

Speech by KZN Health MEC, Dr S. M. Dhlomo in motivating Health Care Professionals in CJM Hospital at Nquthu

01 March 2013

His Worship, uMzinyathi District Mayor – Cllr Rev James Mthethwa

Mayor of Nquthu Local Municipality – Cllr Molefe

Bishop T Xaba and other Religious Leaders

Head of Department of Health - Dr Sibongile Zungu

MANCO Members

District Manager

Management of CJM Hospital

All our staff members

It is indeed inspiring to come and talk to you just a day after our Honourable Premier, Dr Zweli Mkhize delivered His State of the Province Address whereby he had accolades and a lot of good things about the performance and achievements of the Department of Health.

We could not have achieved all the remarkable progress if it was not for this MANCO; District management; Clinicians; workers at all level; guidance and support from the Provincial Health Council and all governance structures as well as support from Amakhosi and the clergy.

For the benefit of all, allow me to read to you what our Honourable Premier said:

For the first time in recent history, HIV and AIDS are showing signs of retreat. The number of AIDS-related deaths is declining. Since we took office in 2009 we have stabilized HIV prevalence in our Province from 39.5% to 37.4% as a direct result of our integrated approach through the Provincial Council on Aids working together with all sectors of our society to ensure that our initiatives on prevention and to make antiretrovirals available are successful. Utilizing a special roving team of dedicated health professionals to initiate therapy to all 550 000 deserving individuals, we can now declare that for a few years now the waiting list for anti-retroviral treatment no longer exists. It has been cleared for good.

Earlier this year Old Mutual reported that the death rate among employees of companies that bought risk cover from the company had fallen almost 20% between 2008 and 2011. They quoted a study by the Medical Research Council which found that: "the life expectancy had increased from 56,5 years in 2009 to 60 years as fewer people died of AIDS" and attributed this to the success of the Government's drive to get more HIV patients on treatment.

Only last week, new research from Harvard School of Public Health showed that the anti-retroviral treatment scale-up in Umkhanyakude District had increased life expectancy from 49.2 years in 2004 to 60.5 years in 2011--- a gain of 11.3 years!

Till Barninghausen, associate professor of global health in the Harvard School of Public Health and senior author of the study which was published in Science, a leading scientific journal on February 21 this year stated that this is "one of the most rapid life expectancy gains observed in the history of public health".

Among 15-24-year old youth, we have also noted that HIV prevalence is down from 31% to 25.5% - another firm indicator that KwaZulu-Natal has turned the corner in the fight against HIV & Aids. This is a trend we expect to continue. I salute the health and social workers involved in this very successful intervention.

To date 235 966 male medical circumcisions have been performed in 67 institutions. We attribute a large measure of success also to His Majesty the King's directive for the revival of male circumcision in the fight against HIV & Aids.

Compatriots, our Province has already received international acclaim for the remarkable reduction of mother-to-child transmission from 19% in 2007 to 10.3% in 2009 to 2.2% currently - indeed a dramatic achievement in such a short space of time!

We have noted that the maternal mortality rate continues to rise. I have directed that this matter be made a standing item at the Provincial Council on Aids. This matter should be

discussed in the district and village leadership forums by elected, religious, traditional and community leaders.

The Campaign on Accelerated Reduction of Maternal and Child Mortality in Africa (CARMMA) will be intensified by the Department of Health and regular progress reports will be tabled in the above forums. Every level of leadership must take action to stop the death of mothers as a result of giving birth—a natural process of giving life.

We have also reduced TB incidence for new cases, but the campaign against TB will be accelerated until our target of 716 per 100 000 in 2015 is attained. We may not achieve the targets of the Millennium Development Goals, but reversing the sky - rocketing trend of the past few years is the basis of hope that we will together defeat tuberculosis and save many lives since the 70% co-infection rate of TB and HIV remains a major killer.

From 2009 to date, our efforts have resulted in the incidence of severe malnutrition for children under five years being reduced from 9.5 per 1000 to 6.7 per 1000.

We have registered dramatic improvement in child poverty indices such as wasting and stunting. Clearly our MDG targets for 2015 will be met.

Similarly, let us rejoice at the news that KwaZulu-Natal has achieved the Millennium Development Goal in reducing the incidence of malaria.

We must, however, express our disappointment that we have not fared too well in the battle of the waistline. The obesity levels continue to rise in excess of 3.6% which is our target for 2015. We need to double our efforts to implement our Province-wide integrated healthy lifestyle campaign to reduce the impact of the non-communicable diseases such as obesity, diabetes and cardiovascular diseases.

Dear Colleagues, again allow me to say thank you for this good work and from here let us resolve and commit to do more. At all levels, regardless of our positions; levels and notches; as health care workers let us strive to:

- Improve patients' access to quality health services
- Promote evidence based clinical practice
- Standardise clinical practice
- Reduce clinical errors
- Provide care that is respectful of human dignity and responsive to patients' needs and values
- Increase patients' participation in the clinical care process
- Improve efficiency in the utilization of health care resources

Ours is to understand and accept that each member of the health care team is crucial to the success of patient care. Decisions should be made

about patient care as a team and this requires a shift from doctor led care to a **TEAM** Centred Care.

Our nurses should always be guided by the acceptance of the reality that Nursing Care is not only restricted to the sick but goes to encompass preventive, promotive, curative and rehabilitative aspects.

At all times they should be reminded and draw strength from the Pledge they made:

- *I solemnly pledge ourselves to the service of humanity and will endeavour to practice our profession with conscience and dignity.*
- *I will maintain by all means in my power the honour and noble traditions of my profession.*
- *The total health of my patients will be our first consideration.*
- *I will hold in confidence all personal matters coming to our knowledge.*
- *I will not permit considerations of religion, nationality, race and social standing to intervene between our duty and our patients, and that,*
- *I will maintain the utmost respect for human life.*

The same would apply to our Emergency Care Practitioners who **we value** so much as they are the first to administer pre hospital care. For them the **EMS Prayer** is the supreme guide:

As I perform my duty Lord
Whatever be the call,

Help to guide and keep me safe
From dangers big and small.

I want to serve and do my best
No matter what the scene,
I pledge to keep my skills refined,
My judgement quick and keen.

This calling to give of my self
Most do not understand,
But I stand ready all the time
To help my fellow man.

To have the chance to help a child
Restore his laugh with glee,
A word of thanks I might not hear,
But knowing is enough for me.

The praise of men is fine for some,
But I feel truly blessed,
That you oh Lord have chosen me
To serve in EMS!

To our Doctors; I would like again to echo what our Honourable **Minister, Dr Aaron Motsoaledi** emphasises when he says:

'this is a profession that puts to the test your individual values of respect, dignity, care, passion and compassion, that you are expected to uphold at all times in your careers.'

In this, the Honourable Minister is supported by the **Hippocrates Oath** which we all abide to that says:

I SWEAR in the presence of the Almighty and before my family, my teachers and my peers that according to my ability and judgment I will keep this Oath and Stipulation.

To RECKON all who have taught me this art equally dear to me as my parents and in the same spirit and dedication to impart a knowledge of the art of medicine to others. I will continue with diligence to keep abreast of advances in medicine. I will treat without exception all who seek my ministrations, so long as the treatment of others is not compromised thereby, and I will seek the counsel of particularly skilled physicians where indicated for the benefit of my patient.

I WILL FOLLOW that method of treatment which according to my ability and judgment, I consider for the benefit of my patient and abstain from whatever is harmful or mischievous. I will neither prescribe nor administer a lethal dose of medicine to any patient even if asked not counsel any such thing nor perform the utmost respect for every human life from fertilization to natural death and reject abortion that deliberately takes a unique human life.

WITH PURITY, HOLINESS AND BENEFICENCE I will pass my life and practice my art. Except for the prudent correction of an imminent danger, I will neither treat any patient nor carry out any research on any human being without the valid informed

consent of the subject or the appropriate legal protector thereof, understanding that research must have as its purpose the furtherance of the health of that individual. Into whatever patient setting I enter, I will go for the benefit of the sick and will abstain from every voluntary act of mischief or corruption and further from the seduction of any patient.

WHATEVER IN CONNECTION with my professional practice or not in connection with it I may see or hear in the lives of my patients which ought not be spoken abroad, I will not divulge, reckoning that all such should be kept secret.

WHILE I CONTINUE to keep this Oath unviolated may it be granted to me to enjoy life an the practice of the art and science of medicine with the blessing of the Almighty and respected by my peers and society, but should I trespass and violate this Oath, may the reverse be my lot.

Dear Colleagues, if we all do abide by this Oath surely our Government will not be faced with all the Medico-Legal claims that it now has to respond to as most of them consist of negligence involving:

- Retained swabs and surgical instruments
- Surgical procedures not properly performed
- Incorrect or inaccurate diagnoses
- Incorrect medication administered, as well as,
- Vascular and orthopaedic injuries not timeously attended to.

Let us all continue accepting and be directed by the **World Health Organisation's** approach of looking at health "*as a state of complete physical, mental and social well-being and not just an absence of disease or infirmity.*'

My gratitude to all of you for the good work always, please find strength in the words of wisdom as pronounced by **Morakabi Seakhona** in his poem entitled *LIFE AND LIVING* :

Life is a business of arriving, seeing

And conquering.

Of ever learning and acclimatising

Of always being sensitive and responsive

To the new and ever-changing

Conditions of life.