



**health**  
 Department:  
 Health  
 PROVINCE OF KWAZULU-NATAL

# HEALTH *Chat*

JANUARY 2017



# 2017 RESOLUTION FOR ALL :

## NEW HEALTH BEGININGS



2017 RESOLUTION FOR ALL:  
NEW HEALTH BEGININGS  
**PAGE 01**



2017 HEALTHY BABIES  
WELCOMED IN KZN  
HOSPITALS **PAGE 02**



KING GOODWILL ZWELITHINI  
PLEASED WITH KZN'S  
PROGRESS ON MMC  
**PAGE 03**



Facebook - KwaZulu-Natal Department of Health



Twitter - @kznhealth



Instagram - kznhealth

FIGHTING DISEASE, FIGHTING POVERTY, GIVING HOPE

# BATHO PELE PRINCIPLES

## *Consultation*

Asking what clients want and finding out how we can meet their needs

---

## *Service Standards*

If we already know what our clients want, we can set the standard to which we will render the service

---

## *Access*

This applies to ensuring that people who previously did not enjoy our service get the service. It will also mean ensuring that disabled people, people living in rural areas are able to utilise the service

---

## *Courtesy*

Being polite, friendly, helpful

---

## *Information*

It is about reaching all people to make sure that they are informed about the services we render

---

## *Openness & Transparency*

What we do should not be a secret nor something we are ashamed of and want to hide. We publish annual reports, have open days etc

---

## *Redress*

People should feel free to tell us if they are unhappy with our service. We should deal with complaints in a professional manner

---

## *Value for money*

Giving the best service we can using all the resources. Eliminating waste, fraud and corruption

---

## *Encouraging innovation and rewarding excellence*

Doing things better, going the extra mile

---

## *Customer impact*

Looking at what benefits we have provided and how have we improved service delivery

---

## *Leadership & strategic direction*

Leaders set the example. They guide the organization to success



## MESSAGE FROM THE MEC FOR HEALTH, DR SM DHLOMO

*I would like to wish you all a warm welcome to 2017. The start of a new year is always a great opportunity to turn over a new leaf in our lives and start afresh. It's a chance to abandon bad old habits, and begin a new journey with fresh ideas on how to be the best we can be and how to avoid mistakes of the past.*

*As the KZN Department of Health, we remain committed to continue working hard to ensure a long and healthy life for all South Africans. This is in line with the National Development Plan (NDP) 2030, which envisions a health system that works for everyone and produces positive health outcomes, and is accessible to all. The NDP says that by 2030, South Africa should have:*

- *Raised the life expectancy of South Africans to at least 70 years;*
- *Produced a generation of under-20s that is largely free of HIV;*
- *Reduced the burden of disease;*
- *Achieved an infant mortality rate of less than 20 deaths per thousand live births, including an under-5 Mortality rate of less than 30 per thousand;*
- *Achieved a significant shift in equity, efficiency and quality of health service provision;*
- *Achieved universal health coverage; and*
- *Significantly reduced the social determinants of disease and adverse ecological factors.*

*Having said that this time of the year is an opportunity to start afresh, I wish to call upon the public to start now to help us realise the vision of the NDP by doing the small, but significant things, such as visiting the nearest health facility in order to get a free general health screening. I always say that unless you have undergone a health test which informs you where you stand as far as your health status is concerned, you should just consider yourself sick. Even if you feel fine, you're as good as a sick person – until you know for sure that you're disease free.*

*It is only when you get tested that diseases can be detected early, treated and managed. This then results in a longer and more productive life span, which benefits your loved ones, as well as the country's economy.*

*Another small but effective way of avoiding the spread of infectious diseases is washing your hands regularly. Hands carry and spread germs, so touching your eyes, nose or mouth without cleaning your hands or sneezing or coughing into your hands may provide an opportunity for germs to get into your body.*

*By washing your hands, especially at strategic times such as before eating a meal or after using the bathroom, you can decrease the spread of germs. I therefore wish to encourage parents to instil this habit in their children from a young age. January is also Skin Cancer Awareness Month. Skin cancer is the most common cancer in South Africa with about 20 000 reported cases every year and 700 deaths, and we have the second highest incidence of skin cancer in the world after Australia. It is a preventable lifestyle disease and early skin cancer detection can be life-saving. The good news is that skin cancer can be prevented by respecting the sun. This, we can do by always wearing protective clothing, hats and shirts before going out into the sun. The best way to take care of the skin is to apply sunscreen daily. This can reduce the risk of getting skin cancer by as much as 50 percent. Let us do what we can to ensure that we, as well as our loved ones, are not reduced to mere statistics.*

*Thank you, and Happy New Year!!!*





## MESSAGE FROM THE HEAD OF HEALTH, DR ST MTHALI

*I wish to convey my very warm greetings to all employees of the KZN Department of Health; we are delighted to have you back in 2017.*

*It's a brand new year, a time for new beginnings as some of us were fortunate to get a well-deserved break over the festive season. I trust that we're all coming back with a renewed sense of energy and are eager to work harder to make 2017 a success.*

*The vision to "achieve optimal health for all people of KwaZulu-Natal" demands of all of us to remain steadfast in discharging our responsibilities in order to have the good, healthy population that we all envisage to have. The goal to strengthen our health systems needs all of us, as a collective, to perform our duties the best way we can, in whatever capacity that we are deployed.*

*When the MEC and I visited Stanger Hospital on Christmas Day and Murchison Hospital on New Year's Day, we were impressed by the vigor and commitment demonstrated by the healthcare workers on duty.*

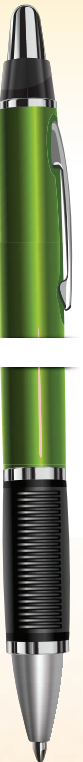
*I also wish to thank all of our employees who worked over the festive season which is usually the busiest period for us. Thank you for availing yourselves at such critical times when people of the nation need you the most. You made sure that the Department continued to save lives.*

*We are currently in the 4th quarter of our 2016/17 financial year and it is a critical time for us to take stock of what we have achieved against the targets set and push harder if need be to improve service delivery.*

*I wish to take this opportunity to encourage you to take charge of your health this year. One of the most effective habits of staying healthy is to undergo regular health screening in order to detect any problems early so that necessary interventions can be done. Those of us who are on treatment for chronic ailments are urged to adhere to the stipulated consumption intervals.*

*Most importantly, let us stick to a balanced eating plan to keep healthy and also engage in regular physical exercise.*

*Keep well and stay blessed.  
Happy 2017!!!*



# 2017 RESOLUTION FOR ALL **NEW HEALTH BEGININGS**

## **New Year!! New Beginnings!! New Leaf!! New Goals!!**

As we begin the New Year, one of the most important New Year resolutions should be the adoption of leading a Healthy Lifestyle.

Health is not just about avoiding disease. It is also about physical, mental and social wellbeing. Scientific studies have identified certain types of behaviour that contribute to the development of non-communicable diseases and early death. A healthy lifestyle is a way of living that lowers the risk of being seriously ill or dying early.

Not all diseases are preventable, but a large proportion of deaths, particularly those such as coronary heart disease and lung cancer and other non-communicable diseases, can be avoided.



## HEALTHY LIFESTYLE **DOs**

- Drink a lot of water
- Eat more fruits and vegetables
- Get enough sleep
- Cut out sugary foods
- Say no to oily food
- Avoid frozen or stale food
- Count your calories
- Meditate
- Exercise regularly
- Work out different parts of your body
- Detox your body/environment and reduce stress
- Cut out unhappy thoughts
- Stop smoking



## HEALTHY LIFESTYLE **DON'Ts**

- Don't eat large on non-veg food
- Don't skip breakfast
- Don't overheat healthy food
- Don't buy too much produce
- Don't serve super-sized portions
- Don't drink sugary sodas and juices
- Avoid going out in the sun without protection, like a cap or an umbrella
- Don't give in to temptation to eating junk
- Do not drink alcohol

# 2017 HEALTHY BABIES WELCOMED IN KZN HOSPITALS



**SCORES of bouncing, healthy babies born on Christmas Day and New Year's day have added to the population of KZN.**

On New Year's Day alone, 122 babies (35 boys and 31 girls) were born at KwaZulu-Natal public healthcare facilities. Among them were Ms Thabisile Hlatshwayo's twins who were born at Itshelejuba Hospital, in Pongola, on the north coast of KZN. Sibanesihle arrived at 03h30, followed by her brother Senzelwe at 03h45, both weighed in at 1,5kg. What makes the twin's birth so inspiring is that Thabisile Hlatshwayo was distraught when she lost her prematurely-born twins a year ago. The 30 year-old unemployed woman from Pongola soon fell pregnant again, but, unbeknown to her, she was carrying another set of twins who would be born healthy, at full term - on New Year's Day - proverbially wiping away her tears. On the day, KZN Health MEC, Dr Sibongiseni Dhlomo, accompanied by provincial Head of Health, Dr Sifiso Mtshali and the mayor of Ray Nkonyeni (Hibiscus Coast) Municipality Cllr Nomusa Mqwebu, visited Murchison Hospital in Port Shepstone and handed out gifts to two mothers who had delivered their New Year's babies there.

Noting that Murchison Hospital has registered no maternal death during the current financial year, out of an average of 2800 deliveries each year, MEC Dhlomo encouraged healthcare workers across the province to identify complicated pregnancies early and then refer them to higher level institutions. On 25 December 2016 (Christmas Day) the MEC and Head Health had also visited Stanger Hospital where he announced that 70 Christmas babies (39 boys and 31 girls) had been born throughout the province by 7 AM. The welcoming of the Christmas babies took place amid a jubilant atmosphere, featuring some spirited singing and dancing from the nurses who were joined by Dr Dhlomo and Dr Mtshali. The occasion was also used to celebrate the huge strides made by Stanger Hospital in the significant reduction of the rate of maternal mortality; from

- 16 in 2013/14
- 13 in 2014/15
- 8 in 2015/16 and just no maternal deaths since April 2016.

The hospital delivers, on average, 7200 babies each year.

MEC Dhlomo, however, decried the fact that two of the mothers of the Christmas

Day babies were just 16 years old and that among the expectant mothers in the Murchison hospital's gynaecology ward was a 14 year-old girl. He said that teenage mothers, by sheer virtue of their age, are neither physiologically nor psychologically ready to bear children. This often leads to serious health complications which may result in the death of the mother, her baby or both. "We are always concerned when young people fall pregnant at a young age because it is very unsafe. If you're a young person under the age of 18, and you're delivering a big baby, which does happen, chances of delivering safely are slim. It actually places the mother's own life and the baby's in danger."

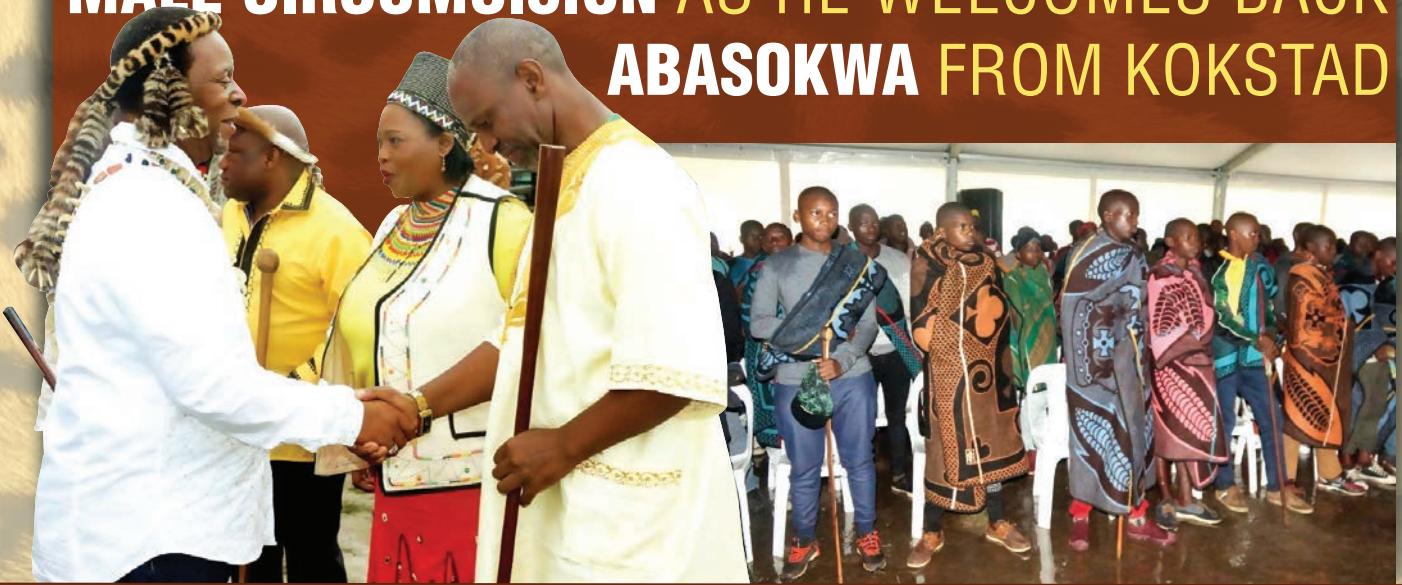
MEC Dhlomo also called on young people to either abstain from sex or use Dual Protection (a combination of condoms and female contraceptive methods) in order to avoid unplanned or unwanted pregnancies.

He urged healthcare workers to ensure that young people feel welcome to seek assistance from public healthcare facilities. "Health workers need to understand that if the youth is not treated in a manner that makes them feel welcome to seek health services; they then rely on uninformed advice or the help of their peers – usually with disastrous consequences. We do not want that," he said.

MEC Dhlomo also emphasized the need for all mothers to follow the immunization schedule as set out in the "Road to Health" chart that all new mothers receive from public health facilities.

**"It's very important for babies to be immunized, as this gives them protection against many diseases. We must not only celebrate the arrival of these babies, but also ensure that they are nurtured and protected," he said.**

# KING GOODWILL ZWELITHINI PLEASED WITH KZN'S PROGRESS ON **MEDICAL MALE CIRCUMCISION** AS HE WELCOMES BACK **ABASOKWA** FROM KOKSTAD



**NO FEWER than 200 young initiates (Amakrwala) from the Greater Kokstad area were warmly welcomed back to their community by His Majesty, King Goodwill Zwelithini, after successfully completing their incident-free circumcision rite of passage.**

The Homecoming ceremony, which took place at Shayamoya Sports Grounds in Kokstad on the 06th January 2017 was also graced by the presence of amongst others, COGTA Deputy Minister, Hon Obed Bapela; Acting KZN Premier, Mr. Sihle Zikalala; KZN Health MEC, Dr Sibongiseni Dhlomo; KZN COGTA MEC, Ms Nomsa Dube Ncube; Social Development MEC, Mrs. Weziwe Thusi; Chair of the House of Traditional Leaders, Inkosi Phathisizwe Chiliza and local Mayors. MEC Dhlomo thanked Isilo for the clarion call that His Majesty made in 2009, when he called for the revival of circumcision as a means to curtail the spread of HIV amongst his subjects. MEC Dhlomo also thanked the Traditional Committee called Indlondlo that is responsible for organising and performing circumcision in the Greater Kokstad area, for agreeing to work in

partnership with the Department of Health to ensure the safety of all the initiates. This partnership has resulted in the broadening of the circumcision process as the Indlondlo committee considers initiation as a broader concept, which entails strong teachings of moral regeneration that transform an individual from boyhood to manhood. Reporting on the progress made in this area since 2010, MEC Dhlomo informed His Majesty that the partnership with Traditional Leadership has ensured that not a single initiate has died or been amputated: "Today we are proud to report that we have jointly ensured the safe return of all the initiates.

#### **We have we successfully circumcised**

- **236 initiates in 2012**
- **241 in 2013**
- **300 in 2014**
- **265 in 2015**
- **200 in 2016**

All in all we have worked together to safely transit 1245 boys to manhood just in the Greater Kokstad area alone." National Cooperative Government and Traditional Affairs Deputy Minister, Hon Obed Bapela, said he was very

enlightened and pleased at how medical male circumcision is being conducted in KZN.

"I came here to learn because over the years we are collecting statistics of initiates dying in the Eastern Cape; North West; Limpopo and other Provinces but none in KwaZulu-Natal. What I am observing here is the involvement, cooperation and participation of almost all the Provincial Government Departments in this particular initiative.

I am also impressed by the seamless and easy relationship there is between the Department of Health and the Traditional Committee [Indlondlo] and recognise that as one important aspect as to why all the initiates come back home alive in this Province. I am quite impressed." King Goodwill Zwelithini then gave full praise to MEC Dhlomo for heeding his call for the revival of the circumcision custom and for the safe performance thereof to more than 750 000 boys and men since 2010.

The 200 strong Greater Kokstad initiates were then presented with an ox by His Majesty the King as a token to congratulate them.

# CCMDD

CENTRAL CHRONIC MEDICINE DISPENSING & DISTRIBUTION

## BRINGING MEDICATION CLOSER TO THE PEOPLE



**MORE people are set to gain easier and cheaper access to chronic medication, as the KwaZulu-Natal Department of Health continues to roll out the hugely successful Central Chronic Medicines Dispensation and Distribution (CCMDD) programme.**

Patients with chronic diseases receive medicine every month and usually receive a repeat prescription for a period of six months. The CCMDD programme enables medicine from these repeat

prescriptions to be dispensed centrally using private sector facilities and to be distributed every month to a pick-up-point of convenience for the patient. This decongests clinics and allows resources to be used in a cost-efficient manner.

The CCMDD programme was first rolled out at the three NHI Pilot Districts, Amajuba, uMgungundlovu and Umzinyathi from 1 February 2014. Much progress has been made since then.

As of December 2016, KZN had 464 440 clients on CCMDD. Of this number, 56.15% are on Anti-Retroviral Treatment, while 35.63% are on stand-alone other chronic medicines. About 8.22% of the CCMDD clients are on a combination of both ART and other chronic medicines.

The CCMDD programme caters for patients with chronic diseases including HIV, Drug Resistant Tuberculosis (DR-TB) and Non-Communicable Diseases, such as diabetes, high blood pressure, cancer and hypertension.

Although KZN has not enrolled patients on TB treatment yet, the province is set to commence with a pilot site (cluster made of a hospital with PHC clinics) in the second quarter of 2016/17.

KZN Health MEC Dr Sibongiseni Dhlomo recently announced that 4000 HIV-positive inmates serving time throughout the province's 41 correctional facilities will benefit from CCMDD.



# **Love Your Skin this Sunsmart Skin Cancer Awareness Month and beyond!**



**January is Skin Cancer Awareness Month.**

*Skin cancer is the most common cancer in South Africa with about 20 000 reported cases every year and 700 deaths, and has the second highest incidence of skin cancer in the world after Australia. Skin cancer is a preventable lifestyle disease and early skin cancer detection can be life-saving.*

*Not looking after the skin can lead to mild consequences such as breakouts to more serious effects such as skin cancer. Skin cancer can be as fatal as other forms of cancer so is not to be treated mildly but prevented as much as possible.*

*The skin needs to be protected because it serves a valuable function. It serves as one of the body's mechanisms against bacteria entering the body and a barrier against serious injuries due to harsh weather conditions and physical impact.*

## **WAYS TO TAKE CARE OF THE SKIN:**

- Stay in the shade as much as possible
- Always apply sunscreen when you know you will be exposed to the sun for extended periods of time such as when visiting the beach or playing sports outside;
- Do not use products on the skin that aren't approved by a dermatologist or other qualified medical authorities;
- Always drink as much water as possible (at least 7 glasses everyday)

**In 2016, the KZN Department of Health embarked on a campaign to create awareness about the dangers of illegal skin bleaching creams. The adverse effects of these products include skin cancer, skin infections, skin thinning, uneven skin tone with increased pigmentation, stretch marks, ochronosis (irreversible greyish pigmentation), and kidney and neurological problems caused by mercury in the products.**



# ETHICS TALK

Ethics can best be described as moral principles that govern a person's behaviour in conducting an activity. In this context, the KZN Department of Health is serious about ensuring that its employees behave ethically at all times when carrying out their duties. Those who fail to do so face serious consequences. In this article, Health Chat focuses on Conduct, Financial Disclosure, Conflict of Interest, Anti-Corruption and Ethics Management.

## Definitions:

**16.** In this Part, unless the context indicates otherwise- "designated employee" means-

- a) Any member of the SMS;
- b) Any other person in terms of section 36(3) of the Public Finance Management Act approved or instructed by the relevant treasury to be the accounting officer of a department; or
- c) Any other employee or category of employees determined by the Minister; "form" means a printed or electronic form contemplated in regulation 18; "interests" means the financial interests listed in regulation 19; "register" means the register of interests kept in terms of regulation 17; and "remuneration" means any payment or benefit in cash or in kind.

## Register of designated employees' interests

**17. 1** The Director-General: Office of the Commission shall keep a register of designated employees' interests, who are members of the SMS.

- (2) A head of department shall keep a register of any other designated employees interests not contemplated in subregulation
- (1). Disclosure of designated employees' interests

**18.**

1. SMS members, except for a head of department shall, not later than 30 April of each year, disclose to the relevant head of department, in a form prescribed for this purpose by the Minister, particulars of all his or her interests in respect of the period 1 April of the previous year to 31 March of the year in question.
2. A head of department shall, not later than 30 April of each year, disclose to the relevant executive authority, in the form prescribed for this purpose by the Minister, particulars of all his or her interests in respect of the period 1 April of the previous year to 31 March of the year in question.
3. Any other designated employee not contemplated in subregulations (1) and (2) shall submit to the relevant head of department, on a date and form directed by the Minister, particulars of all his or her interests for the period as may be directed by the Minister.
4. Any person who assumes duty as a designated employee on or after 1 April in a year shall make such disclosure within 30 days after assumption of duty in respect of the period from 1 April to date of disclosure.
5. The head of department or executive authority, as the case may be, shall ensure that the disclosure of interests by designated employees is submitted electronically to the Commission or the relevant authority as may be directed by the Minister in terms of subregulation (3), unless otherwise determined by the Minister.
6. An executive authority shall submit to the Commission a copy of the form submitted to the executive authority in terms of-
  - a) Subregulation (2) not later than 31 May of the year in question; or
  - b) Subregulation (4), in so far as it relates to a head of department, not later than 30 days after it has been so submitted.

7. A head of department shall submit to the Commission a copy of the form submitted to the head of department by a member of the SMS in terms of-
- a) subregulation (1) not later than 31 May of the year in question ; or
  - b) subregulation (4), in so far as it relates to a member of the SMS, excluding a head of department, not later than 30 days after it has been so submitted.

## DETAILS OF INTERESTS TO BE DISCLOSED

### 19. The following details of interests shall be disclosed:

- a) Shares, loan accounts or any other form of equity in a registered private or public companies and other corporate entities recognised by law:
  - I. The number, nature and nominal value of shares of any type in any public or private company and its name; and
  - II. Other forms of equity, loan accounts, and any other financial interests owned by an individual or held in any other corporate entity and its name.
- b) Income-generating assets:
  - I. A description of the income-generating asset;
  - II. The nature of the income; and
  - III. The amount or value of income received.
- c) Trusts:
  - I. The name of the trust , trust reference or registration number as provided by the Master of the High Court , and the region where the trust is registered ;
  - II. The purpose of the trust, and your interest or role in the trust; and
  - III. The benefits or remuneration received (these include fees charged for services rendered).
- d) Directorships and partnerships:
  - I. The name, type and nature of business activity of the corporate entity or partnership; and
  - II. If applicable, the amount of any remuneration received for such directorship or partnership.
- e) Remunerated work outside the employee's employment in her or his department:
  - I. The type of work ;
  - II. The name, type and nature of business activity of the employer;
  - III. The amount of the remuneration received for such work; and
  - IV. Proof of compliance with section 30 of the Act must be attached.
- f) Consultancies and retainerships:
  - I. The nature of the consultancy or retainership of any kind;
  - II. The name, type and nature of business activity of the client concerned; and
  - III. The value of any benefits received for such consultancy or retainership.
- g) Sponsorships :
  - I. The source and description of direct financial sponsorship or assistance;
  - II. The relationship between the sponsor and the employee
  - III. The relationship between the sponsor and the department ; and
  - IV. The value of the sponsorship or assistance.
- h) Gifts and hospitality from a source, other than a family member
  - I. A description , value and source of a gift;
  - II. The relationship between the giver and the employee ;
  - III. The relationship between the giver and the department ; and
  - IV. A description and the value of any hospitality intended as a gift in kind.
  - V. Ownership and other interests in immovable property:
    - A description and extent of the land or property;
    - The area in which it is situated
    - The purchase price, date of purchase and the outstanding bond on the property; and
    - The estimated market value of the property.
- i) Vehicles:
  - I. A description (make and model) of the vehicle;
  - II. The registration number of the vehicle; and
  - III. The purchase price, date of purchase and the outstanding amount owing on the vehicle.

## CONFIDENTIALITY OF SUBMITTED FORMS AND REGISTER

20. (1) Subject to sub-regulation (3), only the following persons have access to a submitted form or the register:
- A. The Minister;
  - B. The executive authority to whom the form is submitted ;
  - C. The head of department to whom the form is submitted ;
  - D. Commissioners of the Commission;
  - E. The Director-General : Office of the Public Service Commission
  - F. The Director-General : Public Service and Administration
  - G. The relevant designated ethics officer as contemplated in regulation 23; and
  - H. Such other persons designated by the Minister, an executive authority , head of department or the chairperson of the Commission for purposes of record keeping and the effective implementation of this Part.
- (2) No person who has access to a submitted form or the register may, except when a court so orders, disclose any information in that form or register to anyone other than-
- A. Designated employee in respect of his or her submitted form or an entry in the register in respect of that employee ; or
  - B. Another person who is permitted access in terms of subregulation (1) or to whom access is granted in accordance with subregulation (3).
- (3) Any person, other than a person contemplated in subregulation (1), may only be given access to a submitted form or the register in terms of section 11 of the Promotion of Access to Information Act ,2000 (Act No. 2 of 2000).

## CONFLICT OF INTEREST

21. (1) In so far as conflict of interest relates to members of the SMS:
- A. The Commission shall verify the interests disclosed.
  - B. If the Commission is of the opinion that an interest of a SMS employee disclosed in terms of regulation 18 conflicts or is likely to conflict with the execution of any official duty of that employee, it shall verify the information regarding that interest and refer the matter back to the relevant executive authority.
  - C. Upon the referral, the executive authority shall consult with the employee concerned on appropriate steps to remove the conflict of interest.
  - D. If the employee, after the consultation referred to in subregulation (1)(c), fails to take the appropriate steps to remove the conflict of interest, the executive authority shall instruct the relevant authority to take disciplinary action against the employee.
  - E. An executive authority shall, within 30 days after such referral, report to the Commission by –
    - I. Stating whether any steps were taken; and
    - II. If steps were taken, giving a description of those steps or providing reasons if no steps were taken.
- (2) In so far as conflict of interest relates to designated employees who are not members of the SMS:
- A. The head of department shall verify the interests disclosed.
  - B. If the head of department is of the opinion that an interest of such designated employee disclosed in terms of regulation 18 conflicts or is likely to conflict with the execution of any official duty of that employee, he or she shall consult the employee concerned and, where possible, take appropriate steps to remove the conflict of interest.
  - C. If the employee, after the consultation referred to in subregulation (2) (b), fails to take the appropriate steps to remove the conflict of interest, the head of department shall take disciplinary action against the employee.
  - D. A head of department shall no later than 31 August of each year report to the Minister on-
    - I. The number of cases identified in terms of subregulation (2)(b);
    - II. Whether any steps were taken
    - III. If steps were taken, a description of those steps; and
    - IV. If no steps were taken, reasons thereof

# Long Service Awards

**During the month of December, the KZN Department of Health employees were rewarded for their loyalty and dedication after many years' of service. Certificates of recognition for Long Service were handed over to employees from various directorates to show appreciation of their selfless contributions in support of the mandate of the Department.**

This included staff from District Health Services (DHS), Corporate Management Corporate Communications, Supply Chain Management, Information Technology, Legal Services, Human Resources, Corporate Services, Health Technology Services, Emergency Medical Services (EMS) College, Forensic Pathology Services, EMS Aero-Medical Services, Environmental Health, Pharmaceutical Services, Communicable Diseases and Quality Assurance. They all received certificates as a token of appreciation. During these celebrations, the KZN Health Head, Dr Sifiso Mtshali, encouraged staff to make use of his and senior management's open door policy to ensure the speedy resolution of any concerns or misunderstandings. He urged all Departmental employees to use every

available opportunity to engage him and other senior managers on work-related matters. "Walk up to me and let's talk, so that together we can make valuable input into building this organisation," he said. Dr Mtshali said employees possess the knowledge that can assist management to craft strategies to resolve most of the challenges faced by the Department. He urged all Departmental employees to give the best of themselves and take personal responsibility for all that goes on in their respective components. This, he says, will help improve the level of service rendered by the KZN Department of Health to the public.

## 10 YEARS



## 10 YEARS



## 20 YEARS



# 30 YEARS



# 40 YEARS





**health**

Department:  
Health  
PROVINCE OF KWAZULU-NATAL

### HEAD OFFICE

Natalia Building, 330 Langalibalele Street, Pietermaritzburg, 3201  
Tel: 033 395 2111 | Fax: 033 342 0429 | Web: [www.kznhealth.gov.za](http://www.kznhealth.gov.za)



Facebook - KwaZulu-Natal Department of Health



Twitter - @kznhealth



Instagram - kznhealth

#### ENQUIRIES:

Agiza Hlongwane: 033 395 2211, E-mail: [agiza.hlongwane@kznhealth.gov.za](mailto:agiza.hlongwane@kznhealth.gov.za)

#### EDITORIAL TEAM

- Mr Sam Mkhwanazi
- Mr Agiza Hlongwane
- Ms Ncumisa Mafunda
- Ms Samke Khumalo (Intern)
- Mr Sanele Mkhize (Intern)
- Ms Lerato Moloi (Intern)

**Graphics:** Mr Senzo Gumede  
Ms Nonhle Hadebe (Intern)

**Photographs:** Mr Themba Mngomezulu  
Mr Mondli Mwandla