

HEALTWEULLETIN

01 - 05 April 2019

APRIL, A TIME TO CELEBRATE FREEDOM AND WORK FOR OUR HEALTH



April is one of those special months in the calendar year. It offers Christians across the globe a chance to reflect on Christ, the meaning of His life, death and resurrection in relation to our own lives.

It is also the month in which we celebrate Freedom Day, on April 27, which is the profoundly historic day on which we all first voted in 1994, changing the course of this country and its future in ways that were once unimaginable. But it's also a great pity that by the time we celebrate an occasion as momentous as Freedom Day, some

of us are already in mourning, having lost loved ones in road accidents over the Easter holidays.

The saddest thing is that many of these accidents are avoidable – if only we took care of the "little" things. I'm referring to things such as adhering to the speed limit, keeping a safe following distance, keeping vehicles in a roadworthy condition, not overloading and, most importantly, not drinking and driving. Really, how hard can that he?

Reckless behaviour on the roads leads to unnecessary loss of breadwinners and caregivers. It leaves people maimed and disabled, all of which adds to the burden of disease in the province, which has limited resources. Therefore, I would like to take this opportunity to urge all the people of KwaZulu-Natal to be responsible and cautious out there.

This month, we also get to commemorate World Health Day, on 07 April 2019. Every year, the World Health Organisation selects a priority area of global public health concern as the theme for World Health Day, which falls on the

7th April, the birthday of the Organisation.

The theme for World Health Day this year is Universal Health Coverage: Everyone, Everywhere. It's an opportunity for all of us to pause and consider the significance of National Health Insurance (NHI), which talks directly to this theme. NHI, which we are piloting at UMgungundlovu, uThukela and Amajuba districts, is part of government's efforts to change the legacy of apartheid, whereby the country had a fragmented health system with 14 separate health departments and administrations for different population groups. We are now one country, and nobody should be discriminated against and excluded from getting access to healthcare due to their socio-economic status.

This system seeks to provide access to quality health services for all South Africans based on their health needs and irrespective of their socio-economic status. It represents a substantial policy shift that necessitates massive reorganisation of both public and private health sectors.

Government's implementation of NHI is a reflection of the kind of society that we want South Africans to live in: one based on the values of justice, fairness and social solidarity. It is consistent with the vision that health care should be seen as a social investment and not be subjected to market forces.

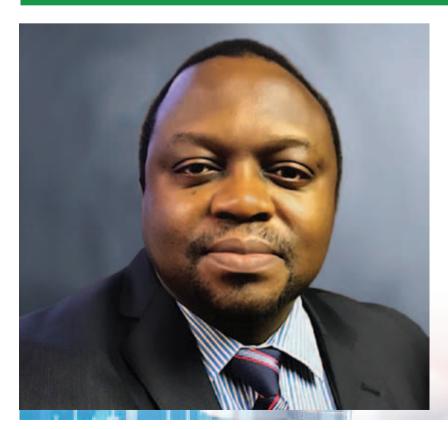
It will ensure a more responsive and accountable health system that is likely to improve user satisfaction, lead to a better quality of life of the citizens and improved health outcomes across all socio-economic groups. This will contribute towards improved human capital, labour productivity, economic growth, social stability and social cohesion. NHI, and the world that it envisages, is therefore just one of many reasons why, on 08 May 2019, South Africans should make their votes count by voting into power a Government that cares for its populace, and has a proven record for hard work, service delivery and patriotism.

Happy Freedom Month. I thank you.

KZN MEC for Health

NEW FINANCIAL YEAR

A TIME TO START AFRESH & DOUBLE OUR EFFORTS



As we turn a new leaf and mark the start of the new Financial Year 2019/20 this week, we call upon all employees of the Department and more importantly clinical staff across all levels of healthcare delivery to raise the bar when discharging their responsibilities.

The KwaZulu-Natal Department of Health (KZN DOH) is the second largest in the province and is tasked with a critical responsibility of providing quality healthcare services to all people of KwaZulu-Natal. The vision to "achieve optimal health for all people of KwaZulu-Natal" and the goal to strengthen health systems demand of all of us to spare no effort in fulfilling our responsibilities in order to ultimately have the good, healthy population that our government envisages. Our Vision and Mission statements should resonate with each individual employee, wherever he or she is

placed in the Department. We have our work cut out with clear goals and targets as set out in 2019/20 Annual Performance Plan (APP). We therefore need to double our efforts to achieve our set targets so that we can ultimately improve service delivery. I also want to convey my sincere gratitude for the work that has been done in the past financial year, despite the complex challenges that we faced. Many thanks for the contribution you made to ensure the continued functionality of our public health system. The Department dealt with some serious challenges in the past financial year, yet we managed to not only prevail, but also make strides.

These include: Oncology:

The oncology issue has long been resolved. Solid systems have been put in place and are working

extremely effectively. Access to treatment has been vastly improved and backlogs have been reduced and in many cases eradicated.

Supply Chain Management:

Great progress has been made in building capacity and stabilizing our SCM unit at Head Office. We have now appointed a new Chief Director who will provide leadership and oversee procurement process of the Department working with the Intervention team

Rental Lease Agreements:

Two building lease agreements have come to an end, for Medical Chambers and Trizon Towers in Pietermaritzburg. This has seen units such as Information Technology and which other one? vacating these buildings, and moving into a new state-of-the-art buildings at Old Boys School and Townhill Hospital. This will result in









huge financial savings in rental fees.

Forensic Pathology Services (FPS):

The Department suffered from periodic unprotected strikes in some of its medico legal mortuaries over the past year. The Department experienced backlogs and at times received support from external stakeholders such as the South

African Police Services (SAPS), and South African Military Health Services (SAMHS). There are still ongoing talks with FPS employees in structured platforms where the Department is dealing with their issues.

As we take stock of the progress that we have made, as well as the achievements that we have garnered, we also need to be very alert to the tasks that lie ahead. This is where we have an opportunity to start afresh, plan better and work smart. We are almost at the tail end of the term of office for the current government. We'll have a new administration soon after the general elections on 08 May 2019. The first task at hand will be the tabling of budget vote speeches for

various Departments. I therefore urge all programme managers to actively start the process of collating information for this purpose.

We have our targets and performance indicators mapped out and therefore only just need tangible plans to report on. I trust that we will all heed the call and be

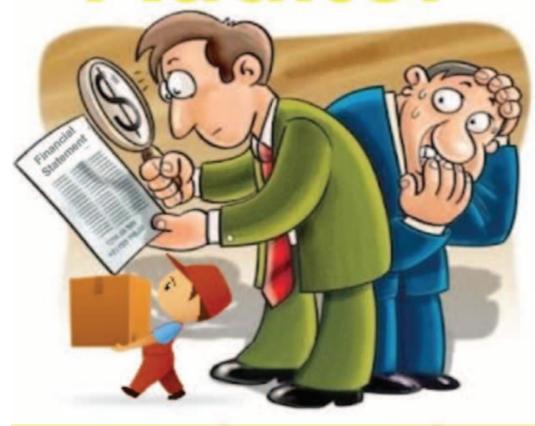
eager to work harder to achieve better health outcomes in this financial year.

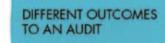
I wish to urge each employee to continue working hard, even when no-one is watching. #Thumamina

> Dr Muja Gumede Acting Head: Health

IT'S TIME:2018/19 ANNUAL AUDIT SEASON

Auditor





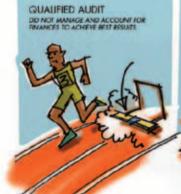
EACH ENTITY SUBMITS FINANCIAL STATEMENTS EVERY YEAR, WHICH THE AG AUDITS.





UNQUALIFIED AUDIT WITH FINDINGS

AUDIT UNQUALIFIED AUDIT WITH FINDING NOT BAD, BUT COUR COMPROMISE ACCOUNTABILITY F NOT ALBEADY DOING SO.



ADVERSE AUDIT LOTS OF INCOMESSES EVERYWHERE, AND NOTHING DONE ACCUREING TO CORRECT RULES AND PROCEDURES.



The audit season is underway as the Office of the Auditor General is busy with Annual Audits of various government Departments and state entities across the country. The KwaZulu Natal Department of Health (KZN DOH) also has auditors in its midst who are busy with this critical task on the ground.

The scope of the annual audit of the Department by the Auditor-General is to audit the Department on the following key areas:

- **6**
- Annual Financial Statements,
- Annual Performance Report and
- Test compliance with legislation at the Departments Head Office and at a sample of departmental institutions.

The objective of the annual audit is to:

Provide an opinion on the presentation of the Annual Financial Statements.

- Report findings regarding the reported performance information against the predetermined objectives for selected programmes as presented in the Annual Performance Report.
- Report findings on compliance with specific legislation in terms of selected focus areas / subject matters.
- Report on significant deficiencies in internal control.

The Auditor-General also is also required to communicate the following to those charged with governance in the Department:

- Significant qualitative aspects of the accounting practices, policies, and financial statement disclosures
 - Significant difficulties, if any, encountered during the audit e.g. significant delays, unavailability of personnel, unwillingness to provide information, extensive effort to obtain

audit evidence, restrictions imposed by management, unreasonably brief time to complete the audit.

Significant deficiencies in internal control identified during the audit

The Department has continuously worked very well with the office of the Auditor General through the Interim Audit Season period (August to December) and now with the Annual Audit season (January to June) which is underway. The Annual Audit will culminate to the Auditor-General expressing an audit opinion when issuing the final audit report on 31 July 2019.

The Auditor General's Opinion is informed by a series of oversight consultations with officials of the audited Department to scrutinise issues of accountability and governance in line with the scope of the audit.

This is a lengthy and meticulous process which can only inform the following findings:
DIFFERENT OUTCOMES TO AN

AUDIT: Each entity submits financial

statements every year, which the

Auditor-General audits.

A CLEAN AUDIT: Everything done the way it should be.

UNQUALIFIED AUDIT WITH FINDINGS:

Not bad, but could compromise accountability, if not already doing so.

QUALIFIED AUDIT: Did not manage and account for finances to achieve best results.

ADVERSE AUDIT: Lots of problems everywhere, and nothing done according to correct rules and procedures.

DISCLAIMER: Things were so bad, they couldn't even produce reliable evidence to support financial statements.

The past audit opinions have pointed to a number of gaps which the Department needs to correct.

These include among others

Irregular expenditure
Asset Management
Commuted Overtime

The Department is currently making amends and implementing plans

and setting up systems to respond to the remedial actions of the previous audits.

Departmental officials and responsibility managers are encouraged to always keep issues that might lead to unsavoury audit findings on the radar and strive to circumvent unnecessary audit queries.

It is highly anticipated that should the Auditor-General find that the Department has fairly presented its Annual Financial Statements, accurate and complete disclosures and if the audit of the selected institutions reveal sound internal controls implemented by the Department relative to Financial Management, Human Resource Management, Supply Chain Management, Revenue Management and Performance Management, the Department will receive an Unqualified Audit







KZN Department of Health



STATEMENT BY KZN HEALTH MEC DR SIBONGISENI DHLOMO, IN RESPONSE TO THE PUBLIC PROTECTOR'S REPORT ON PUBLIC MORTUARIES IN KZN



We welcome the report by Public Protector Adv Busisiwe Mkhwebane regarding the state of government mortuaries in the province, which was issued last week.

Notably, the Public Protector did not find anything consistent with the outrageous and untruthful claims by that bodies were not properly identified, and that some were lying on the floors and piling up on the trolleys and trays outside mortuary fridges. The Public Protector's response once again exposes the antics of those who operate in bad faith, and are intent on besmirching the good name of the Department and its hardworking staff and management.

There is sufficient storage for human bodies in the Medico-Legal Mortuaries (MLM), including the busiest four MLM's in KwaZulu-Natal - namely Gale Street, Phoenix, Pinetown and Fort Napier. Magwaza Maphalala (Gale Street) Mortuary is the busiest mortuary in KwaZulu- Natal, and there has no piling up of bodies as alleged. On occasions where the cold rooms (fridges) were not functioning, bodies were moved to Phoenix MLM because it has more capacity

for body storage. It is also untrue that there has been a high volume of decomposed and/or decomposing bodies in the Mortuaries.

There are human mortal remains that get admitted in the MLM's already in a decomposed state. Some are admitted when the process of decomposition has already started. There are separate storage rooms allocated for decomposed bodies. In instances of faulty refrigeration in the cold rooms, bodies are moved to the nearest MLM with sufficient storage capacity.

The temperature in the cold rooms is recorded at least twice a day, and such recordings are then checked by or submitted to the Mortuary Manager. Regarding claims that Mortuary Managers do not have the necessary and appropriate qualifications and experience to operate and manage the mortuaries, nothing could be more further from the truth. All Mortuary Managers have a post matric qualification in the form of a diploma, or degree from institutions of higher learning (a list of this was made available to the Office of the Public Protector).

Labour matters do have an impact on service delivery provision. The Department of Health KZN has limited control over the labour related issues as they are transversal across the country. The Department of Public Service Administration has authority on these labour related matters. The issues of compensation of Forensic Pathology Services are not a competency of the Department, but rather the Department of Public Service Administration. It has been further charged that mortuaries in KZN do not comply with provisions of applicable rules, laws and regulations governing the performance of forensic pathology in South Africa.

But regulations regarding the rendering of Forensic Pathology Services stipulate that a body stored in Medico-Legal Mortuary must not exceed 30 days.

The storage of mortal remains in the facilities depends on a number of factors, which are dependent on, among others:

- South African Police Service concluding their investigative processes;
- Identification by the next of kin and authorization to the Medico-Legal Mortuary for the body to be taken or sent out for a burial or cremation.

In instances where this has not occurred, bodies do unfortunately end up accumulating in facilities. Perhaps also there is a need for a review of this section of the Law, considering that in practical terms 30 days is way too little, particularly in South Africa where we have a history of a migrant labour system, which is complicated by urban

migration. Investigating and trying to locate families could be time-consuming, may require resources that may not always be available.

And it should be borne in mind that some areas are not easily accessible. Furthermore, some of the descendants of a deceased person may not be registered with the Department of Home Affairs. This makes it difficult track down their relatives. Paupers burials are the last resort in order to allow for these processed to unfold, which is why some of the bodies remain in the facilities for way beyond the 30 day period.

Regarding issues of infrastructure, equipment and the Department's ability to run a functional MLM service, we purchased three Lodox (X-ray) machines for the following MLM's: Gale Street Mortuary, Phoenix Mortuary and Richards Bay Mortuary. This has had a positive impact in ensuring that x-rays are taken and completed with greater efficiency where required. It has, however, been noted that during strike action or other activities related to work stoppage, certain instruments would go missing.

When normal resumption of duties occurs, some instruments would no longer be located or accounted for. It's an open secret that in most cases, Forensic Pathology Officers are mostly responsible or have the knowledge about disappearance or deliberate sabotaging of working instruments. Where feasible, we do take action against them. In some cases, delays in the completion of post-mortems may be caused by outstanding results from blood specimen investigations (alcohol and toxicology reports) for which we rely on the SAPS.

In order to alleviate this challenge, the Head of the Clinical Unit has introduced fortnightly meetings with doctors on an individual basis to evaluate and discuss each doctor's post-mortem report status. The Clinical Head also introduced the practice whereby any doctor who resigns while having outstanding post-mortem reports is required to finalise them prior to exiting. If they do not comply with such a request, their resignation would not be approved.

Additionally, as of 01 April 2018, all infrastructure matters relating to Forensic Pathology Services were centralised to Head Office Infrastructure Development Unit. That means all infrastructure related faults or repairs in the MLMs are attended to by this unit. This has yielded a noticeably positive difference in handling mortuary related infrastructure matters. Currently, service level agreements and contracts that are about to expire are being reviewed to ensure effective and seamless functioning of Forensic Pathology Services.

The Department continues to run a satisfactory medico-legal service despite financial constraints. We wish to thank all staff who are loyal, committed and dedicated in this regard.

A SUCCESSFUL BATHO PELE CAMPAIGN AT PORT SHEPSTONE HOSPITAL



On the 27th of March 2019, Port Shepstone Hospital held a successful Batho Pele campaign to remind staff of their duty to treat all patients with respect and dignity irrespective of whether patients have money to pay for the service or not.

Batho Pele is a Sotho phrase meaning that service providers have to put other people first before considering their own needs.

Both staff and patients that passed by the information desk which was displayed at the foyer were provided with an insightful and fun learning experience on how they could implement the Batho Pele Principles. During the campaign, staff recommitted themselves to upholding good customer care standards when dealing with patients at all times. Patients were also enlightened on actions to take should they come across unacceptable behaviour from the hospital staff.

All participants, which included both patients and staff, expressed their appreciation for a platform which reminded them to always treat each other with the spirit of ubuntu (humanity).









KZN CRICKET UNION PAYS TRIBUTE TO MEC DHLOMO FOR HIS SUPPORT FOR THE GAME, AND FOR EMPOWERING YOUNG CRICKETERS WITH ACCESS TO PRIORITY EMERGENCY HEALTHCARE



The KZN Cricket Union (KZNCU) has paid tribute to provincial Health MEC Dr Sibongiseni Dhlomo, thanking him for his overall support for cricket; his relentless promotion of a healthy lifestyle in the province; and for establishing a specialised emergency healthcare plan for poor young cricketers who do not have medical aid.

In terms of the plan, which was launched two months ago, the players receive priority healthcare at hospitals such as Prince Mshiyeni Memorial; King Edward VIII; Inkosi Albert Luthuli Central and many others. This is an attempt

to put them on par with their counterparts from affluent homes, who are covered by their parents' medical aid. The KZNCU's President Mr Ben Dladla and CEO Mr Heinrich Strydom paid the MEC a visit at his Durban office. They handed him a framed photograph taken with King Goodwill Zwelithini during a recent match, and a personalised Dolphins cricket jersey with his athletics race number 7705 on the back.

MEC Dhlomo then gave the KZNCU copies of his recently-released book My Journey to Robben Island: A Memoir of the Armed Struggle. Dr Dhlomo, who is an active athlete

and a proponent of healthy lifestyles, is wrapping up his tenure as the Health MEC, after serving two terms. Explaining the reasoning behind the KZNCU's gesture, Mr Dladla said: "We decided to thank the MEC for his undying support and unwavering commitment to the development of sport in general, and cricket in particular.

We've had Dr Dhlomo attending most of our games when he's available. What has been more interesting, and we've been quite grateful for, is that he did not only concentrate on the Dolphins as a professional team, but he has also been with us at grassroots level,

where everything is happening. We have a township development programme which he also supports...not only by his presence, but also in terms of health issues by getting ambulances when we need them. Lately he's also assisted us by getting the hospitals to open their doors to these youngsters whom come from difficult backgrounds. In Cricket, just like in any other sport, players may sustain some injuries or ailments. Through all those endeavors from his side, we just thought as the KZN CU let's come and say 'thank you.'" His sentiments were echoed by KZNCU's President, Mr Strydom, who believes the MEC's ongoing support will contribute to the future success of young players.

"As KZN Cricket and the Dolphins, we are privileged by Dr Dhlomo's support to our structures, systems and the whole pipeline. Sport and healthy lifestyle go hand in hand, and I think the support we've received from the Honourable MEC has been incredible. Hopefully this will continue in future with our relationships with the KZN structures. From a cricketing perspective, we'd like to give back to our communities. We've been fortunate for having one of the biggest development programmes in South Africa and maybe even in Africa, and hopefully through the continued support from our the MEC, we'll be able to continue with this development programme, and give back to the communities, to get the healthy lifestyles programme going, and provide more and more Proteas for the future."

MEC Dhlomo said he was immensely humbled by the visit, adding that it was rare for anyone to be visited by both the President and CEO of any organisation at the same time. Given the global increase in non-communicable diseases such as obesity, diabetes, hypertension and cancer, the MEC said healthy lifestyle was key towards improving the province's health outcomes. He vowed to continue to help young players through the hospital programme. "To me, this is very humbling.

There's a specific area just before these young players get to the Dolphins, where they are found wanting if they ever happen to get injured. You want them to recover quickly and get back to the game immediately by offering them the best health facilities that we have. We felt we had to close that gap. So, that partnership is up and running, and we'd want to consolidate that.

It actually assists as health... to see leaders who are championing sport. Before you can excel in any sporting code, you have to start by exercising. You need a health body, which leads to a healthy mind. By getting young people involved in sport we benefit a lot as health, because you use less money when people are healthy and engaged in physical activity. That partnership goes in that way."

The MEC said he would be keeping the framed photograph and personalised Dolphins jersey on his mantelpiece as memorabilia.

WORLD UTISM AWARENESS DAY: 02 APRIA 2019

The KZN Department of Health joins the rest of the globe in commemorating World Autism Awareness Day, which falls on 02 April in 2019. This year the Theme of World Autism Awareness Day is "Embracing Neuro Diversity.

What is Autism Spectrum Disorder (ASD)?

Autism Spectrum Disorder (ASD) is a disorder caused by issues with how the brain functions and can be noted from birth to three years of age. ASD occurs in all social groups and has no known cause. ASD is more common among boys than

girls and affects 1 in 68 children worldwide.

Children who have ASD present with different behaviours and abilities, therefore their learning capacities vary according to their level of intellectual functioning and communication skills. Due to this,

autism is described as being a spectrum of different skills and abilities. There is no cure for ASD but early intervention (before three years old) for a child with ASD has shown to significantly improve a child's intellectual functioning and language ability.

Signs and Symptoms

Some of the signs and symptoms of a child with suspected ASD include the following:

- No smiling or display of affection by six months of age:
 - Does not babble by 12









months;

- Does not use gestures like pointing and waving by 12 months:
- Does not produce words by 16 months
- Child does not respond to his name when called;
- Loss of speech and/or social skills at any age;
- Little or no eye contact;
- Plays with toys in an unusual way;
- Does not play or interact with other children by 3 years of age;
- Changes in routine or environment causes the child to distressed or panic;
- Insensitivity to loud sounds or noise;
- Insensitivity to certain smells;

How to Manage ASD?

Helping a child with ASD requires a team; which includes an occupational therapist, speech therapist, audiologist, psychologist and most importantly, the child's

family. Therapy and intervention should take place when a diagnosis of ASD is suspected or confirmed and should occur on a regular basis.

Children with ASD are most often placed in a school for learners with special educational needs. Applications to schools should start at least a year before the child is to attend school as it can be a lengthy process. The team of professionals can assist parents in the process of applying to schools

What to do?

Parents or guardians who have a child presenting with any or combination of the above stated signs and symptoms must seek advice from the relevant health practitioner such as an occupational therapist, psychologist, paediatrician and speech therapist. It is advisable that parents take a child to the nearest health facility for assistance.

Family support and other support systems such as support groups play an important role in the management of ASD.

For more information on Autism **Spectrum Disorder, please consult** any relevant clinician mentioned

ETHICS: CODE OF CONDUCT FOR PUBLIC SERVANTS

The Public Service Commission (PSC) has relayed guidelines that every public servant is expected to follow. Compliance with the Code can be expected to enhance professionalism and help to ensure confidence in the Public Service. This week's focus is on the public servant's responsibilities to the legislature and the public. Relationship with the Legislature and the Executive

A government employee should:

- be faithful to the Republic and honour the Constitution in the execution of his or her daily tasks;
- put the public interest first in the execution of his or her duties;
- loyally execute the policies of the Government of the day in the performance of his or her official duties as contained in all statutory and other prescripts;
- strive to be familiar with and abide by all statutory and other instructions applicable to his or her conduct and duties; and

co-operate with public institutions established under legislation and the Constitution in promoting the public interest.

RELATIONSHIP WITH THE PUBLIC

A government employee should:

- promote the unity and well-being of the South African nation in performing his or her official duties;
- serve the public in an unbiased and impartial manner in order to create confidence in the Public Service;
- be polite, helpful and reasonably accessible in his or her dealings with the public, at all times treating members of the public as customers who are entitled to receive high standards of service;
- have regard for the circumstances and concerns of the public in performing his or her official duties and in the making of decisions affecting them;

- be committed through timely service to the development and upliftment of all South Africans;
- not unfairly discriminate against any member of the public on account of race, gender, ethnic or social origin, colour, sexual orientation, age, disability, religion, political persuasion, conscience, belief, culture or language;
- not abuse his or her position in the Public Service to promote or prejudice the interest of any political party or interest group;
- respect and protect every person's dignity and his or her rights as contained in the constitution; and
- recognise the public's right of access to information, excluding information that is specifically protected by

LET'S CONNECT: BRARY AND

SIGN LANGUAGE

There are 111 sign language video clips on the intranet – each video clip interprets a health related term such as allergy, blood, fever, hurt and operation into Sign Language.

To access the video clips go the Human Resource Development (HRD) page and select Skills

Development and Training. All material on the intranet and in the Head Office library is for KZN Health employees only.

or further information, please contact

- 1. Although most people do not develop symptoms, one **TRUE** of the symptoms of cholera are vomiting and diarrhoea 2. If left untreated, cholera can lead to death **FALSE TRUE TRUE**
- 3. Exercise is the best way to prevent cholera
- 4. Cholera is very difficult to treat

cholera 4. False. Cholera is easy to

FALSE FALSE FALSE

In light of Monday being April Fool's Day, here's a joke to hopefully brighten your day:

Seeing her friend Sally wearing a new locket, Meg asks if there is a memento of some sort inside.

- 'Yes," said Sally, "a lock of my husband's hair.
- 'But Larry's still alive," answered Meg. **'I** know, but his hair is gone."

Answers

1. True. 2. True. 3. False. Practicing hygiene such as washing hands with soap and water before

touching food and after using the toilet, and drinking clean water is the best way to prevent contracting

TRUE









EASTER TRAVEL



The Easter holiday is close and with it comes the daunting task of packing to visit loved ones or vacate at destinations. Follow these three tips to make your holiday packing a little easier:

- Create a checklist. You can do this on your phone or write it on a piece of paper. This list should include items you would regret leaving behind such as certain clothing articles, cosmetics and cellphone chargers.
- Place items in plain sight. Leaving items that cannot be packed in strange but visible places is another method to insure items are not forgotten. For example, leaving a soccer ball in front of your home's main entrance would remind you to not forget it. You could even use the soccer ball as a reminder to yourself to not forget the baby food in the fridge.
- Pack snacks the day before. If you are driving a long distance and wish to cover ground quickly, pack snacks for your family the day before so you do not have to make unnecessary stops on your way.

IMPORTANT DATES

- Hospital Boards Recognition at eThekwini, Inkosi Albert Luthuli Central Hospital >>> 05 April 2019
- Healthy Lifestyle Event at Ilembe, Stanger High School Sports Ground >>> 05 April 2019
- Radiography Manager's Forum TBC >>> 05 April 2019
- Primary Health Care Conference at eThekwini, Greyville Convention Centre >>> 11-12 April 2019
- Clean Up Campaign at Amajuba, Newcastle >>> 12 April 2019
- Good Friday >>> 19 April 2019
- Othobothini Community Health Centre Opening at eJozini, Umkhanyakude >>> 23 April 2019
- Stanger Hospital Renaming at Stanger >>> 25 April 2019
- MASEAs at Mgungundlovu, Royal Showgrounds >>> 26 April 2019
- Freedom Day >>> 27 April 2019
- Emambedwini Clinic Opening >>> 30 April 2019







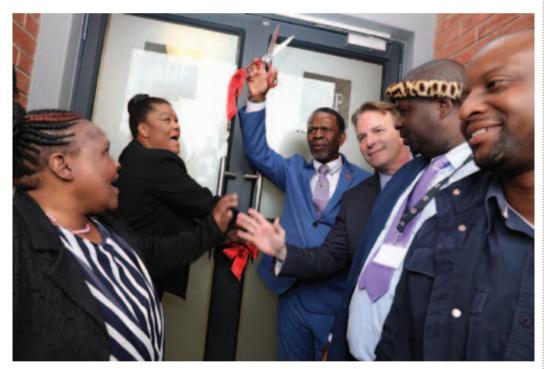


GALLERY

OPENING OF NEW BUILDING @UMLAZI K CLINIC —























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SEND STORIES YOU WOULD LIKE TO FEATURE ON THE KZN HEALTH CHAT BULLETIN TO: healthchatbulletin@kznhealth.gov.za





