

HEALTHURSULLETIN

24- 28 FEBRUARY 2020

HEALTH GETS R229.7 bn SLICE IN THE 2020/21 BUDGET POLICY STATEMENT



Finance Minister Mr Tito Mboweni tabled his budget policy statement for the 2020/21 financial year in parliament this week.

HERE ARE A FEW EXTRACTS FROM THE FINANCE MINISTER'S BUDGET SPEECH:

"The largest spending areas will be learning and culture, which receives R396 billion followed by health R230 billion, and social development with R310 billion."

"In line with Department of Health policy, we will start taxing heated tobacco products, for example hubbly bubbly. The rate will be set at 75 per cent of the rate of cigarettes. Electronic cigarettes, or so-called vapes, will be taxed from 2021."

- "R80 increase for the old age, disability and care dependency grants to R1860 per month.
- R80 increase in the war veterans grant to R1880
- R40 increase for the foster care grant to R1040 per month
- Child support grant will increase by R20 to R445 per month"

"We are moving forward with reforms to the procurement system with a focus on value for money and maximising the quality and quantity of services. Cabinet approved the publication of a new Public Procurement Bill."

"We are already acting on fruitless and wasteful expenditure. Last year, this House amended the Public Audit Act to empower the Auditor General to:

- Refer matters to a public body for investigation and prosecution
- Take binding remedial actions
- Recover money directly from the responsible culprits "

"The NPA, Special Investigating Unit and Directorate for Priority Crime Investigation get an additional R2.4 billion in this Budget. This will enable the appointment of approximately 800 investigators and 277 prosecutors who will assist with, among other things, the clearing the backlog of cases such as those emanating from the Zondo commission"

"Government will do "whatever it takes" to ensure a stable electricity supply. As I said, it is our number one task. We have allocated R230 billion over ten years to achieve the restructuring of the electricity sectorIt will shortly be possible for municipalities in financially good standing to purchase electricity from independent power producers."

"The employer has tabled an agenda item on the management of the public service wage bill at the Public Service Coordinating Bargaining Council, the focus is to discuss containment of costs in the final phase of implementation of the current wage agreement. We aim to save R37.8 billion in the next financial year.

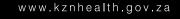
There is more than one way in which this goal can be achieved. Organised labour understands where we are. They have made constructive proposals on a range of issues."







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BUDGET2020/21 BUDGET EXPENDITURE









Tel: (012) 315 5757 www.treasury.gov.za



R1.95 TRILLION



R1.15 TRILLION

SOCIAL SPENDING



Economic regulation and infrastructure	R105.3 bn	
Industrialisation and exports	R39.0 bn	
Agriculture and rural development	R28.3 bn	
Job creation and labour affairs	R22.4 bn	
Innovation, science and technology	R16.4 bn	

Basic education	R248.6 bn
University transfers	R44.8 bn
National Student Financial Aid Scheme	R37.1 bn
Skills development levy institutions	R21.0 bn
Education administration	R17.8 bn
Technical & vocational education and training	R13.4 bn





Police services	R106.1 bn
Defence and state security	R51.4 bn
Law courts and prisons	R49.6 bn
Home affairs	R9.9 bn

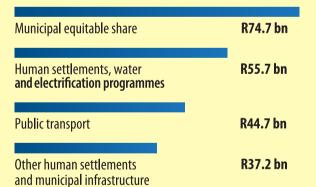
District health services	R102.0 bn
Central hospital services	R44.7 bn
Provincial hospital services	R37.6 bn
Other health services	R35.4 bn
Facilities management and maintenance	R10.1 bn





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SFR	VICE	?	

Public administration and fiscal affairs	R47.3 bn
Executive and legislative organs	R14.6 bn
External affairs	R8.2 bn



R	212.3 bn
	MMUNITY LOPMENT



R229.3 bn

DEBT-SERVICE COSTS

Social security funds	R88.0 bn
Old-age grant	R83.1 bn
Child-support grant	R69.8 bn
Other grants	R35.0 bn
Provincial social development	R23.3 bn

Policy oversight and grant administration









R10.0 bn

Coronavirus

- The Novel Coronavirus (2019-nCoV) is a new coronavirus strain identified in China, which has caused cases of severe pneumonia in China.
- Coronavirus is a family of viruses known to cause illnesses ranging from common cold to pneumonia
- Cases of 2019nCoV have been exported to other cities and countries

Typical Symptoms include cough, runny nose, fever and shortness of breath

MONITOR YOUR **HEALTH** CLOSELY



All travelers to monitor your health closely for 2 weeks upon returning to South Africa



If you have fever, cough or runny nose, wear a mask and seek medical attention promptly



Call the clinic ahead of your visit and inform the doctor of your symptoms and travel history

PRECAUTIONS TO TAKE



Avoid contact with live animals, poultry and birds



Avoid consumption of raw and undercooked meat



Avoid crowded places and around people who are unwell



Observe good personal hygiene at all times



Wash hands trequently with soap



Cover your mouth with a tissue paper when coughing or sneezing



See a doctor if you are unwell

REMAIN VIGILANT AND ADOPT GOOD PERSONAL HYGIENE PRACTICES

The situation is evolving, check updates on www.health.gov.za and www.nicd.ac.za







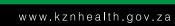








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SOCIAL MEDIA AND ETHICS

KNOW HOW TO STRIKE A BALANCE



The popularity of social media has grown rapidly and healthcare practitioners, employees and even healthcare students commonly utilise social media platforms.

The ethical and professional implications including their benefits and hazards need to be considered. Concerns include the blurring of boundaries between an individual's public and professional lives.

Maintaining privacy and confidentiality of patient's information, damaging the public image of the medical profession and inter-professional relationships. The same rules that apply to conduct in the real world should also apply in cyber space. Harmful and derogatory posts on social media can result in a defamation suit

The use of social media platforms is such a common occurrence in both our private and professional lives but do we ever take a moment to consider what we are posting on social media and the possible ramifications of such. If a healthcare employee uses social media in their private capacity, their online activities can still bring the profession into disrepute.

The media and our stakeholders routinely monitor online stories and information posted online may be disseminated whether intended to or not and at times can be taken out of context.

A commitment to Ethics is also about doing what is good for others and not only for oneself and the empathy and consequent behaviour towards others. So we should practice ethical social media communication as one of the main challenges emerging in society today is the posting of insensitive social statements, revealing of dramatic and/sensitive information from within our work environment.

Some social media activities to avoid in the healthcare environment are:

- Taking photographs during surgery and other forms of care and treatment:
- Making unsubstantiated negative comments
- Making informal and derogatory comments about patients and even videoing our patients with the intention of posting online;

Making comments that can be perceived as racist, sexist, homophobic or otherwise prejudiced even if meant in jest

Another consideration is that one of the most important tools used by recruitment agencies and most recently Government is to screen a potential employee social media accounts and profile.

An Advisory Circular was issued by the DPSA wherein the Minister stated that "In order for us to recruit individuals that meet the prescripts, we need to employ all tools and methodologies of screening including the use of the internet and social media in particular".

Recent Global Research as indicated that the use of internet and social media has helped organisations both in identifying exceptional talent and in other instances to avoid negligent hiring. This tool is an International trend in recruitment and, as a Country, we should embrace such practices to enhance the Professionalization of the Public Service.

Emerging technology will continue to change the landscape of social media and social networking so we can only encourage each other to use the social platforms available to us in a responsible, mature, professional and ethical manner.













KNOW YOUR HEALTH PROFESSIONS: THE FERTILITY SPECIALIST

A fertility specialist is a medical doctor who has taken their training further in order to specialize in fertility-related conditions, treatments, and medical procedures.

A fertility specialist has spent years studying the reproductive system, various diseases and conditions which can affect fertility, and the available treatments and procedures designed to assist with fertility.

FERTILITY SPECIALISTS ARE PRIMARILY TRAINED TO:

- Thoroughly evaluate a patient to determine the cause of infertility, usually ordering numerous laboratory and other tests.
- Evaluate test results to determine whether a patient is in the normal range.
- Utilize test results to recommend fertility or other treatments on a case-by-case basis - from simple treatments like medications to increase hormones in women to in-vitro fertilization.
- Monitor treatment progress in each case and adjust the treatment plan when needed.





REQUIREMENTS

At the secondary level of education, generally a pupil must perform highly in life science, physical sciences and mathematics.

QUALIFICATIONS

At tertiary, a student must complete a 6-7-year general medicine degree to become a general practitioner (GP). After obtaining the degree, the student is required to undergo an internship and community placement. After specializing in gynaecology and/or obstetrics, the student can specialize further.

RECOMMENDED QUALITIES:

- Outstanding communication and listening skills.
- Excellent attention to detail fertility medicine is especially demanding of this skill as there are so many variables and potential solutions and problems.
- Compassion and empathy women who are trying to become pregnant are often very vulnerable and desperate to have a child and a fertility specialist needs to empathize with their struggle.
- Patience though fertility medicine is extremely helpful in many cases, it often takes a long time to conceive and give birth, and only about half of all women seeking fertility treatments are able to experience a live birth.
- Thick Skin though fertility specialists try their best to assist their patients, success is not always the end result. Many times, women blame their specialist out of frustration and sadness, and a fertility specialist needs to be able to roll with the punches.





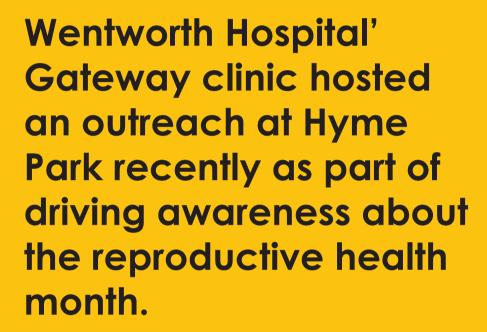
KZN Department of Health



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WENTWORTH HOSPITAL

TOOK HEALTH SERVICES TO HYME PARK



The event was mainly focused at sharing key information about pregnancy awareness week, STI, condom awareness week which are all celebrated in February. The clinic team provided health services such

as eye testing, screening for TB, HIV, and pap smears and other diseases. The community was also educated on the importance of knowing their HIV status and following a healthy life style programme.













CONSTIPATION IS A COMMON BATTLE

Constipation is a common battle that we sometimes experience in our day to day lives.

Constipation refers to bowel movements that are infrequent, and the stool (faeces) is often hard, dry and difficult to pass. There are many things that that can trigger constipation like being out of your usual routine, inactivity, having low fibre intake and not drinking enough water.

How do you know that you are constipated?

- Passing fewer than three stools a week
- Having lumpy or hard stools
- Straining to have bowel movements
- Feeling a blockage in your rectum that prevents bowel movements
- Feeling you can't completely empty the stool from your rectum
- Needing help to empty your rectum, such as using your hands to press on your abdomen and using a finger to remove stool from your rectum.

Sometimes we experience these symptoms and think they are normal, we do not realize that they can possibly cause threat to your physical well-being.

What are the most common dangers of constipation?

• Swollen veins in your anus (hemorrhoids) - Straining to have a bowel movement may cause swelling in the veins in and around your anus.

- Torn skin in your anus (anal fissure) - A large or hard stool can cause tiny tears in the anus.
- Stool that can't be expelled (fecal impaction) Chronic constipation may cause an accumulation of hardened stool that gets stuck in your intestines.
- Intestine that protrudes from the anus (rectal prolapse) -Straining to have a bowel movement can cause a small amount of the rectum to stretch and protrude from the anus.

HERE IS A LIST OF FOODS THAT CAN HELP YOU RELIEVE CONSTIPATION

Water

Dehydration is a common cause of constipation, and drinking plenty of water can often help to ease or resolve the symptoms.

Yoghurt

Many dairy products, including yogurt and kefir, contain microorganisms known as probiotics. Probiotics are often called "good" bacteria, and they may help to improve gut health and soften stools.

Pulses

Most beans, lentils, chickpeas, and peas are very high in fibre, which is a nutrient that promotes good digestion and reduces constipation.

Apples and Pears

Apples and pears contain several compounds that improve digestion, including fiber, sorbitol, and fructose. These fruits also contain high levels of water, which can help to ease digestion and prevent constipation.

Whole wheat breads, cereals, and pastas

Whole wheat products are an excellent source of insoluble fibre, which adds weight to stools and speeds up the flow of materials through the intestines.







KZN Department of Health









EKHOSOMBENI LAMAJITA

UNGQONGQOSHE WEZEMPILO KWAZULU-NATAL
UNKK NOMAGUGU SIMELANE-ZULU

UMEMA WONKE AMAJITA ASESIKHALENI

(EMPANGENI) NAMAPHETHELO UKUBA AZOKWETHAMELA UHLELO OLUSHA OLUBIZWA NGEKHOSOMBE LAMAJITA.

LAPHA KUZOBE KUBHUNGWA NGEZINDABA EZIBALULEKILE ZOKUKHULISWA KWEZINSIZWA UKUZE ZIGWEME IZIDAKAMIZWA, UPHUZO OLUDAKAYO, KANYE NOKUHLUKUNYEZWA KWABESIFAZANE NABANTWANA, KUZOPHINDE KUBHUNGWE NANGEZEMPILO.



IMINININGWANE YALOMCIMBI IMI KANJE

USUKU: UMGQIBELO, 29 FEBRUARY 2020

INDAWO: EMGWAQWENI OPHAMBI KWEHLANGANANI HALL

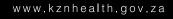
ISIKHATHI: 09H00

Amajita aseSikhaleni mawaphume ngobuningi bawo eze eKhoneni lamajita!!!
Imbila yasela umsila ngokuyalezela!!!!









KWAZULU-NATAL.

STATE OF THE PROVINCE ADDRESS

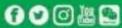


KwaZulu-Natal Premier Mr Sihle Zikalala will deliver his State of the Province address at the sitting of the legislature Premier Zikalala will use the opportunity to report back to the people of KwaZulu-Natal on progress made in the implementation of plans to grow KwaZulu-Natal together.

IUUEINEN

ROYAL SHOW GROUNDS PIETERMARITZBURG

#GrowKZN • #KZNSOPA2020









MR SIHLE ZIKALALA PREMIER OF KWAZULU-NATAL





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WHO SAID WHAT THIS WEEK



"We have activated the emergency operating centers and high alert for #Coronavirus. Those that are coming from a high risk area are screened further"

Minister of Health Dr Zweli Mkhize

The Minister of Health, Dr Zwelini Mkhize, has noted the media reports flowing from the media briefing by the Commission for Gender Equality. The Minister has immediately contacted the Commissioner, Ms Mathebula to request a full copy of the report and an urgent meeting to thoroughly discuss its contents, findings and recommendations, the ministry said in a brief statement on Monday.

The Ministry of Health

"The president has expressed sincere gratitude to the Chinese Government and people for their assistance and support and reiterated South Africa's confidence in china's ability to control the outbreak of the virus, as evidenced by amongst others, the commendable progress made to date."

The Presidency of the Republic of South Africa

"NHI means every South African will have a right to access health care services free of charge #NHINOW"

National Heal Insurance







KZN Department of Health



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INVENTIONS THAT SHAPED THE WORLD:



Willem J. Kolff, M.D., 97, inventor of the first artificial organ to reliably sustain life, died of congestive heart failure on February 11, 2009, in Newtown Square, PA. Dr. Kolff is widely considered the "father of artificial organs."

His rotating drum artificial kidney was initially reported in 1943 and, for the first time, offered an effective intervention for the treatment of acute renal failure.1 It was in The Netherlands during World War II at the height of German occupation that he began work on the first dialysis machine.

He had moved to a small hospital in Kampen, on the Zuider Zee, to escape the Nazi sympathizers who had been put in charge of his hospital at Groningen. There, conducting bench experiments with sausage casing (Visking Casing Corporation), saline, and urea, he saw that urea moved down its concentration gradient and equilibrated across this cellulosic membrane.

He then cobbled together his rotating drum artificial kidney from miscellaneous available parts including bed slats, a bathtub, and sundry tubing connectors of considerable sophistication.

It is the only artificial kidney where uremic blood is circulated through tubing that itself is moving through a stationary no circulating dialysis bath.

The membrane area employed was 2 to 2.5 square meters, depending on the spacing of the spiral windings of the cellulosic tubing around the drum.

Priming the blood path required 1.5-2.0 units of blood from the blood bank. There was no formal blood pump—the rotation of the drum along with gravity

moved the blood out of the patient and then back. As such, achievement of ultrafiltration required high concentrations of bath glucose, analogous to peritoneal dialysis. Only the lower 25% of the rotating drum was immersed in the dialysis fluid that resided in the underlying bathtub.

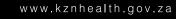
Although others had explored intellectually and in bench experiments,2,3 the concept of using a semipermeable membrane to remove uremic toxins, it was Kolff who reduced these observations to clinical practice.





KZN Department of Health







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