



HEALTH

KwaZulu-Natal

EGUM NEWS

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T B AWARENESS CAMPAIGN AT NGQUMARHENI

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The PR wishes everyone a Merry Christmas and Happy New Year. May this festive season brings joy and happiness to you.

E G Usher Memorial Hospital hosted the TB Awareness Campaign at Ngqumarheni location in UMzimkhulu. This was on the 10th of October of 2008. That was an initiation from the District and Sisonke Health District. The aim was to educate the community of Ngqumarheni about TB and its relationship with HIV. Mrs Osei from the District delivered the key note of the day. She emphasized on the symptoms of TB and precautions to be taken to prevent TB. The event was honored by the presence of Inkosi Sethuse of Ngqumarheni area. He gave us a welcome note and pass his happiness about the department and pleaded us that we should continue to visit his people because he is also concern about diseases.

The entertainment was plenty in a form of indlamu, stage plays and poet. Home Affairs and Social development provided the service at the event. Our clinics PHC and Greater Kokstad rendered services like VCT and counseling. People benefited in this initiative and we hope to continue and educate our people about diseases.



Inkosi Sethuse was amongst the VIPs at Ngqumarheni during T B Awareness Campaign.

PICTURES OF TB AWARENESS



Students of Ngqumarheni doing the traditional dance.



Local Traditional Dance group entertaining the crowd



Mrs Mazwana (Assistant Nursing Manager) making her speech.



District T.B Coordinator Mrs Osei singing an encouraging song to people living with T.B.

Ngqumarheni community came out in numbers to learn about T.B, how it can be prevented and cured.



IXOPO JOINT WALK

The staff of E.G. Usher Memorial Hospital took part in the Ixopo Walk which took place on the 21 November 2008 . The walk intended to encourage employees to stay healthy. This was an exciting moment for the employees as they took the day off.

LET THE PHOTOS BE THE WITNESS OF THAT DAY



FRANKLIN RESIDENTS GOT THE GOOD NEWS



Hospital team, D.M, GKM Speaker Mr Khutshwa visited the site where the clinic will be built.

The residents of Franklin got the good news last month when it was announced that Friends of Ireland donated the clinic to the residents.

The commencement of the construction is believed to be November 2008 and they promised that by November 2009 the clinic should be up and running. Those news were wel-

comed by our District Manager Mrs Radebe and the Hospital Management team. The above team was led by GKM Speaker Mr Khutshwa to the site where the clinic will be built. The clinic will be comprised of Consultation Rooms, waiting area, staff rest room. The plan was brought to our attention and management was impressed.

The Franklin residents are benefiting a lot from FOI. Beside the clinic there are other projects that are taking place like pre-school and many others. Mr Khutshwa promised more development in the area and even said that they are having enough land for development. Still on the clinic issue the hospital manager Ms Mate was delighted by the news because she felt it will

ease the nurses job because of large number of people going to the hospital for service.

Mrs Redebe (DM) even suggested that the caravan will be installed to temporarily render the services to the community. Mr Khutshwa ensured that there will be security for that and he welcomed that because it assist in fighting diseases in the area.



Mrs Radebe (D.M.) discussing the clinic with an Irish man.



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While it is true that most natural, herbal-based remedies do not pose a significant threat to individuals that take part in them, there are some that actually do have the potential to create side effects that are uncomfortable and may pose a threat to the individual that is experiencing them. So when ever I come across an advert that proposes that “because it is natural, it is safe”, in my mind I usually state “Why then do you not have infusion from foxglove leaves and see how safe it is”. Ancient and sometimes modern man has made poisons and toxins from “natural” plants, herbs and substances.

Generally the bigger concern is the interactions that may occur between “natural” products being taken and conventional medicines. Too many times patients fail to disclose that they are taking traditional or natural medicines, when asked to do so.

This may have consequences that may be mild, self limiting all the way to consequences that may result in loss of life. Reasons for none disclosure are beyond the scope of this article, but sometime rest on the premise because what I take is natural it is safe.

In this day and age of taking a handful of medicines to combat against

IS NATURAL SAFE?

HIV/AIDS and TB many of which if too low a dose causes a resistance to build up, and in too high a dose can cause severe toxic reactions, it becomes increasingly important to know what else is being taken.

The focus is not on which is better, Natural or Medical, old versus new, Western culture versus African or Eastern culture. The focus is on what would benefit the patient. So there are many natural products that can be taken together with medicines, but there are also few which may have disastrous consequences.

In an environment of HIV/AIDS, TB and Depression natural products like Grape fruit juice, garlic, African potato, St. Johns Wort, Gensing and many others may interact with medicines being taken to either render them ineffective or increase their toxic potential.

A lot of this is because of Pharmacologic actions on the body where by enzymes involved in the breakdown of medicine or either stimulated or depressed. Sometimes excretion is enhanced or slowed down by the effect of Natural products with resultant consequences.

The take home message: If more than one product is being taken, natural or

not, there is a potential for an interaction.....sometimes beneficial.....sometimes not. But don't blame the doctor if you experience a side effect as a result of non-disclosure.

(By Mr Shawn Bull)



E G and Usher wishes to pass their heart felt condolences to the family, staff and friends of Ms Nokuthula Debbie Nogabu who passed away on the 2nd of December 2008.

MAY HER SOUL REST IN PEACE

“The focus is not on which is better, Natural or Medical, old versus new, Western culture versus African or Eastern culture. The focus is on what would benefit the patient”.

FINANCIAL MANAGEMENT

The Province (and Health Department) is in an uproar because there is no money.

We can point the fingers and join in the feeding frenzy that says woe to us, or we can take steps to rectify matter.

The first step is to get our attitudes right, and along with it to see things accurately in the right perspective.

Tackling perspective first, we need to put to rest the blind side that to prevail in all public sectors that there is an unlimited supply of money. The truth of the matter is that we only have so much and no more; think of it along the lines that your institution has been allocated a salary. How much can you splash out of your salary? Sure you can borrow and borrow, but some where along the line there is cut off point where you just have no money even for necessities if there has been poor financial management. Institutions are now on the same boat. A budget is allocated and that is all that is available (except that in the past Province or National has always bailed us out with overspending.)

Just what if National says from now all the budget is going to be given directly to the hospital, not one cent more. If you see that 3 months

into the year that there is reasonable chance based on current spending that from December onwards you will not be getting a salary unless drastic measures are taken in controlling expenditure, will you still have the same attitude towards spending?

If we are honest there is wastage in our institutions, mostly because of lack of knowledge or perspective, and sometimes just due to carelessness. How often does some-one grab a sheet of paper from the printer to write something on instead of grabbing a scrap piece of paper? For that matter how much scrap paper are we throwing away instead of recycling? Water and lights left on, oxygen not turned off etc. Toner cartridges are thrown away instead of being recycled. Sure this is a small fry against a budget of millions, but it serves to engender an attitude of thriftiness and cost effective spending.

The attitude changes from one of lets purchase because we can to one of do we really need it?

Will it be a cost effective investment?

Once this ethos is imbibed by all our staff we will be on our way to financial management. Then training on financial management will not only be rewarding but we will get bonus inter-

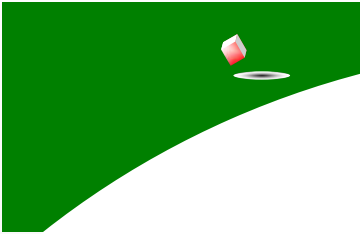
est in top of it. When we begun to see that our spending habits may be robbing our community of essential service delivery, we will not easily stand by when proposals are put forward that are both wasteful and cost inefficient.

So it remains only to be seen do your actions demonstrate a belief that funding is in- exhaustible? Does your attitude reflect self interest at cost of service delivery to our communities?

Perhaps there is a glimmer of hope that crosses all barriers be they racial, educational, societal that allows for unity of purpose in a mindset that says "What can I do to save money where possible, so that more can be used cost effectively for our communities?"

(**By Shawn Bull, Pharmacy Manager**)

“Sure you can borrow and borrow, but some where along the line there is cut off point where you just have no money even for necessities if there has been poor financial management”



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Usher Memorial

We are on the web www.kznhealth.gov.za/egusherhospital.htm

VISION

We strive to deliver Accessible, optimal and Holistic Health Care to all who access our services

MISSION

To work as an integrated health service to provide comprehensive care to all by adhering to Batho Pele Principles

CORE VALUES

Clean, healthy, safe hospital environmental duty conscience.

Ongoing training.

Pro-active individuals

Initiative support group

Commitment to quality improvement

Respect client, clean,

EDITORIAL NOTES



MR N BEJE
PUBLIC RELATIONS IN-SERVICE TRAINEE

This has come to the end of my In-service Training which took place on the 01 July 2008.

It has been one of the greatest experiences ever. I enjoyed every moment of it. I was surrounded by the supportive and caring people(**the Information Office Staff**). I can not forget to thank **MR NCWANE** for his supervision, he exposed me to many things related to Public Relations. He was always supportive

and I will use his experience in the future.

It was such a great honor for me to work at E. G & Usher Memorial Hospital, I'm sure I will miss its staff.

The people of Kokstad which I served made me to be a better person.

Its so sad to acknowledge the fact that I will no longer be part of this publication

again. But what is important is that I will use the experience I obtained as I'm going to the field next year.

