Comprehensive Care Management and Treatment Symposium Presentation: MEC for Health Dr Dhlomo: 25 May 2015, Waterwoods Conference Centre Nottingham Road KwaZulu- Natal Midlands

Protocols are critical governance and regulatory mechanisms which propel us to conform in a particular way in order to achieve a desired outcome. Therefore when we formulate protocols, we are expected to follow these protocols religiously until they are changed or modified based on new information. This point is fundamental in adherence and respect but more importantly to subscribe to an understanding that everyone will act uniformly in a situation which is informed by such protocols.

An analogy of driving a car maybe best used to describe this logical reasoning. When you drive a manual car, you will always move from gear 1 to gear 2 and continue in that trend. One could move from gear 1 to gear number 4, that is not conventional but it can be done. It is a good example of deviating from a known agreed upon protocol. The unconventional way could in long term bring undesired results. We then must find it mandatory to just stay within protocols.

My privilege of managing the HIV and AIDS Research Project, Phidisa in the SANDF from 2004 until 2008 equipped me with many valuable lessons which enriched my experience in HIV and AIDS on a global scale. A best practise that yielded many positive spin offs was the continued and sustained communication network links created across South Africa as well the USA and Australia. These almost daily engagements motivated team leaders to share innovations, best practices and evidence based research outcomes over a span of five years. The gratifying moments were that we were able to show case these results at International conferences. The result of which were visible in the improved quality of treatment that the soldiers received.

I am hopeful and would greatly appreciate if as a collective we could be inspired by the vast evidence based research practises and outcomes discussed here to be used to influence others and to motivate ourselves to continue to be informed by such. With note we are all researchers in some way or the other, our curious minds and quest to search for solutions to problems and challenge that impact on how we execute our key responsibilities. But having said that it is imperative that if there are protocols and guidelines that assist us to focus and navigate these problems and challenges, we must respect that and our decisions must be guided by that. Our mandate therefore should be solution seeking behaviour to the problems facing our communities.

We must be reminded by the message delivered by Hon Premier Mchunu in July 2014 when he was addressing Senior Managers. He stressed on selflessness, patriotism and sacrifice for one's country while we serve. As Public servants and citizens out first and fundamental obligation is our duty to ensuring that all our people whom we serve receive quality care.

The public service is fundamentally a response to the needs of the people and we should not miss that. This responsibility starts with each and every one of us and this means being at work on time, reporting maladministration, reporting abuse of RWOPS, abuse of telephone, abuse of S and T, supervising one's staff is "doing right when nobody is watching."

Maladministration together with staff attitude are but some of the causes of anger and frustration experienced by our people and staff that we lead. We need to create an enabling environment for our people's high but realistic expectations

It is of grave concern that we were on the spot light at the recent Medico Legal Summit. The issue raised was that our communication with our patients is not at its best further to this and most importantly is that patient examination documentation is inadequate to justify and defend claims against health service delivery which impact on medico legal claims adversely. This matter will need serious and robust engagement as a way forward,

Let us also be mindful that serious improvement is also needed on Forensic Pathology Services, Emergency Medical Services and in the Clinical management of our facilities. An urgent call is made for us all to do serious introspection on these areas.

There are many innovative and creative avenues we have at our disposal to promote positive engagements with the communities with whom we work daily. One such platform is "Taking Parliament to the people', we must be eager to work quickly on the problems presented. Turnaround time must be impressive to our people. Certain problems can be attended to and answered while the parliament is still sitting, like provision of walking sticks, reading glasses wheel chairs and sometimes referral to higher centres of health care.

Another such platform are the many Izimbizo organised either by other Departments or through the OSS mandate A practical example is to set up a health help desk that is just readily providing solutions on time. Some of these government functions are attended to by Senior Managers in our department and these officials are able to make decisions and effect these immediately. We can choose to improve on this matter.

Administrators are the life blood of the government. That South Africa is a united, democratic, non-racial, non-sexist an prosperous country depends on the administration and less on politicians. Whilst politicians make laws, administrators run the country. Administrators implement these laws. Administrators choose to implement these laws in caring on non-caring way. Administrators have a responsibility to effect the pronouncement of their principals (politicians). They can choose not effect those pronouncements. It is unacceptable for an administrator to pretend to agree to carry our mandate and choose later not to do so, but not being brave enough to report to the principal that the orders will not be carried. It is distasteful and it should be avoided. It exposes cracks with government and it makes our people lose confidence if what was promised is not being delivered and no one is coming to indicate the challenges.

Whilst this is evident it is also critical that when leaders attend meetings called by the President, Ministers, and or Premiers, they need to come back and give instructions as they have been downloaded by the principals. This only serves to strengthen relationships at all levels from oversight to implementation. The link created must also indicate gaps and challenges so that they may be addressed immediately.

The link between politicians and administrators can be further enhanced if the opportunity to attend the briefings—where either the President and or and Premiers speak, because it here that they usually pronounce on policies, not on statements that are still for negotiations. The rationale for this that there is sometimes thinking among the administrators that politicians—make pronouncements on things they know very little about.

Rural development program must be of interests to us, it includes food security which is fundamental for reversing the effects of s severe malnutrition in the society especially among the under 5 years. Poverty eradication package championed by the premier has a direct benefit t the delivery of health services in the society. If people don't eat because they are poor, their bodies will not have means to withstand the challenges of the environment under which they live (including diseases). If we want to see people even if they fall sick but not dying, we must support programs that reduce poverty, that reduce hunger. It means we must support programs that educate a girl child and support programs that empower women.

Conclusion

We need to use government resources as instruments to transform the lives of our people. We must always ask ourselves, "how best can I use operation Sukuma Sakhe to achieve our dream?". Will that need shifting budgets to ensure optimal service delivery. We need to be a responsive, caring and clean government. It must be what our people say about us, about our attitude, about our service to mankind.