional nurse and specialized medical staff level has put severe strain, on service delivery.

A new milestone has been reached in the establishment of a Cardiac Catheterization Laboratory which was commissioned in November 2004, the first angiogram being done in January 2005, and we are privileged to have two Cardiologists who do session work with us.

Other specialist disciplines, in particular in Anaesthetics, Orthopaedics, Plastic and Reconstruction Surgery and Psychology, are making excellent progress.

Hospital finances continue to be placed under enormous strain and it is important that the Board involves itself to ensure the realistic budgets are provided by the Province to meet the obligations of the performance agreement.

BOARD FINANCES

It is interesting to note that some 20 years when I first served on the Board when the hospital was located on the old site in Prince Alfred Street, board funds were almost zero.

Funds under control of the Board at present total almost R 1 million, this due largely to a bequest received in early 1980's from E E Hodgson and from funds raised within hospital structures, especially at the time of our move to the present site.

The Board is active in giving support to patients and staff such as the purchase of hospital television sets and allied costs. Other staff and patient support given is providing funding for farewells, meetings, finalist lunches, supporting the Grey's choir and the soccer and netball clubs. Transport to pain clinic patients and nurses is also funded.

A major role seen by the board is in providing funding to assist senior staff in attending workshops and conferences to improve their skills for the benefit of the patients and hospital. It is also worth noting that the hospital board provided funding to rehabilitate the hospital swimming pool as well as maintaining the Grey's Museum.

COMMUNITY AWARENESS

The board also assists and participates in initiatives such as Community Wellness and Awareness Days as well as being involved with the Grey's Hospital 150th Anniversary celebrations which are due to be held in October / November this year.

GREY'S HOSPITAL

The board will fund additional chapters envisaged for the existing Grey's Hospital Commemorative Brochure 1855 to 1955 and update this to the current year in celebration of our 150th year.

Professor Bill Guest has kindly agreed to undertake this work and all going well we look forward to being able to release this Commemorative Brochure at the end of the year.

THANKS

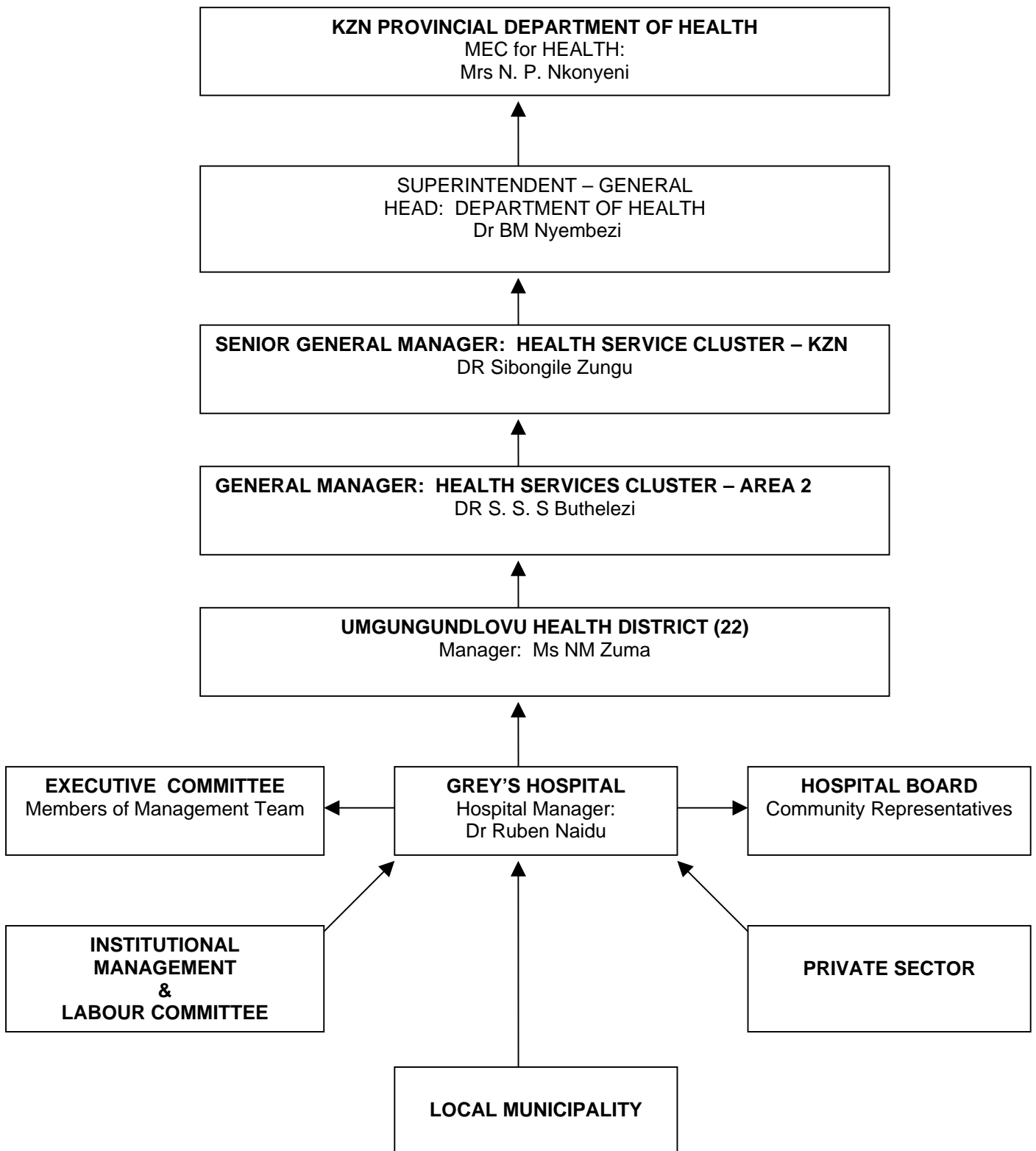
Finally thanks from the Board go to the KwaZulu-Natal Department of Health, Members of Executive Committee and especially the past Minister of Health KZN, Ms NP Nkonyeni and Superintendent Dr Nyembezi for their assistance to the Management and Board of the Hospital.

Special thanks too to Hospital Management over the years, particularly this past year to Dr Ruben Naidu and Matron Heather Findlay and to all Members of the Board who have given their valuable support.

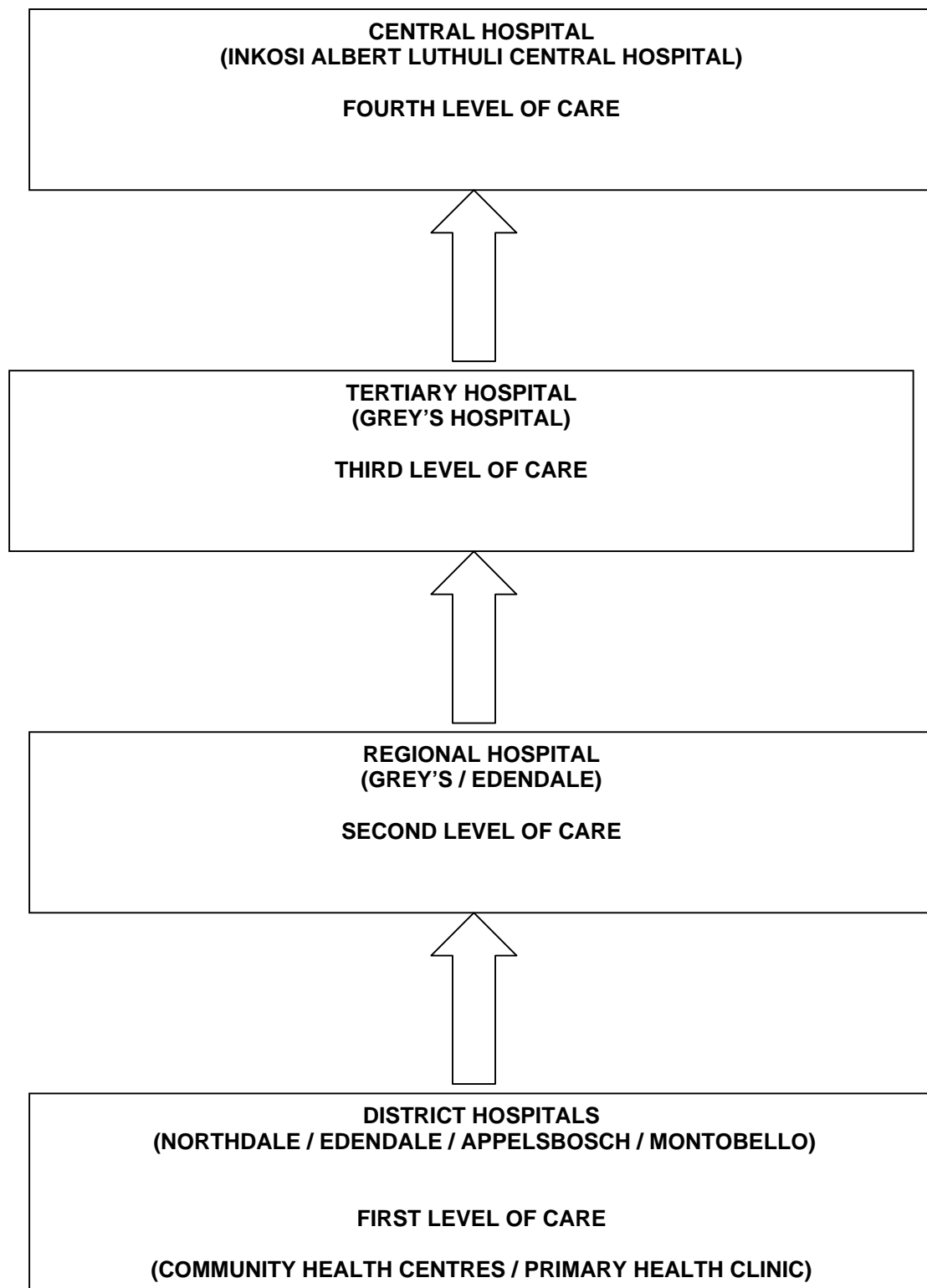
Amore et servire

**MR BRIAN EDWARDS
CHAIRMAN: GREY'S HOSPITAL BOARD**

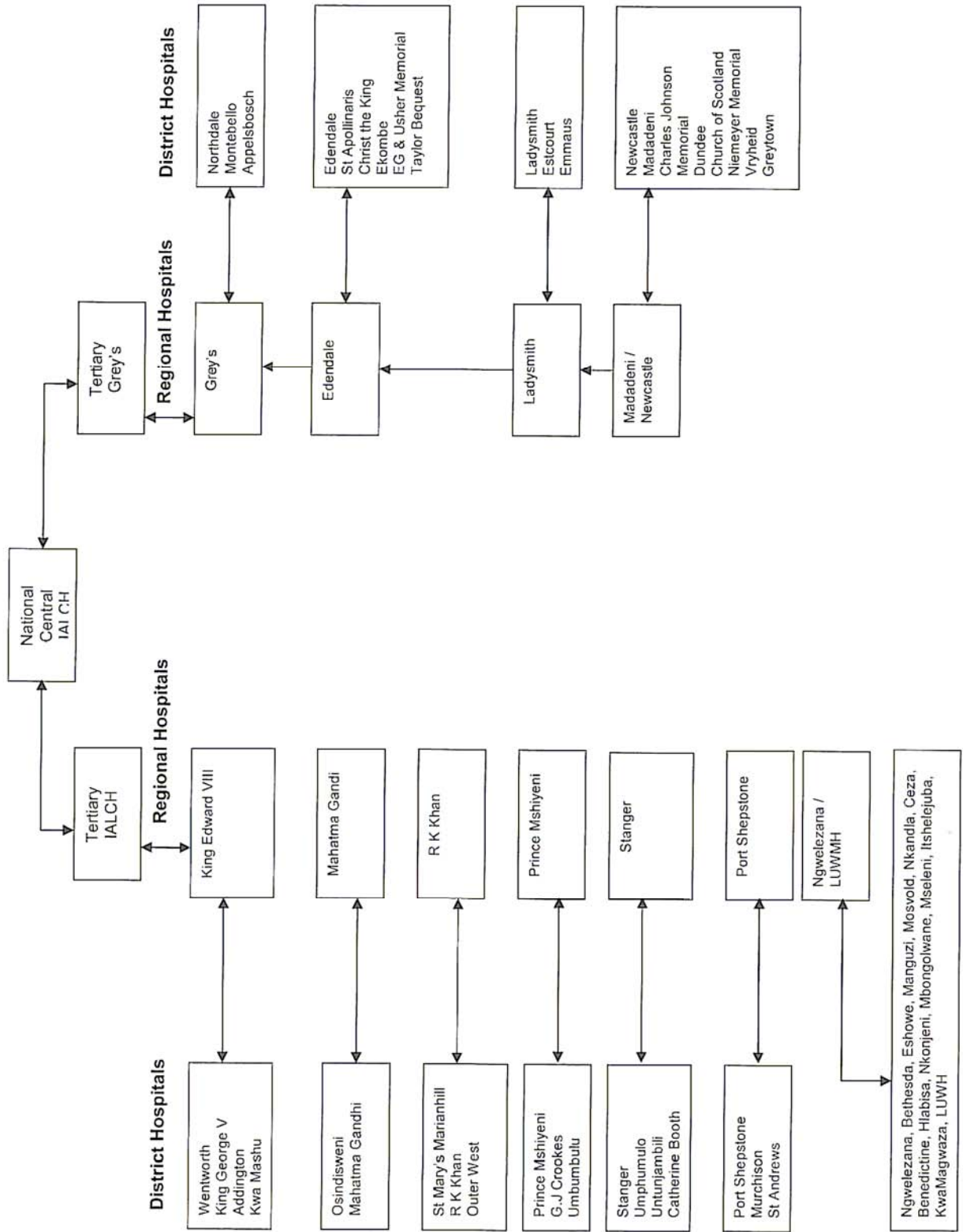
STAKEHOLDERS INVOLVED IN GOVERNANCE OF GREY'S HOSPITAL



PROVINCIAL PATIENT UPWARD REFERRAL PATTERN



A REFERRAL PATTERN FOR REGIONAL AND TERTIARY CARE SERVICES (FULLY CAPACITATED INSTITUTIONS)



PROVINCIAL PATIENT REFERRAL POLICY **COLLECTION OF CHRONIC MEDICATION**

Please note that you will no longer be able to collect your repeat medication at this hospital. You will be referred to your nearest district hospital or clinic. If you are currently on a repeat card you will be able to collect medicines at this hospital until your next appointment.

To avoid delays, please ensure that the doctor fills in your referral letter before you come to collect medication from the pharmacy.

PLEASE NOTE:

The referral letter must be kept in your file. The white copy of the referral letter will be returned to you after the Pharmacist has checked it. You will be required to present this document to the hospital or clinic you have been referred to.

Thanking you

By order: The KZN Department of Health

UMGOMO WOMNYANGO WEZEMPILO WESIFUNDAZWE SAKWAZULU-NATALI WOUKUDLULISELWA KWEZIGULI EZIBHEDLELA KANYE NAMAKLINIKI

UKULULEKWA KWEMITHI

Niyaziswa ukuthi angeke nisakwazi ukulanda imithi yenu yanyanga zonke kulesibhedlela. Nizothunyelwa kwezinye izibhedlela noma emtholampilo eseduze nalapho nihlala khona.

Uma ubuvele usuqalile ukulanda imithi lapha esibhedlela uzoqhubeka kuze kube kushaya ilanga lokuthi ubone udokotela. Uma usubona udokotela mucele akugcwalisele amafomu noma incwadi ezokwenza ukuthi ukwazi ukukoleka imithi yakho kwesinye isibhedlela noma umtholampilo oseduze nawe. Ukuze ungabambezeleki, futhi isikhathi singachitheki, cela udokotela akugcwalisele ifomu, ngaphambi kokuba uze ekhemisi.

QAPHELISISA LOKHU:

Lamafomu kumele uwagcine efayelini lakho. Iphepha elimhlophe uzobuyela lona. Uzofike ubatshengise lona esibhedlela noma emtholampilo, ukuze ukwazi ukuthola imithi.

Siyabonga

Isinqumo Somnyango Wezempilo wakwaZulu-Natali

GREY'S HOSPITAL OFFERS THE FOLLOWING PACKAGE OF HEALTH SERVICES

GENERAL SURGERY & SURGICAL SUB-DISCIPLINES

- Plastic & Reconstructive Surgery
- Paediatric Surgery
- Maxillo-Facial Surgery
- Oesophageal Surgery
- Ophthalmology
- ENT
- Urology

OBSTETRICS AND GYNAECOLOGY

PAEDIATRICS

- Neonatology

GENERAL MEDICINE & MEDICAL SUB-DISCIPLINES

- Neurology
- Cardiology – Catheterization Laboratory
- Haematology
- Gastro-Enterology
- Renal Dialysis Unit
- Endocrinology
- Rheumatology
- Respiratory Medicine
- Nephrology / Renal Dialysis

ORTHOPAEDICS

OCCUPATIONAL HEALTH

CLINICAL SUPPORT SERVICES

- Anaesthetics
- ICU (Adults, Paediatric and Neonatal)
- High Care
- Theatres
- Radiology & Diagnostics (MRI Scan, CT Scan, Neuro-angiography, Mammography Unit)

GENERAL SUPPORT SERVICES

- Laboratory including Pathology Services

SUPPLEMENTARY SERVICES

- Social Work
- Psychology
- Dietetics
- Physiotherapy
- Occupational Therapy
- Speech and Audiology
- Pharmacy
- Radiology



Argon Laser



Ultra Sound



*Intensive
Care Unit*



*Arthroscopy
Workshop*



Oncology



MESSAGE FROM THE HUMAN RESOURCES MANAGER

Human Resource Department was able to successfully empower staff in terms of training and development. Out of the Skills Development Budget this institution has been able to do the following during the last financial year:

- 51 ABET learners trained
- 40 people that did not have matric matriculated
- Because of the shortage of staff and that this institution was projection over-expenditure vacant posts could not be filled. Management then decided to help us sustain 81 Casual Workers from three different Employment Agencies to help us sustain service delivery. Those are the people that are out of employment and looking for work. Basically this Institution contributed in reducing the unemployment rate in the Country.
- We managed to fill 281 permanent vacant posts for the entire institution. That includes vacancies for all categories of staff in various disciplines at this institution.
- 15 Students were given experiential training for them to go back to their tertiary institutions to pursue their tertiary education. That refers to those students that are doing their tertiary education that cannot graduate without having received the practical exposure of what they learnt theoretically could be imparted into practice.
- Four Interns were appointed in HR Department for a period of 12 months. These are the people that have acquired their tertiary qualifications but still looking for work. Vacancies are advertised and those interested will apply. They may not re-apply for the second time but give other people a chance every year. They receive stipends of an amount of R1500-00 per month which is far better than nothing because they are allowed to look for employment elsewhere whilst serving the institution. In addition to this they gain practical experience.
- The Employee Assistance Programme was officially launched in 2004. The EAP is an ongoing exercise. During the above period more than 35 people were assisted by this said programme through our EAP Practitioners who refer them to either Social Workers, Psychologists etc for professional advice. This is a programme that is aimed at assisting people that have got personal problems which in turn impact negatively on the work performance of an individual. It could be personal problems or family problems.
- The number of complaints received from the public was reduced quite tremendously.
- The Civil Pensioners have been helped to continue getting their pension money continuously.

The Skills Development Budget for the period in question was R347 000. At the end of the financial year this Institution had used an amount of R324 922 to train and develop staff. This include ABET, Workshops, Seminars, Courses, Meeting etc

**HSK HLONGWA
HUMAN RESOURCES MANAGER**



MESSAGE FROM THE MEDICAL MANAGER

The Past Year proved to be an exciting year of Development for Grey's Hospital. It is hoped that we will expand our capacity in 2006 to include all the recognized Sub Specialties to fulfill our vision which is the Provision of Optimal Tertiary Services to People of the Western Half of Kwa Zulu Natal.

However, the shortage of Nursing Staff has a very negative impact on our expansion of services, in the other hand our Medical Staff have increased in number, we do have more Specialists in different fields now.

<u>MEDICAL STAFF</u>	<u>No. of Posts</u>	<u>Filled Posts</u>	<u>Vacant Posts</u>
MEDICAL MANAGER	1	1	0
CHIEF SPECIALIST	7	7	0
PRINCIPAL SPECIALIST	36	19	17
SNR SPECIALIST	43	5	38
SPECIALIST	69	23	46
CHIEF MEDICAL OFFICER	6	6	0
PRINCIPAL MED OFFICER	28	22	6
SNR MED OFFICER	24	11	13
MEDICAL OFFICER	14	8	6
TOTAL	228	102	126

<u>SUPPLEMENTARY SERVICES</u>	<u>NO. OF POSTS FILLED</u>
PHYSIOTHERAPIST	6
RADIOGRAPHERS	20
OCCUPATIONAL THERAPISTS	1
SPEECH THERAPY & AUDIOLOGY	0
PHARMACISTS	10
SOCIAL WORKERS	3
DIETICIANS	4
PSYCHOLOGIST	1

New Services

This past year we managed to Commission the following Services:

- Respiratory Medicine : - Pulmonary Function Lab
- Radiology : - Mammography Unit
- Oncology : - 60% Commissioned – New Building and Installation of new equipment has been finalised

New Appointments

- Clinical Psychologist
- Chief Clinical Technologist
- Principal Specialist : -
- Cardiology
- Infectious Diseases
- Obstetrics & Gynaecology
- Orthopaedics
- Intensive Care Unit
- Radiology
- Oncology
- Paediatric ARV

Academic Programme

This past year has been a great success for the Registrar Programme so far as evidenced by our Registrars doing well in exams and being able to increase the number of Registrars in the Programme (total no. of Registrars 61)

**DR K.B. BILENGE
MEDICAL MANAGER**

MESSAGE FROM NURSING MANAGER



Institutions such as Nkonjeni Hospital, Vryheid Hospital and Limpopo District visited Grey's Hospital to benchmark in various areas of the Hospital.

Staff continues to attend workshop and seminars to keep updated.

Grey's Hospital celebrated 150 years in November 2005.

Various events took place to celebrate this occasion e.g. Fete, Sports Day and Dinner Dance.

- October: : 100 student nurse training posts transferred from Northdale to Grey's.
- July 2005 : Miss Findlay (Nurse Manager) appointed as Hospital Manager of Edendale Hospital
Mrs Shange (Deputy Nursing Manager) appointed as Nursing Manager of Edendale Hospital.

Grey's Hospital received the Gold Award from the Premier Service Excellence Award December 2005.

**MRS PM BROWN
NURSING MANAGER**



MESSAGE FROM THE FINANCE MANAGER

On behalf of the Finance department I wish to express my appreciation to all staff for their dedication and contribution and overwhelming support.

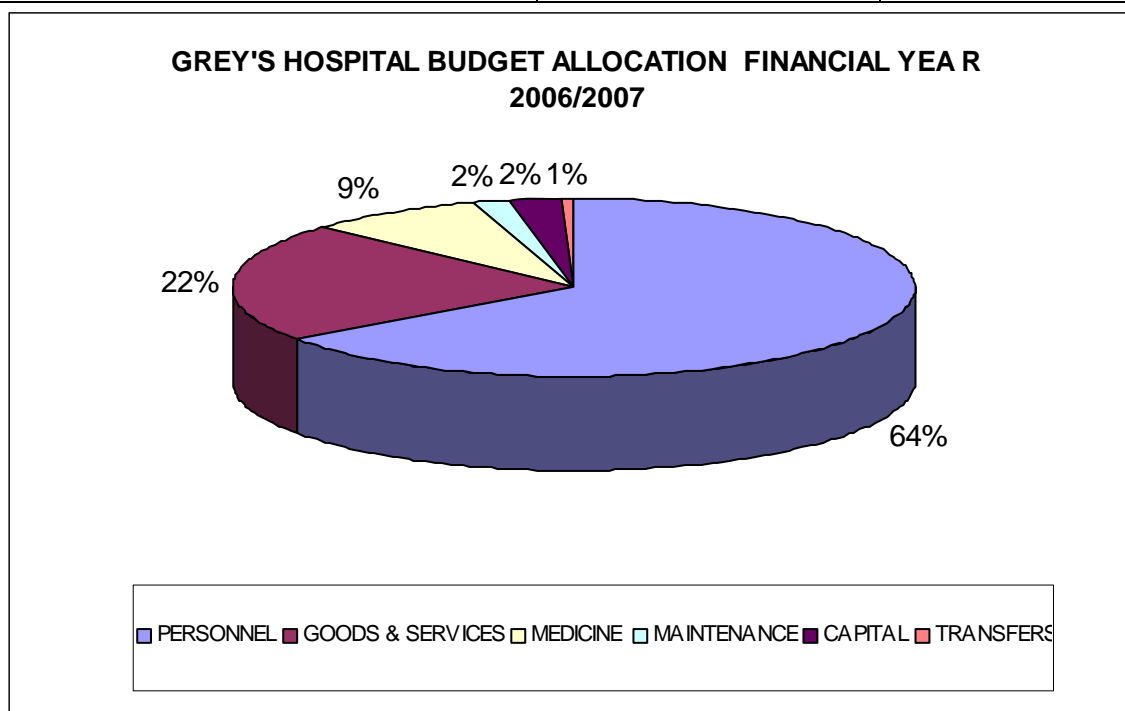
Looking ahead we are looking to delivering value customer services and we will remain attuned to the needs and expectations with innovative idea's and to this end, we will involve all stakeholders with our financial strength, prudent management approach to update or enhance all managers of matters that are related to finance.

We are optimistic that we will achieve an improved performance in 2006/2007.

Financial Overview

The amount of R 272,296,000 is allocated for the financial year 2006/07, which constituted an increase of 9.91% compared to the budget allocation of 2005/2006. The allocation is summarised as follows:

FINANCIAL YEAR	2005/2006	2006/2007
PERSONNEL	R164, 437,000	R176, 992,400
GOODS & SERVICES	R51, 580,000	R58, 888,600
MEDICINE	R21, 060,000	R23, 625,000
MAINTENANCE	R3, 400,000	R4, 600,000
CAPITAL	R6, 384,000	R6, 800,000
TRANSFERS	R902, 000	R1, 390,000
TOTAL BUDGET	R247, 763,000	R272, 296,000

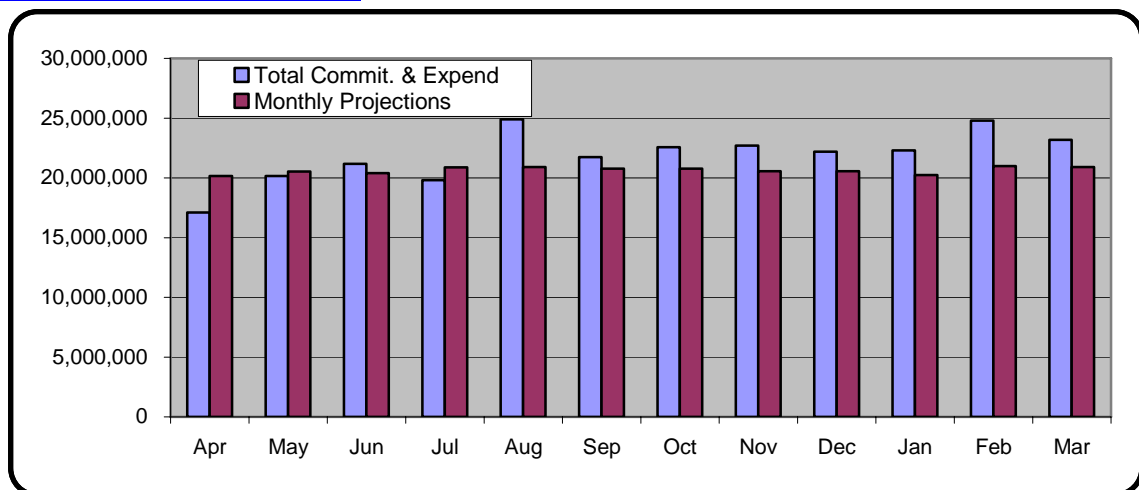


The expenditure trends for this financial year under review were as follows:

STANDARD ITEMS	BUDGET	ACTUAL	VARIANCE
PERSONNEL	R164,437,000	R166,796,591	(R2,359,591)1
GOODS & SERVICES	R51,580,000	R64,495,655	(R12,915,655)
MEDICINE	R21,060,000	R21,958,069	(R898,069)
MAINTENANCE	R3,400,000	R4,913,762	(R1,513,762)
CAPITAL	R6,384,000	R3,303,444	R3,080,556
TRANSFERS	R902,000	R1,275,648	(R373,648)
TOTAL	R247,763,000	R262,743,169	(R14,980,169)

The over expenditure of R14,980,169 (6.05%) is merely due to the development Tertiary Services.

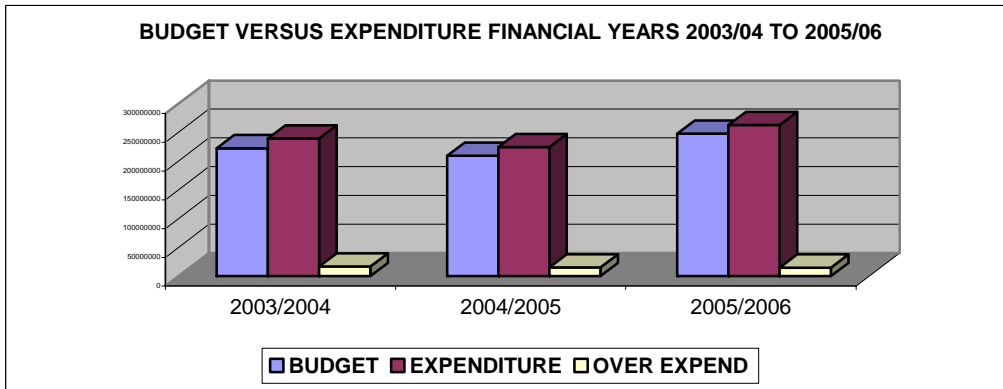
MONTHLY CASH FLOW PERFORMANCE IN THE 2005/6 FINANCIAL YEAR



FINANCIAL HIGHLIGHTS – 2003/2004 TO 2005/2006

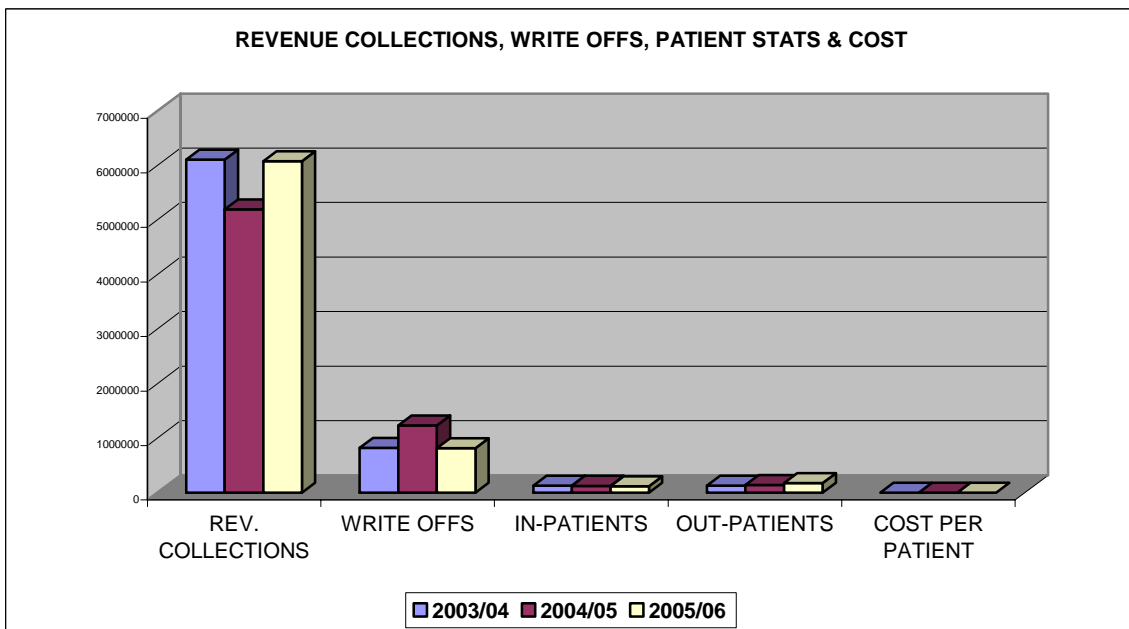
BUDGET VERSUS EXPENDITURE

ITEM	2003/04	2004/05	2005/06
BUDGET	R222,249,000	R209,073,000	R247,763,000
EXPENDITURE	R239,210,499	R224,321,163	R262,743,169
OVER EXP	R16,969,740	R15,248,163	R14,980,169
% OVER	7.64%	7.30%	6.05%



REVENUE COLLECTIONS, WRITE OFFS, PATIENT STATS & COST

ITEM	2003/04	2004/05	2005/06
REVENUE COLLECTIONS	R6, 108,823	R5, 191,294	R6, 080,368
WRITE OFFS	R820, 307	R1, 231,767	R814, 781
IN-PATIENT DAY'S	128,312	126,559	119,383
OUT PATIENT HEAD COUNT	127,878	139,714	178,493
COST PER PATIENT PER DAY	R1, 399	R1, 296	R1, 469



IMPLEMENTATION OF COST CENTRES

R2.5 million was approved from the Provincial Hospital Management Grant for the roll out of the cost centre project. A task team was appointed by Management for the implementation of this project which was headed by Mr Dan Monilal as the Cost Centre project Manager. The requirement for the implementation of this project involved the following:

- Purchasing of Microsoft Great Planes Software Package, 50 X Computers, 30 X Printers, new Server, installation of 16 wireless points and office furniture.
- 22 Ward clerks were trained on Introduction to Computers and the training is on going.

BENEFITS OF COST CENTRE ACCOUNTING

- Better understanding of cost and activities at cost centre / ward level.
- Creates a greater awareness of expenditure.
- Decentralisation of decision making process to cost centre managers.
- Empowerment tool for Cost Centre Managers.
- Greater accountability by Cost Centre Managers.
- Motivation tool for budget request Environment of openness and transparency of the Budgeting / Expenditure Process.
- Creates data for activity based costing.

'THE COMMON FEATURE OF ALL ORGANISATIONS IS THAT THE RESOURCES AVAILABLE ARE NEVER SUFFICIENT TO PERMIT THE ACHIEVEMENT OF EVERY DESIRABLE AIM.... THERE IS ALWAYS A BUDGET CONSTRAINT' ***AFRec***

MISS Z.K BUTHELEZI
FINANCE MANAGER

MESSAGE FROM SYSTEMS MANAGER



Grey's Hospital Management is committed to the : -

- Promotion and Establishment of an efficient, user friendly, accessible, reliable Hospital Management of Information System (HMIS)
- Continuous supply of adequate and clean linen
- Improve the management and control of linen
- Improve the physical facilities e.g. –
 - Supplementary Services
 - Linen facility
 - Offices
- Provision of Office Accommodation
- Electrification of boilers
- Improve facilities for the physically challenged
- Provide transport for goods, equipment, blood and medicine

Visiting Hours

Afternoon : 15h00 to 16h00
Evening : 19h00 to 19h30

**MR R Z MKONGWA
HOSPITAL SYSTEMS MANAGER**

STUDENT TRAINING



The four year Diploma programme is conducted twice a year, (January and July)

The 2 year programme is conducted twice a year for Enrolled Nurses.

The selection of students is done by the Central Selections Committee and not by the institution.

The students have to sign contracts before commencing training and are expected to serve the KwaZulu-Natal Department of Health for the same training period. The college for new nurses will commence on 01 July 2006.

**MRS DU PREEZ
DEPUTY NURSING MANAGER**



Kitchen



Clinics



College

MEDICINE

2005 has been a good and prosperous year for the Department, especially regarding staffing and continued development of subspecialty departments. This has also increased my responsibilities and challenges to ensure smooth running of the Department and to keep staff happy.

STAFF

Consultants

A major achievement for the Department was the appointment of Dr S Maharaj to the post of full time Principal Cardiologist. This had been a difficult post to fill during the previous year. Dr Dawood was interviewed and appointed to the post of Principal Specialist Infectious Diseases. Dr Lee joined the Pulmonology division of the Department as a trainee Pulmonologist.

It was with sad news to hear the loss of Dr Hussain (part time consultant) who died following an MVA. He was of great value to the running of the Diabetic Clinic at Grey's Hospital.

Dr Solomon (part time specialist) left for Dubai to work as a diabetologist after many years of contributing to the running of the GI Clinic, Endoscopy service, teaching of registrars at Grey's Hospital and outreach programme to the Greytown Hospital. His services are sincerely missed not only by doctors but by patients too.

Dr Siddique was appointed to junior consultant while he continues to train in Nephrology at Inkosi Albert Luthuli Hospital. He is responsible for Nephrology services at this hospital together with the help of part time consultant Dr IP Naicker.

It was with greater sadness to wish farewell to Dr Kocheleff for his retirement. He had been the pillar and strength of the CDC clinic and running of the Infections Disease ward.

The other consultants in the Department continue to provide excellent service to patients, registrars, and staff and to the Management. The consultants include

Fulltime Consultants

- Dr Muller,
- Dr C Jozi
- D KT Naidoo
- Dr A Moodley
- Dr Siddique
- Dr Lee
- Dr Y Mahomed

Part Time Consultants

- Dr Caldwell - MAW
- Dr Moosa - Cardiac
- Dr Eathorne – Rheumatology
- Dr IP Naicker – Renal
- Dr Diez – Diabetic

MEDICAL OFFICERS AND REGISTRARS

Dr Gafoor and Dr Rasmussen completed their two years of training at this PMB complex Although Dr Rasmussen decided to stay and continue training for another 6 months, Dr Gafoor left to join and complete his training in Durban. Congratulations to these registrars for having passed their part-one exams in early 2006.

Dr M Bizaare was welcomed to the CDC clinic to assist in AIDS programme rollout. All the new registrars were welcomed in the beginning of 2006 in joining our registrar programme to make the number of registrar in the complex to 14.

INTERNS

Dr Y Mahomed continues to be responsible for interns. Only 4 interns rotate at a time through our Department. We are hoping to increase the numbers in the future.

REGISTRAR PROGRAMMES

This has been a great success so far as evidenced by our registrars doing well in exams.

- Being able to increase the number of registrars in the programme
- More registrars being keen to join this programme and the fact that most current registrars would like to stay more than the two years currently allocated.

The basis of the programme continues to be basic sciences meetings, clinical bedside teaching, x-ray meeting, journal club and grand round presentations. Dr KT Naidoo was delegated to direct the registrar programme for 2006.

OTHER ACTIVITIES

The department gets 4th year medical students rotating from the PMB Complex for their medicine blocks. The consultants are involved in teaching and in student end of block exams.

An excellent audit about referral letters was produced by Dr Muller.

OUTREACH SERVICES

Dr Muller continues to provide valuable outreach programme to the Kokstad District with the help of flying doctors. Other consultants have somehow not been able to keep up with the programme for reasons of either the outreach hospital or due to overload of work at Grey's Hospital.

SUB-SPECIALITY SERVICES

Includes: Pulmonology
Gastroenterology
Endoscopic services
Nephrology
Rheumatology
Cardiology
Infectious disease
Medical Boards

FUTURE

It is hoped that the following issues will be looked at closer or improved

- Audits for each sub-specialty
- Principal Specialist for - Haematology
Endocrinology
Outreach Programme
- Information Technology - Data collection and records
Computerized results and records
- Research
- More registrar training numbers

DR CHUMA JOZI FCP (SA)
HEAD OF DEPARTMENT OF MEDICINE

ORTHOPAEDICS

The Orthopaedic Department at Greys had an exciting and challenging year with the good overall performance delivered in both service delivery, recruitment and retention of staff. The Department had also done exceptionally well in accelerating access of Orthopaedic Services through its Outreach Programme especially in the Amajuba District.

HIGHLIGHTS OF THE YEAR:

- 60 % success with recruitment/filling of vacant posts especially Principal Specialist: Dr Kumar with the development of Spinal Surgery.
- 100 % retention of staff
- 50 % Reduction in waiting periods for fracture of femurs for surgery (Current Waiting Period reduced from 11.8 to 6.8 days)
- Successful integration of the teaching programme for both Edendale/Greys Hospitals
- 84 % of District and Regional Hospitals has been completed. Valuable information for Strategic Planning with regard to the type of support they need has been gathered.
- Very successful strategy in making operative treatment more accessible through Outreach Programme and Recruitment of a Principal Specialist for Madadeni Hospital.
- Successful completion of a Strategic Plan and Development of Hand Surgery in Pietermaritzburg and implementation phase has already started.
- Full Orthopaedic participation in the Hospital Accreditation process.

OPERATIONAL OVERVIEW:

1. Service Delivery:
 - 21 % Increase in the total number of operated cases as a result of the Outreach Programme
2. Positive/Patients Response to Service Level Standards:
 - 78 % Excellent/Good response from survey with regard to the quality of service rendered
3. Focus on achieving improved Service Levels:
 - Strategy focus is improving patient satisfaction through continuous reviews/innovations and opportunities of making service delivery more accessible and delivered within the shortest possible time frames
4. Recognition of the value of each staff member:
 - Striving continuously to create an environment conducive to good work environment
 - Development/Training needs
 - Department has demonstrated strength in recruitment/retention Strategy by 100 % retention of existing Staff and 60 % success in filling of vacant posts.
5. President/Minister – Speech by Health Ministry:
 - The past year has also been characterized by Strategic Planning, Policy and Guideline developments but the year ahead should be the year of accelerated service delivery, monitoring and evaluation in keeping with the President and Department of Health Strategic Objectives

PROSPECTS/CHALLENGES AHEAD:

- Formalization of Spinal Unit
- Kick start Orthopaedic Service in Northdale: There is a need to intensify efforts to make Orthopaedic Service accessible to the Northdale area.
- Streamline Support System for District/Regional Hospitals
- Development of Tertiary Service and the full Accreditation of Orthopaedic Department as a Teaching Hospital.
- Strengthen/Implement Quality critical control measures.
- Strengthen Teaching/Research
- Improve excellent/good satisfaction rating by patients through the Survey.
- Improve efficiency in Theatre Utilisation to further accelerate access to operative treatment

CONCLUSION:

The Orthopaedic Department is well placed to make Orthopaedic Service more accessible and transform Greys into a fully Tertiary Institution.



Part of the winning team in the Pietermaritzburg Integrated Orthopaedic Department Complex.

**DR M E SENOGÉ
HEAD: ORTHOPAEDICS**



HEALTH

KwaZulu-Natal

DEPARTMENT OF PAEDIATRICS
PIETERMARITZBURG METROPOLITAN HOSPITALS COMPLEX

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Grey's Hospital Paediatric Department Annual Report: 2005-2006

The past year has seen the Department of Paediatric further consolidate its role as the referral centre for children and newborns in the western half of KwaZulu Natal. Over 74% of all children who are admitted to the paediatric Intensive Care, the Neonatal Intensive Care and the General Ward are now patients from outside of the Pietermaritzburg area and are referred by doctors working in the 17 district and 4 regional hospitals Grey's Hospital serves. The need for the lodger mothers unit has now become critical as most of our mums are from afar.

The added complexity of patients that are seen in Grey's Paediatrics necessitated the upgrading of the Paediatric Intensive Care unit with the commissioning of 4 ICU beds in this period. Sister Thobile Mathonsi heads this dynamic unit. However severe shortages of trained nursing staff prevent further expansion.

The Neonatal Intensive Care is the largest and one of the busiest High care nurseries in the province. New equipment has been sourced and under Sister Ruth Davidge the unit had the UPS (Uninterrupted Power Supply unit) installed to allow the ventilators and other life saving equipment to function even in prolonged power outages. Whilst the unit continues to maintain its high standard there is a severe shortage of professional nursing staff. Recruitment strategies and remuneration for these expert nursing staff will have to be changed to prevent the situation from deteriorating.

The General paediatric ward under Sister Varshni Sewkurran is now functioning as tertiary care ward. New equipment especially monitoring equipment has been ordered. Here again nursing staff shortages this year have been significant. The Nursing staff continue to maintain a very high standard despite critical shortages.

The Paediatric outpatients clinics department is headed by Sister Glenda Comely. This unit saw the consolidation of all children with Epilepsy and neurodevelopment disorders into a busy Wednesday clinic. The previous Thembilisha clinic which catered for HIV positive children has been successfully integrated into the Family clinic. Most children who are eligible for life saving antiretroviral therapies have been started on these drugs. The Pietermaritzburg Children's HIV clinics now have the largest number of children on antiretroviral therapy in the entire province.

Whilst Nursing shortages have been severe and prevent expansion plans the staffing and training programmes of medical doctors has improved. Ten registrars (residents training to be paediatricians) now work in the complex. 2006 this will see the number increase to 16. Successful training programmes for interns, Diploma in Child Health training and postgraduate Registrar programmes were consolidated. Dr Delania

uMnyango Wezempilo . Departement van Gesondheid

Fighting Disease, Fighting Poverty, Giving Hope

Lawrence and Dr Johnny Ahrens registrars who trained at the department qualified as specialists.

The Grey's Paediatric Department Specialists have in the last year contributed to various National and provincial programmes and projects aimed at improvement in the care of children. Dr Neil Mckerrow has been instrumental in the planning development of paediatric facilities at Ladysmith, Newcastle – Madadeni as well the much needed upgrade of Neonatal care facilities for our entire province. Dr Mark Patrick and Dr Cindy Stevens helped develop and launch the new version of the CHIP National programme which looks at auditing of all child Under 5 deaths in the country. Dr Kimesh Naidoo continued with the development of HIV /ART services in the entire province and now is in charge of the Western Half of the province. Dr Graham Ducasse continued with his support of the provincial Cystic Fibrosis unit. Dr Les Hall was promoted to head Edendale Paediatric on the retirement of Dr Mick Broughton.

2005-2006 has been a busy year for the Paediatric department with many of its programmes developing national and provincial range. Consolidation of its core function in providing tertiary specialist paediatric service to all the children in the western half of the province continues but remains hampered in its growth by severe shortages of trained nursing staff.

Kimesh Naidoo
Greys Paediatrics - 2005

OBSTETRICS & GYNAECOLOGY

The year 2005 to 2006 has been one of transition. Dr TR Moodley (Chief Specialist) and Dr TJF Rockey (Senior Specialist) both retired after many years of invaluable and much appreciated service to the people of the western half of KwaZulu-Natal. Both doctors are continuing to assist the department on a sessional basis.

Dr MJ Titus has been appointed as the new Chief Specialist and Dr TD Naidoo has been appointed as the Principal Specialist. Dr TD Naidoo has an interest in the subspecialty of urogynaecology – an area in which he will be establishing tertiary services.

Dr SB Amod was promoted to Senior Specialist.

The year was one in which services were consolidated and expanded.

OUTREACH PROGRAM

The outreach program to the district and regional hospitals was enhanced – especially by the addition of the colposcopy service to Newcastle Provincial Hospital. The latter service is delivered by a doctor from within the department with the assistance of Sr Galliers (Gynae Clinic Sister). This service has lightened the burden on Grey's Hospital colposcopy services. The colposcopy service at another hospital is being developed with assistance from Grey's Hospital – and will hopefully be operational this year.

NORTHDALE PROGRAM

Northdale Hospital was, during the course of the year, able to appoint staff with anaesthetic and Obstetric experience. This lightened the district patient load on our wards. We do provide continuing assistance to Northdale Hospital.

CLINIC SERVICES

A specialized clinic for pregnant diabetic mothers was established. There has been a tremendous increase in the numbers of patients being managed at this clinic. This clinic will be fully multidisciplinary – in time.

A specialised clinic in gynaecology endocrinology was also established and is running well.

The colposcopy clinic continues to run well.

Plans are in place to expand the clinic services to 5 days per week. A concern is the apparent shortage of nursing staff within the obstetric and gynaecological services at Grey's Hospital – especially the outpatient services.

Specialised urogynaecology and pelvic floor clinics are planned. An expanded gynaecological oncology service is being established.

INPATIENT SERVICES

There is a tremendous backlog in gynaecological surgery – especially due to the large gynaecological oncology workload. Attempts are being made to expand the operative services to deal with the 2 to 3 month waiting period for elective gynecological surgery patients.

In-service training is being held for the nursing staff who provide an invaluable service within the obstetric high care unit.

A concern continues to be shortage of nursing staff within the unit.

TEACHING ACTIVITIES

The numbers of registrars training in our department has increased to 6 from 4.

From February 2006, 4th year medical students from the University of KwaZulu-Natal are rotating for 8 week blocks through our department.

ACADEMIC

Dr Titus will be presenting a paper at the FIGO International Conference in Malaysia in November this year. Dr TD Naidoo and DR RR Green-Thompson have each had a case report published in scientific journals within the discipline.

STAFFING

The delivery and expansion of the regional and tertiary services at Grey's Hospital is being hampered by the lack of suitably trained nursing staff. There have also been experienced medical officers who have left but whose posts have not yet been filled.

The provision of regional and, mainly tertiary obstetrics and gynaecological services is being maintained with simultaneous improvement and expansion of our current services.

**DR TITUS
CHIEF SPECIALIST**

DIETETICS DEPARTMENT

This last year has continued to be a very productive year for the Department. Despite extreme staff shortages, we have managed to successfully maintain our service delivery standards to our clients. It was unfortunate though that our services to the ARV clinic were temporarily halted, as the outpatient load continued to increase. As a result only two Post Graduate Dietetic Interns were accepted to complete their clinical module at Grey's Hospital.

During this time a Junior Dietitian post was successfully upgraded to a Senior post. The post was advertised and filled. However, our staff compliment remained as 2 Clinical Dietitians for the entire institution until end June 2005. July 2005 saw the appointment of an additional staff member, bringing the total number of staff to 3. This was a long awaited welcome, as this department operated with only 2 Dietitians for over a year. This was a great challenge. With the appointment of the third Dietitian, came the new service to the Obstetric and Gynae wards.

The department has since been renovated to include additional rooms for private consultation, storage facilities as well as a main reception area. Unfortunately this reception area will only be fully functional once administrative or clerical staff is appointed.

The clinics that are currently supported by this department include the following: Antenatal clinic (new service), Diabetic Adult Clinic, Diabetic Paediatric Clinic and Paediatric Liver Clinic (new service). All other outpatients are seen strictly on an appointment basis with a referral. Total number of patients seen or treated for the last financial year: **17 812 patients over a 12 month period**. This equates to a total of **1484 patients per month**.

The Nutrition Directorate has provided this department with an additional set of Food Models for patient nutrition education, an additional body stat machine, as well as 12 Physician, Adult, Mother and Child function scales with height rods. These scales have been distributed to wards and most clinics within the institution.

Health Days celebrated by the department include Breastfeeding Week, Diabetes Day, and International Aids Day. Nutrition information stands were put together, and supported by talks and information sharing, as well as the issue of prizes for the days event.

The ARV Dietitian post was advertised and successfully filled in January 2006. The nutrition component of the ARV clinic was re initiated since this time.

Staff continue to attend inservice and continuing education activities to keep abreast with nutrition practices to assist with effective and efficient service delivery to the clients we serve.

**MRS R. LACHMAN
PRINCIPAL DIETITIAN**

OCCUPATIONAL THERAPY

Occupational Therapy service has had a busy year. We support the orthopaedic, neurology, plastics, surgery, medical and paediatric services. Splinting, remediation, rehabilitation, pressure garments, assistive devices, wheelchairs, medico legal assessments and home programmes make up our core business. With the introduction of specialist services, the department has had to extend itself in various different avenues.

ACHIEVEMENTS:

- Allocation of community service therapists to department, which assists, on a temporary basis with the lack of staffing.
- Community outreach at Aryan Benevolent Home, W.A.Lewitt school, Arthur Blaxwell School for the Blind and Deaf and Town Hill Hospital.
- Good networking with community to assist with issuing assistive devices to patients
- Certificate of recognition for training and evaluating students from UKZN.
- Successfully completing and achieving the requirements for the baseline during the Accreditation process.
- Networking with regional and provincial occupational therapy forums to improve knowledge and training of therapists and improve quality of service.
- Co-ordination of the cerebral palsy clinic with all role players. Fundraising and hosting a Christmas party for 60 children from the clinic.
- New and improved facilities due to renovations, which are 80% complete.
- Issue of new equipment to improve quality of service.

CHALLENGES:

- Turnover of staff has been almost 70% with inability to attract staff to the hospital in vacant entry grade posts.
- Reliance on community service therapists to sustain the service at a tertiary level.
- Lack of support staff.
- The development of new specialist services and the inability to support them adequately.
- Training and development of professional staff due to time constraints.

ANGELA CHETTY
OCCUPATIONAL THERAPIST

CLINICAL PSYCHOLOGY

The Department of Clinical Psychology is engaging in the challenging task of creating a professional and dynamic unit. Over the last few months departmental policies and procedures, patient contracts and assessment protocols have been designed and implemented. Staff have been allocated intake days during which time new cases are assessed or screened and booked for further assessment when appropriate.

We have consulted with specialist clinics and departments and have initiated both individual and group therapy intervention in specific areas. We have initiated assessment of renal patients for suitability to be included in the chronic renal programme and have planned interventions with children demonstrating non-compliance in treatment and health promotion with staff members.

The Community Service Psychologist provides intervention to both Church of Scotland and Christ the King Hospital on a monthly basis. Our staff shortages have prevented us from providing further services.

We have submitted requests for standardized assessments and would like to create a play therapy room for the management of children.

SHANTAL SINGH
SENIOR CLINICAL PSYCHOLOGIST

SPEECH THERAPY AND AUDIOLOGY

With regard to community service projects: the Speech Therapy and Audiology Clinic held at Christ the King Hospital in IXopo was terminated at the end of March 2006 due to logistical reasons. However, as of May 2006 a Community Service project at Townhill hospital has been initiated and is currently being managed by the Speech Therapy, Audiology, Occupational Therapy and Physiotherapy Community Service officers.

A programs that has been successfully run includes the Cerebral Palsy Clinic in conjunction with the Occupational Therapy and Physiotherapy Departments.

Major shortcomings are in terms of staffing, as we have NO permanent Speech Therapist and Audiologist, as the previous Speech Therapist Head of Department left Grey's at the of February this year. There are 2 Community service Officers, 1 a Speech Therapist and 1 an Audiologist, who are currently employed till the end of this year. A locum SLT/A is temporarily assisting the department three days a week.

An OAE machine is in the process of being acquired to assess the neural integrity of the cochlear and it can be used as a screening tool for neonates and other age groups as it yields objective results.

Community Service Speech Therapist
Ms A. Osman

Community Service Audiologist
Mr G. Runganathan

PHYSIOTHERAPY DEPARTMENT

Staff:

A community service Physiotherapist was allocated to Greys for the first time in 2006. One Physiotherapist transferred to a promotion post at COSH, again leaving the department short-staffed. However, the long awaited post establishment, which includes posts above entry grade, was introduced. This bodes well for the future staffing.

Students:

Students from the Universities of Cape Town and Kwa-Zulu-Natal completed their elective placements at Grey's in 2005. A volunteer Physiotherapist from Germany worked here from February until June.

Hydrotherapy Pool:

The Hydrotherapy Pool was extensively refurbished, and the work completed by January 2005, providing much relief to the large numbers of chronic pain patients who make extensive use of this facility. For the first time in years the pool was able to be utilised throughout 2006 without interruptions.

Services:

Pulmonary Function Testing was, much to the Physiotherapists relief, taken over by the Pulmonary Function Testing lab and a technician dedicated to the task. Back exercise classes have been introduced. These are proving effective in dealing with the large number of chronic pain patients. The Physiotherapists are part of the team involved in formation of the Hand Unit, under the guidance of Dr. Senoge (Orthopaedics).

Renovations:

Construction of new office and storage areas started in August 2005, and was completed in December.

Equipment:

No major purchases were made in this period.

**MRS H. SHANAHAN
PHYSIOTHERAPIST**

RADIOLOGY DEPARTMENT

ACADEMIC HIGHLIGHTS

The first two Radiology registrars trained at Greys Hospital have passed their final FCRad (Diag) SA examinations. Additional Radiology registrar posts were obtained and these registrars are currently preparing for their Part 1 FCRad (Diag) SA.

Two chief ultrasound radiographers spent two weeks at Tygerberg Hospital with a world-renowned expert on foetal anomalies during September 2005. The knowledge learnt there will enhance patient care in the Foetal Anomaly Clinic here at Greys Hospital.

Radiologists, registrars and radiographers attended a number of Congresses including computed radiography and PACs, musculoskeletal ultrasound, interventional radiology, MRI, MDCT coronary angiography and virtual colonoscopy.

An application specialist from Holland gave an intensive course of lectures on MRI spectroscopy in July 2005 to the Radiologists and Radiographers

One general orderly completed his matriculation studies and one general orderly and one darkroom operator are currently studying for their matric

An x-ray clerk is an ABET trainer, and two radiographers are Quality Improvement trainers. One Quality Improvement Training session was held during 2005 for Greys Hospital staff. Dr G.D. Nzanira, Management Consultant, HQS Consulting, gave further training in Quality Improvement to the trainers and Greys Hospital management.

The Radiological Outreach Programme was expanded with audits being conducted on the staff complements and equipment in all outlying hospitals.

A series of Ultrasound courses were conducted for many doctors and radiographers from KZN. Forty-two candidates wrote the Jefferson Ultrasound Research and Education Institute, Thomas Jefferson University, Philadelphia, USA examination, and ten of these candidates were awarded a certificate of commendation for obtaining a score of 70% or more.

Monthly in-service training lectures are conducted in the department as well as weekly radiological meetings with various other disciplines.

ACHIEVEMENTS

An additional Principal Radiologist was appointed in March 2006 to commission the new mammography department. The mammography service was instituted towards the end of March 2006.

All the porters and general orderlies were transferred from Nursing Management to become part of the Radiology establishment.

Representatives from the Limpopo province (Lebowakgomo Hospital) benchmarked with various departments at Greys Hospital, including Radiology, for accreditation purposes.

The Radiography Manager was significantly involved in the preparations for the Premiers Service Excellence Award for which Greys Hospital obtained Gold, as well as Quality Improvement Training and the COHSASA external survey.

One of the chief radiographers is a member of the Greypevine committee and has been elected the Chairperson of the Society of Radiographers of South Africa (KZN branch) for 2006. She is also currently doing an assessors course at Durban University of Technology.

GENERAL

As a tertiary institution, the Radiology Department is fortunate to be equipped with a state-of-the-art 64 slice CT scanner and a 1.5 Tesla MRI unit. However, a significant amount of the other existing equipment is in dire need of replacement, notably the Ultrasound units. Acquisition of these units has unfortunately been extremely prolonged.

An additional two mobile units were purchased during 2005

A new digital fluoroscopy unit, initially ordered in 2004, is eagerly awaited.

Plans are underway to further extend tertiary services offered in the Radiology Department, including musculo-skeletal ultrasound, vascular ultrasound, CT angiography (coronary and general), virtual colonoscopy, breast MRI, spectroscopy and diffusion tensor imaging.

**CHIEF SPECIALIST RADIOLOGIST
DR A. F. STOKER**

NURSING CAMPUS

The Campus has continuously strived to maintain an environment which is conducive to learning in an effort to produce caring and competent nurse practitioners for the benefit of the clients of the health care services. This has proved to be a challenge due to increased work loads as a result of the high turnover of staff. Tutor to student ratio remain 1:23.

This Campus has also participated in the transformation of Natal College of Nursing to Kwazulu-Natal College of Nursing and the new curriculum which was implemented on the 1st July 2005.

Staff Movement

- Miss N.P. Tshezi - Administration Clerk commenced duty on the 1st April 2005.
- Five tutors joined the Campus between June-July 2005.
- One tutor transferred to Edendale Campus on 1st July 2005

We hope that their stay will be a long and happy one.

Mrs. V.A Longbottom transfers to Umgeni Hospital as Deputy Nursing Manager on 1st December 2005.

Congratulations to her and we would like to thank her for the hard work.

Mrs. F.E. Lowe retired at the end of December 2005.

We are grateful for her contribution to the Campus activities and more especially for the efficient and effective running of the Midwifery module.

Mrs. S. Demmer retired at the end of March 2006. We are grateful to her for her contribution to Nursing Education and upholding the professionalism of nursing in her Ethos and Professional Practice taught to students.

Both Mrs. Lowe and Mrs. Demmer have been employed on a part-time basis in 2006, due to the staff shortages.

Mrs. N.D. Simelane commenced duty as a Tutor in February 2006 and Miss I Maikoo returned to the Campus on 13 March 2006 after working abroad.

Mrs. M. Maharaj was appointed Nursing Campus Registrar with effect from 1st March 2006.

Five Nursing Campus Subject Head posts have been advertised and head office are in the processing of filling these posts in early April 2006.

Staff Development

- Staff continue to study in their personal capacity and have attended seminars and workshops whenever possible:
 - Computer courses offered by SITA
 - H.I.V. and Nutrition
 - Stress Management
 - Assertive Management
 - Mental Health Act
 - Personnel Management & Development System
 - Midwifery
 - Women in Dialogue
 - Financial Management

- Performance Budgeting System
- IMCI Case Management
- Accreditation of Providers of Nursing Education & Training
- ABET courses for cleaners

Nurses Dedication Ceremony

141 Graduates attended the joyous and triumphant occasion held on the 6th October 2005 at the Pietermaritzburg City Hall.

Bereavement

Mrs. T.R. Mills tragically passed away on the 1st November 2005.

May her Soul Rest in Peace

Thank you all for your support, condolences, floral tributes and prayers as we passed through the valley of the shadow of death. **GOD Bless YOU.**

Acknowledgement

"Thank you" to all the members of the multidisciplinary team of student accompaniment for working hard and effectively to ensure that students meet both the theoretical and clinical requirements.

**MRS. N.G. MATHEBULA
CAMPUS PRINCIPAL**

ETHICS COMMITTEE

- The Committee holds 6 meetings every year
- The Committee hosts 4 Ethics Forum Lectures every year; these presentations are well attended, but the Committee has been disappointed at the lack of attendance by the younger members of the medical community.
 - Lectures in 2005
 - Liz Thomson, Doug Wilson & Melissa Stobie– ARVs and Injustice
 - Professor David Mc Quoid-Mason – Consent in Minors
 - Fritse Zinner and Zane Farina – HIV/AIDS, Stigma and Consent
 - Jim Muller – Death Certificates
- The Committee has a presence on the Greys Hospital website on the Intra/Internet; its Vision, Mission and Objectives can be found there. Documents developed by the Committee will be posted on the website as they are completed.
- The Committee has tried to extend its membership to make itself more representative of the community served by Greys hospital, thus far with limited success.
- There have been some very useful topic discussions in the Committee which have served to clarify thinking on ethics related issues in the setting of medical practice in Greys Hospital.
- The Committee has not been much utilised to address ethical crises on the ground – that is to say “ethical consultation” has been very limited. It is hoped that practitioners and others confronted with ethical crises will approach the Committee for its input.
- The Committee has been grappling with issues relating to Research Ethics, specifically the nature and quantity of the role that it should play in the screening and monitoring of research projects undertaken at Greys Hospital and in the Pietermaritzburg Metropole. The Committee is planning to take a more active role in this regard.

The Committee wishes to thank Mrs Adela van der Walt for convening its Meetings and Ms Lorraine Hebblethwaite for keeping its Minutes.

**Dr FJ MULLER FRCPC
CHAIR**

QUALITY INITIATIVES AND ACHIEVEMENTS

There have been several quality initiatives undertaken during the past 12 months:-

- Premier's Service Excellence Award
- Quality Improvement Training
- Development of Quality Improvement Programmes in all service elements
- PATH project in partnership with WHO
- HPH project in partnership with WHO
- Participation in the COHSASA Accreditation process
- 150 year Celebration of Grey's Hospital
- Minimum Standards Survey
- Waiting Time Survey

Grey's was awarded the GOLD medal in November 2005 for the Premier's Service Excellence award. The staff worked hard to achieve this trophy and are very proud to have won the award.

Quality Improvement training was done in two sessions during the past 12 months and the departments have benefited from this training. Three management QI programmes were identified, namely:- 'Absenteeism', 'Cancellation of Theatre Cases' and 'The Procurement Process.' To date we have a total of 171 QI programmes in the hospital covering all service elements. Health Promotion QI programmes are now being developed by the services.

The results of the PATH project done with the WHO have finally come through. The data collected over the 6 month period produced an indication as to the quality of service being rendered. Grey's is hoping to be able to benchmark with other similar level hospitals internationally. We have also identified the need to develop QI programmes to address 'Patient Length of Stay' and 'the Overuse of Prophylactic Antibiotics.' Grey's has also agreed to enter the second phase of the PATH pilot project with WHO.

The HPH project is ongoing and Grey's are in the process of reviewing the five standards set by WHO. More emphasis has been placed on health care workers to be aware of the health needs of the patients and to ensure health education is given and documented in the patients' notes. The National Health Day calendar is used to ensure that Grey's participates in awareness campaigns to promote health issues to the community in line with the National Health Awareness Days.

One of the most intense quality initiatives that Grey's has participated in has been the COHSASA programme. The Department of Health reintroduced Grey's to the COHSASA programme in January 2005 and in February 2006 we were subjected to an external survey by the COHSASA team. At present we are waiting patiently for our results. Staff worked extremely hard to meet all the criteria and some of the service elements have managed to reach 100%.

Grey's celebrated their 150 years of existence over a period of three months in 2005. Many events were arranged by the committee and most staff in the hospital participated. Some of the highlights were the sports day, fete, dinner dance and the official luncheon.

The District Office have initiated two quality initiatives which Grey's has participated in. The first being the Waiting Time Survey and the second being the Minimum Standards Survey.

- The Waiting Time Survey was conducted in February 2006. The hospital utilized 30 volunteers to assist with the data collection. All people using the facilities at Grey's over a 24hour period were involved. The aim of this project is to obtain a baseline

regarding waiting times for all services. The results of this survey are not known as yet.

The Minimum Standards Survey has been conducted twice in 2006 so far. Edendale and Grey's were partnered for the first survey and Embo Clinic and Grey's were partnered for the second survey. Grey's obtained 91% for the first survey and are waiting for results of the second survey. The surveys have assisted us in identifying areas for improvement and action plans are being drawn up. It has also benefited the hospital by improving communications with other institutions in our district.

Quality Management is becoming a way of life at Grey's Hospital. Staff are benefiting from participating in quality initiatives and ultimately the patient care and hospital standards are being maintained.

MRS K.T. McKENZIE
QUALITY IMPROVEMENT CO-ORDINATOR



One of the therapists tying strings on the hands of the children to orientate them to right and left.



The group of children doing the "hokey pokey" to reinforce concept of right and left and to develop gross motor skills.



One of the therapists assisting a child who had some difficulty with her homework.



The therapists performing in a role-play for an audience of parents and caregivers. The topic of the workshop was Self-esteem and Parenting skills. The role-play focused on parenting skills while a discussion on Self-esteem was held after the play.



Volunteers (local and overseas) assisting with the dishing up food for the children



The children were provided with lunch. These children are from the afternoon group of school going children.

“PROMOTING HEALTH WITH OUR COMMUNITY”