



**HEALTH**  
KwaZulu-Natal

**KING GEORGE V HOSPITAL**  
PO DORMERTON, 4015  
R.D. NAIDU DRIVE, SYDENHAM, DURBAN  
Tel: 031 242 6000: Fax: 031 2099586

<http://www.kznhealth.gov.za/kinggeorgevhospital.htm>  
thami.chizama@kznhealth.gov.za

Issue 5

**Ezase Dormerton**

July & August 2009

*Special points of interest:*

- Identity document
- Pension card
- Medical aid card next of kin contact details
- Referral letter
- Under 18 must be accompanied by parent .
- all patient are requested to pay fees on admission.
- Visiting hours
- 12H00 14H00
- 17H00—19H00

**Almost done our state of the art hospital**



King George V is a combined services hospital located in the Ethekwini Metropolitan area, specifically the Sydenham suburb. Prior to the commencement of the revitalisation of the project it had 901beds, 771 on site TB beds (129 were housed elsewhere) and 130 psychiatric beds. The hospital serves a catchments population of approximately 1.8 million people. It is intended that King George Hospital will serve as a district hospital as well as a specialised psychiatric hospital and a Specialist TB referral hospital for the entire KwaZulu-Natal population. King George V will provide essential specialised treatment for all patients in the

province presenting with MDR TB. It also includes an ARV clinic service for the area.

**STRATEGIC PLAN – KWAZULU-NATAL**

The **main design principles** adopted by the Province are the following:

- Quality of Care
- Equity
- Cost effectiveness
- Relevance of Primary Health Care Services to the total population of the Province, both in the Metro Municipality and in the ten District Municipalities

**The Priorities Of The Department Are:**

To provide the comprehensive package of health services throughout the Province at all levels of the facility-based primary health care system.

To ensure that PHC Clinics are the entry point for patients into the provincial public health system.

To ensure that patients are provided with compassionate and the appropriate level of health care in line with the package of service designated to Institutions.

To ensure that Institutions are .

**Level 1 Hospital**

The new Level 1 hospi-

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optimally empowered through enabling policies, delegations, integrated plans and systems to deliver high quality health care services as well as to effectively measure institutional performance in accomplishing the set Strategic Targets and Objectives.

To establish a comprehensive synchronous **telemedicine** program as a vehicle by which access to healthcare services for all can be improved through supporting healthcare professionals in rural areas and maximising the use of scarce skills.

The Provincial Health Services Transformation Plan has endeavoured to make a positive change in terms of providing norms to comply with legislative imperatives and to address the needs of mental health patients regarding the provisioning of compassionate, effective and efficient services as close as possible to the area of residence. Existing bed numbers fall well below the international norm.

Provision is made in the Health Services Transformation Plan for two categories of Mental Health Services, namely hospital based mental health services and community based mental health services:

King George V will provide specialist psychiatric services within the Ethekwini Region. At least four 48-hour observation beds have to be provided at the King George V District Hospital.

#### **District Hospital**

The new district hospital will have a 400 bed district hospital serving community Health Centres and clinics in the Berea North and South Area, Umgeni south, Westville, Reservoir Hills, Springfield flats, Duikerfontein, Newlands East,

Newlands West and the lower part of KwaMashu. It will refer to King Edward VIII Regional hospital, with tertiary referrals to Inkosi Albert Luthuli.

As it will be a District Hospital Category A, the health care facility will provide: Diagnostic, curative, surgical (under general anaesthesia), accident and emergency in-patient health care services falling within the scope of practice of a General Practitioner, with a standard bed and theatre provision, TB beds for first admissions and TB acute patients

#### **TB Facilities – Tertiary Services**

King George V will provide essential **specialised treatment (Tertiary Services)** for all patients in the province presenting with MDR TB. Patients diagnosed with MDR TB will be referred to King George V to initiate treatment, stabilise the condition of the patients and then decant patients to step-down MDR Units for long-term treatment and step-down services. 80 of the beds will be allocated to TB surgical patients – specifically for orthopaedic (Mainly Spinal) and Thoracic surgery.

The **400 bed** TB Hospital will receive referrals from the following Provincial subsidized specialised hospitals as well as all KwaZulu-Natal Provincial Hospitals:

Don McKenzie, Charles James and Fosa TB Hospitals, in addition it will be an Academic Centre for the Medical School for training and research in TB treatment. It will be a resource centre for the total KwaZulu-Natal for multi drug resistant TB.

#### **ARV Clinics**

Initially the provision of ARV was intended for a service at PHC level but due to PHC Clin-

ics not meeting the requirements, the service was initiated at Hospitals. There are currently 118 accredited ARV sites. This includes King George V Hospital which had 191 registered ARV patients in June 2007, and will now provide a service within the TB Outpatients complex.

#### **Psychiatric Facility**

King George V is classified as a **Specialised Psychiatric Hospital** with **130** beds (inclusive of 30 closed ward beds) which is defined as a facility providing on referral specialised in-patient care to persons with severe psychiatric conditions for the Durban Metro area. The Psychiatric hospital will receive referrals of acute psychiatric patients from the Durban Metro area. Conditions include non-affective psychosis, bipolar affective disorders, major depression, anxiety disorders etc. Patients are normally provided with long to permanent care.

Patients requiring rehabilitation will be referred to Clairwood hospital

A **telemedicine facility** will be set up at the hospital to be utilised by both Psychiatric and TB disciplines.

#### **KEY OBJECTIVES MET BY THIS INITIATIVE:**

Provision of additional district hospital beds in the Region. It will strengthen District health service, and ensure treatment at the appropriate level of care. In addition it will strengthen the referral

(XDR) strains of TB.  
Provision of equitable health care facilities  
Provision of a referral hospital for acute psychiatry for the Durban Metropolitan area. It improves the referral network of psychiatric care and improves access to psychiatric care. These patients previously were admitted at Town Hill 85 km away.  
This provision is aligned to the strategic plan for health care delivery in the Ethekwini Metropolitan Area.

### **PROJECT PROGRESS**

#### **Enabling Work Completed:**

As King George V is a fully functional TB and Psychiatric hospital it has been necessary to decant patients and services to other sites to allow for the demolition of existing buildings. This has affected the surgical services of the hospital which were decanted to Wentworth Hospital as well as the Administrative Department and stores which are housed in Park homes at King George V hospital. We have provided a small budget in the 2009/2010 financial year to complete the outstanding enabling work.

Staff, patients and the relevant facilities were decanted in the 2008/2009 financial year. The following facilities are now at Wentworth Hospital to accommodate services and patients from King George V hospital:

- Ward A 1
- Wards B 1 and B3
- ICU facilities with 6 beds
- X – Ray
- OPD with 6 consulting rooms
- Admissions with cashier
- Waiting area internal and external
- Patient toilets
- Staff restroom / kitchen / toilets
- Pharmacy
- Theatre unit
- CSSD

Therapy section

#### **Services that have been temporarily moved within the King George V site:**

Pharmacy has moved to the ground floor of the TB Multi-storey  
X-ray occupies one of the star wards  
Pharmacy Outpatients occupies part of the star wards  
Administration occupies the old Revitalisation offices at KGV  
Human Resources and laboratory services have moved into the park homes  
Stores are occupying one of the old buildings adjacent to the park homes

#### **The moving of these departments has incurred additional unexpected expenses:**

New cabling has had to be laid for data, telephone lines and electrical power  
Toilets have had to be upgraded and existing buildings made habitable  
Paving has had to be laid to connect to the park homes, the car park and the administration offices. These pathways will have to have covered walkways.  
Provision for parking is still required.  
A shuttle service has had to be put in place to carry staff to and from King George V to Wentworth Hospital.

Decanting the patients went fairly smoothly due to the exceptionally helpful staff from King George V and Wentworth Hospital who participated in making the move as smooth and as quick, as possible. They worked overtime so that the period without services was minimised.

#### **KING GEORGE V SITE : December 2008 THE ACHIEVEMENTS TO**

#### **DATE:**

#### **Projects Completed Prior to 2008**

New Psychiatric closed unit  
Dental facility  
TB Multi storey facility  
Bulk earthworks Phases A & Reroute services A

#### **Projects Completed in 2008**

New kitchen / Dinning room  
Star Wards  
Upgrade psychiatric facilities: Phase 1  
Enabling works at Wentworth and temporary admin facilities at KGV

#### **Projects Under Construction in the 2009/2010 Financial Year**

Reroute Services: Phase B  
Level 1 hospital

TB Surgical & Mortuary  
Bulk Earthworks C

#### **Projects To Be Completed in the 2009/2010 Financial Year**

Level 1 Hospital  
TB Surgical & mortuary  
Bulk Earthworks C

#### **Projects To Commence Construction in the 2009/2010 Financial Year**

New TB complex  
Crèche  
Covered Walkways: Phase 1  
AC to Multi storey building  
Landscaping Phase 1  
New Workshop & Laundry  
TB Surgical OPD

#### **Projects To Commence Construction in 2010/2011 Financial Year**

TB Surgical OPD

**Projects To Commence Construction in 2010/2011 Financial Year**

Landscaping Phase 2  
 Psychiatric Upgrade: Phase 2  
 TB Admin  
 Upgrade Psychiatric Closed Unit  
 Covered Walkways Phase 2

**CONSTRUCTION PROGRAMME**

A detailed construction programme for 2009/10 is contained as Annexure A.  
 See Gantt chart attached.

The King George V Hospital revitalization project commenced in the 2002/2003 financial year and is due for completion in the 2010/2011 financial year.

**BUDGETS :**

**Lifetime projected cost of the project is as per the Table below**

Total Infrastructure Cost	R 780,178,509
Total Health Technology Cost	R 150,800,000
Total OD cost	R 50,040,000
Total QA cost	R 9,700,000
<b>Overall Total</b>	<b>R 990,718,509</b>

**Expenditure, lifetime to date (31 March 2009): \*\*\***

Infrastructure	R
Health Technology	R
Organisational Development	R
Quality Assurance	R 0.00
<b>Overall Total</b>	<b>R</b>

\*\*\*: Note – figures for above table currently being sourced

The budget requested for 2009/10 is as per the table below:

**Budget per component for 2009/10**

Infrastructure	<b>R 122,924,737 ****</b>
Health Technology	R 55,800,000
Organisational Development	R 6,670,000
Quality Assurance	R 500,000
<b>Total Budget 2009/10</b>	<b>R 185,895,037***</b>

**\*\*\*\* R122,924,737 – this amount has changed to approx R 92,500,000**

**\*\*\* R185,865,037 – this amount has changed to approx R 155,470,300**

i. The Status Of The Project:



**CONSTRUCTION PROGRAMME**

*A detailed construction programme for 2009/10 is contained as Annexure A.  
See Gantt chart attached.*

*The King George V Hospital revitalization project commenced in the 2002/2003 financial year and is due for completion in the 2010/2011 financial year.*



Pharmacy



Admission



Each ward accommodate 32 & cubicle 4 people



Nursing station



Ablution facility for disables people



DISTTRICT HOSPITAL



NEW STAR SHAPE MDR TB WARD



DISTTRICT HOSPITAL



# Message from Hospital C.E.O:

## Dr. K. Naidu



Over six months has passed since I moved from Greys Hospital in Pietermaritzburg to King George V Hospital in Durban. I wish to express my appreciation for the warm reception I received from all the staff. It felt like I was coming home after a very long absence. It was good to see old friends as well as meet new ones. The Strategic and Operational Planning Workshop held from 06-08/04/2009 gave me an opportunity to interact with some of you and help lay the foundation to commitment to work ethic based on team work..

We are living in exciting times as those of us who are working at KGVH can consider ourselves privileged to be part of the revitalization process that this Institution is presently undergoing. The KGVH revitalization project is scheduled for completion in the 2010/11 financial year.

However, there are many challenges ahead that need to be addressed some of which I will highlight.

Our active participation in the Government's programme of action viz the 10 Point Plan (was distributed under cover of internal circular 35/09). To address the problems in our Health system.

Return of Orthopaedic Spinal and Thoracic Surgical services from Wentworth Hospital to KGVH.

Commissioning of additional MDR/XDR beds (moving from the current 192 beds to the planned 320 beds)

Commissioning of additional Psychiatry beds (moving from the currently allocated 130 beds to the planned 229 beds)

Commissioning of the District Hospital

The hospital is functioning under severe budgetary constraints and the commissioning of new services will depend on the availability of additional resources (e.g. funding, equipment and human resources).

Despite all these challenges, I do believe that through our commitment, dedication and enthusiasm we will succeed provided we adequately resourced. I implore all of us to work together to improve service delivery at KGVH and to give meaning to the maxim "SAVE LIVES. MAKE HEALTH FACILITIES SERVE THE PEOPLE"

Finally, I would like to take this opportunity to congratulate our Honourable MEC for Health, Dr S.M. Dhlomo on his appointment as well as Dr S.M. Zungu on her appointment as the Head of Department.

Aristotle - "In search of excellence there is no end"



# Meet our Senior Management



**DR. K. Naidu**  
**C.E.O**



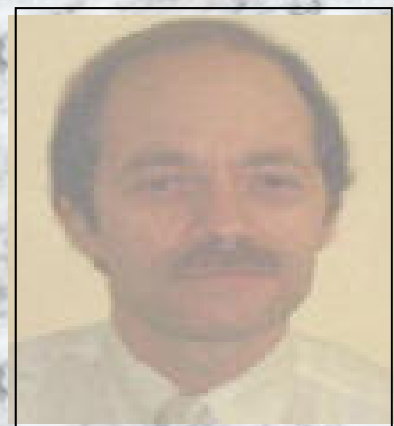
**Dr. S.B. Maharaj**  
**Medical Manager**



**Mrs N.F. Ngubane**  
**Nursing Manager**



**Mr. P.M Nhlonipho**  
**Human Recourse Manager**



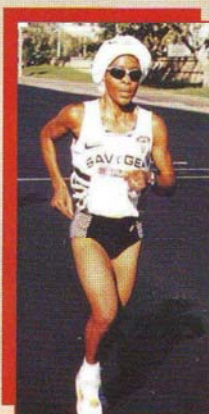
**Mr. M. Winter**  
**Finance & Systems Manager**

# Sports Page.

## UNGUMAKADE EBONA KWEZOKUGIJIMA

Inspiring the Less Fortunate to Greater Heights!

### Face to Face with **BLANCHE MOILA**



Blanche Moila is to road running what Penny Heyns is to swimming – a sporting icon with a heart of gold and a desire to reach out to young girls who have the potential to be great athletes. Blanche made South African sporting history in 1984 when she became the first black female athlete to win Springbok colours.

These days, Blanche who is Chief Professional Nurse in the Psychiatric Unit at King George Hospital, still finds time to run, while devoting time to train young female athletes and spreading the message of health & wellness to poor communities. She admits there are still many myths surrounding sportswomen in black communities.

Her response to questions posed makes for extremely motivational reading and she most certainly has proven that she is a remarkable woman and an inspiration to the youth.

**DSR:** It's nearly 25 years since you became a first black female athlete to achieve the original Springbok colours. What did that achievement mean for you?

Achieving Springbok colours was very special and very satisfying. I knew I had broken a barrier and accepted the colours with great responsibility. Image of black women succeeding against all odds, in a field that was dominated by melanin deficient athletes, could only motivate others to strive towards attaining the ultimate goal - national colours and to represent my country in an extremely conservative and traditional society.

We are a nation obsessed with sport, yet there seems to be so little glory in it for women. I hoped that achieving Springbok colours would open doors for others to follow.

**DSR:** You started running at a time when unity wasn't even a possibility. How did people respond to your success then as a black woman?

I have been fortunate in that I have always enjoyed tremendous support from folk in my community and the greater sporting fraternity with a lot of positive feedback, I can only remember one negative incident during an inter-provincial X country race, I heard one spectator shout at me to give way for "mesus-madam" referring to a melanin deficient athlete behind me. I just put my head down and responded by running even quicker and of course what a satisfying feeling it was to triumph in Pretoria.

However I have enjoyed great friendships with amazing athletes such as Sonja Laxton, Zola Budd, Viv Swanepoel, Colleen de Reuck, Tanya Peckam, Grace de Oliveira and Helen Lucre to name a few.

It was also very humbling and heartwarming to hear ministers such as Jeff Hadebe say while they were in Robin Island, they watched me on TV and the great support I was aware of the impact my successful running had on other people from all walks of life. To date people still stop to chat to me about how I inspired them.

**DSR:** What are your career highlights?

- Awarded Springbok Colours.
- Presented with the Sonja Laxton Sportsmanship Award
- Voted the Sportswomen of the Year in 1985 ahead of Zola Budd.
- Representing South Africa at the World Marathon Champs in Spain '93
- Representing South Africa at International Women's road relays in South Korea and Japan.
- Receiving the State Presidents Award for lifetime achievements in 2001
- Being the face of Comrades 2004, - My profile was used in marketing the Comrades marathon in that year.
- Silver medal at Comrades Marathon, 2005. I have run 7 Comrades in total.

Inspiring Women to Sporting Greatness!