



CEO's Comment

Once again we have come to the end of another year. We say goodbye to 2008 and its many challenges with the hope that 2009 will bring along relief and positive changes.

New wards were commissioned in 2008, a male and female MDR wards aptly named Good Hope and our male and female Step-Down Care wards. The two wards are functioning optimally, even though we experienced a few glitches at the beginning of the year due to limited resources. I am proud to note that the wards are now running optimally.

We wish to thank and acknowledge all our Community Services personnel who have worked so diligently throughout 2008. You will be missed, we wish you well for the future.

In the past, a mind set has prevailed within the Department of Health, which says that only line functions or those departments that are directly responsible for our core business are more important and should precede the support functions in terms of priority. We have been proved tragically wrong as the department struggles to conduct business in light of the financial constraints brought about by our large budget deficit from the previous year.

We have come to realise that one of the key tools in assisting

us to meet our organizational objectives is not only the technical skill and expertise of our doctors, nurses and paramedical staff but also the strength and integrity of our administrative systems.

Our finance department has made great strides this year in this regard by addressing challenges and gaps within the unit and this will go a long way, we hope, towards ensuring that our institution embodies the 8th Batho Pele principle which is Value for Money. During a year characterized by a severe lack of resources, including human; this has been a valuable lesson and one which has allowed the institution to meet the challenges it was faced with, head on. I would like to thank the entire Management team for your support and hard work during this period.

In the era of information Management, we in the third world, are just entering into the information age and are still trying to grapple with challenges brought about by new innovations in technology; which have resulted in rapid changes in how we store, use and share information. With the FIO at the helm the institu-

tion has charged full steam ahead into the future with all wards and departments becoming fully computerized and all staff continuing to receive training on informatics and computers. This has undoubtedly impacted on the quality of information the institution produces and will put management in a position to make quality decisions, timeously.

Many thanks and congratulations go to the Public Relations Officer in conjunction with Nursing Management and the hospital task team for our Quality day extravaganza and the many other fundraising efforts throughout the year, which made that very special day possible. To all those who won or were acknowledged that day for your efforts, we would like to congratulate you on your endeavours.

We continue in our striving for a better life for all our people by providing a quality service to the people of our little corner of the province. I wish to thank all of you who continue to give the best of yourselves and an unwavering commitment to quality service delivery. I wish to thank you all and salute you for the sterling work you have done to ensure a high quality service is provided to our people.

God Bless

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POINT OF INTEREST

“Have the determination of a mirror. It never loses its ability to reflect. Even if it is broken into thousand of pieces”

Unknown

MARCH— TB MONTH

In November 2006, the Chief of Kwa Ndwalane Community where the hospital is located gave a sizeable portion of land to the hospital. It didn't take long before contractors were seen on site. The land that used to be the community gardens went through major change, the new MDRTB ward with 40 beds was built. 20 beds are allocated for females and another 20 beds for males.

On, 01 April 2008 the hospital held a viewing day and the ward was opened officially. Chief Ndwalane, District officials, local hospitals and clinic Officials were among dignitaries of the day. Dr Van Andell the hospital TB doctor cut the ribbon and the first 9 patients were admitted, the ward became functional. In November both wards were full.

The Hospital is currently commencing TB treatment on 1500 patients annually. Most of these patients are referred to the surrounding clinics to complete their course of TB treatment. The problematic TB cases such as known defaulters, alcoholics or specific social problems are hospitalized. Bed occupancy rate is usually 100% unlike before when TB patients were mobile and were quickly discharged on continuous treatment. More intense nursing care is needed for these patients.

70 patients have been registered on MDR TB treatment in 2008 and 25 patients in 2009. 51 patients are outpatients. To date there have been a total of 40 discharges, 3 RHT's, and few patients awaiting admissions are currently bordered in Dunstan Farrell hospital.

The department faces difficulties such as patients suffer the effects of long hospitalization, therefore they frequently ask for pass out leave and at times they do not come back, this elevates defaulter rate. To try and assist patients to cope while in the hospital the ward has develop a Quality improvement project of involving patients in different activities such as recreation. Involvement of O.T. department has also served to be a good relaxing exercise.

It should be said that this ward is based in Murchison hospital but caters for the whole of Ugu Health District. There is presently only two Medical Officers running the normal TB and MDR program and they often work under great pressure

The staff in this department is a great therapy to bored patients, they are very enthusiastic, committed and patient oriented. They make the best team through out the hospital. They are actively involved in all hospital official and social activities. They never cease to amaze you. Miss Sdudla, Mr Personality and most princes and princesses are from this ward, not to mention 2008 Employee of the year, annual Infection Control floating trophy Also their Operational Manager was acknowledged last year as the best Team builder. One of their staff got the third position as a Batho Pele champion.



VACANT LAND



CONSTRUCTERS ON SITE



MDR WARD

MDR UNIT OFFICIAL LAUNCH



DR VAN ANDELL CUTTING THE RIBBON

As we might all have heard, 24 March was a World TB Day. KZN DOH commemorated this day at Ugu Health District in Murchison Area.

The MEC, Ugu District Mayor Cllr. S Cele and Hibiscus Mayor Cllr N Shusha, Chief Ndwalane and many dignitaries from Province and District witnessed the unveiling of MDRTB ward formally known as Good Hope Centre. This name was selected from several names that were submitted by members of staff. The chosen name was given by Pule Dandala.

After the MEC had unveiled the Good Hope Centre plaque she left for Murchison Gateway Clinic to also formally launch it. The clinic was renamed to Imbunde Clinic. The name was suggested by the clinic committee, local izinduna and iNkosi agreed to it. Imbunde is the original name of the place before it was called Murchison. The place is named after the famous WELL close by the clinic. Imbunde Clinic provides all PHC services and a dentist is also stationed there. The working times are from 07h30 - 16h00, 7 days a week.

The main TB event was held at Kwa Maveshe Sports Ground that is behind the clinic. Ndabezitha Ndwalane welcomed all present and gave a short but remarkable speech. He spoke of the planned community development projects which is projected to create employment opportunities thus elevating poverty.

Ugu Mayor His worship Cllr Cele also delivered his speech and talked about achievements by the municipality and projects on the pipeline to ensure wellbeing of all citizens of Ugu. He concluded by testifying that indeed TB is a curable disease as he was also cured of it in the early 70's.

MEC, Mrs Nkonyeni took the podium with pride as she mentioned projects around Ugu District which were successfully initiated and completed within the period of five years. Among the listed achievements, she mentioned the newly built clinics like Imbunde, renovated clinics such as Izingolweni, upgrading of Gamalakhe clinic to a CHC, the newly built administration block in Murchison hospital. The Department of Health spent millions to accomplish these projects.

Then the MEC gave useful information and gave History of MDRTB that it was first spotted at Umsinga. She stated actions that the department has taken to ensure the disease is treated successfully. She went on and reminded the community that there is no cure for HIV and people must really try and prevent being infected because HIV cannot be cured unlike TB. HIV and TB are intertwined in a deadly co-epidemic that must be met head-on by all. She concluded with the words **"WE ARE CONFIDENT WE HAVE THE MEANS TO BEAT TB"**

Points to remember about TB

- It can be cured with little or no complications.
- Treatment must be completed
- TB testing and treatment is Free
- HIV increases the risk of developing TB
- Not all HIV-positive people have TB. Not all people with TB are HIV-positive.



MR REDDY CEO, CHIEF NDWALANE & DR O



**MEC MRS NKONYENI ,
MR REDDY HOSPITAL
CEO AND HIBISCUS
MAYOR CLLR. SHUSHA**



QUALITY DAY

It is customary for Murchison hospital to hold annual Quality days as the hospital is assessed by Quality Assurance Team from district office quarterly. For the hospital to be compliant we are required to host at least one Quality Day yearly.

2008 was not different in this regard compared to previous years. The Quality Day was held on 03 December 2009, as expected most departments participated although we would like all departments in the hospital to actively participate in this activity.

The main purpose for this day is for Executive Management to commend staff members who are doing outstandingly well in their allocated duties and additional tasks which they are sporadically asked to carry out. This day is also about motivating all employees to be committed to their duties and work to the best of their ability even with limited resources. Special appreciation goes to the planning committee for ensuring that all ends meet with little funds we had fundraised.

Departments were asked to enter for Best Quality improvement Project competition. The judges were: Mrs. V Webb - District Quality Manager, Mrs. Z Ndwandwe - Occupational Health Coordinator and Mr. Gramoney - Environmental Health.

The following departments entered. X Ray, Female ward, OPD – wound care clinic, Male Good Hope, Female Good Hope ward, Lindokuhle clinic, Paediatric ward, TB ward and Casualty. Each department was given ten minutes to do a PowerPoint presentation in regards with their QIP. Regrettably only top three departments won cash prizes and trophies.

2008 Quality improvement project winners are:

- First position : Male Good Hope
- Second position : OPD – wound care clinic
- Third position : TB ward.

Congratulations to all winners. All departments who did not make it to the top three, keep on trying 2009 IS YOURS.

There were numerous categories which were awarded the results are as follows:-

Employee of the year - Ms V Khowa,

Best CSO - Dr Phungula & Miss N Cibane (Radiographer)

Outstanding Abet learner : Mrs Mdlalose, she retired in December.

Infection Control annually trophy: Male Good Hope

Infection Control Achiever: Mary

Housekeeping annual Trophy : Mortuary & Maternity Departments

Long Service Certificates : Picture 1

On 24 December Batho Pele Campaign was done and the winners are:

- First position : Casualty Department
- Second position : OPD
- Third position : Female Extension ward

A detailed report on Batho Pele project and the BP Campaign will be available on the next issue, watch the space.



Members of staff who were given long Service Award Certificates by D Moodley



Mrs Webb with QIP Winners



Ms Nxasana & V Khowa who won the title of being the employee of the year

Picture Array



Dr Phungula & Nonku Cibane
Best C.S.O's 2008



Sr Nxasane & Sr Mbhele, OPD
got 2nd position & won B.P.
Shield



Miss Murchison
Hospital donated
Easter Eggs to
Paediatric ward.



Members of staff and patients were all happy to see Mrs Nkonyeni on her visit to the hospital to officially open MDR Ward.



Hospitalized patients were given an opportunity to vote. IEC officials & Party agents



Good Hope Staff during Valentines Casual day. Innovative as usual.

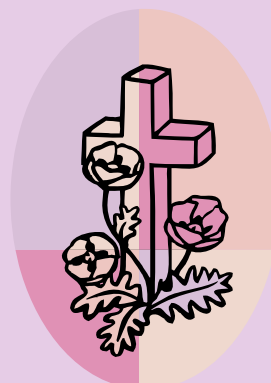
Sr Nxasana & Sr Kistasamy Female Extension
Ward O.M. They got 3rd position for their
Batho Pele Project



MAY THEIR SOULS REST IN PEACE

Gone but not forgotten, the below listed members of staff were taken away from us,
They were called home. May their families, friends, relatives find comfort in God

- ◇ Mr NE Mtolo passed on 13 February 2009
- ◇ Miss BA Mhlauli passed on 02 March 2009
- ◇ Miss NS Ndaba passed on 13 March 2009
- ◇ Mrs EN Cele passed on 26 April 2009



Hospital ARV Clinic well known as Lindokuhle had a one month ARV Paediatric campaign. The awareness campaign was held every Wednesday for the whole month of December. The purpose of this awareness campaign was to provide extensive education on ARV medication and educate children using baby friendly techniques that it is also their responsibility to ensure that medication is taken at proper times even when the guardian forgets. Peer support was emphasized and that they should remind each other to take medication.

We would like to thank everyone who contributed towards the success of this open day, the planning committee, Krishna (Social worker) and all ARV and PMTCT teams.



Matron NV Nyuswa, Zonal Matron for OPD, Casualty, Theatre and Lindokuhle Clinic was taken with members of the organizing committee Social worker, PMTCT team and ARV staff

Main focus on the next issue will be on ARV Clinic.
Till then keep well.
i Ntungwa lithi Au reviouir !

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