



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

# HEALTH *Chat*

OCTOBER 2016

## Exclusive CHAT WITH KZN HEALTH HOD DR SIFISO MTSHALI



*Questions  
 & Answers*

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## MESSAGE FROM KZN HEALTH MEC, DR SM DHLOMO

October is Breast Cancer and Mental Health Awareness Month, which affords us the opportunity to put the spotlight on these two ailments.

Indeed, the incidence of breast cancer among South African women is increasing and this is concerning. It is the most prevalent cancer amongst White and Asian women and the second most common cancer among Black and Coloured women.

As the KwaZulu-Natal Department of Health, we would like to call on women to proactively test for breast and cervical cancer, as early detection can save lives.

We are also committed to helping those in need of mental healthcare services.

Experts say that as many as 1 in 3 South Africans may experience a mental health problem during the course of their lives, most commonly due to depression, anxiety and substance abuse. And approximately 956,000 adults were estimated to live with mental disorders in KZN alone, according to a 2014 paper by prof Jonathan Burns from the University of KwaZulu-Natal's psychiatry unit.

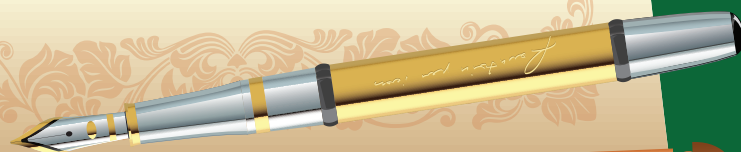
These statistics about mental health cannot be ignored. It is clear that financial pressures; losing family and friends to diseases; exposure to violent crime and motor vehicle accidents also contribute to the high levels of mental health problems.


Stigma and discrimination surrounding mental health remains a major stumbling block for those who suffer from mental health problems. This is because Mental illness is often not seen as a "real" illness and those whom it affects are called "crazy", "dangerous" and "weak" - resulting in many suffering in silence, too afraid to ask for help.

And unfortunately, when help is sought, lack of knowledge about mental health services may provide further stumbling blocks to accessing care.

However, as a Department we want anyone who feels overwhelmed to know that help is available. There is always a way and we have skilled counsellors and health workers who are available 24 hours a day to provide advice and counselling to those in need.

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Most of KwaZulu-Natal's public hospitals now have a psychiatric ward to evaluate psychiatric patients; and every hospital in the province has a system of referral for those requiring counselling. Anyone who needs assistance is urged to get in touch with their nearest health facility.

The following hospitals do provide Mental Health Care services in KwaZulu-Natal:

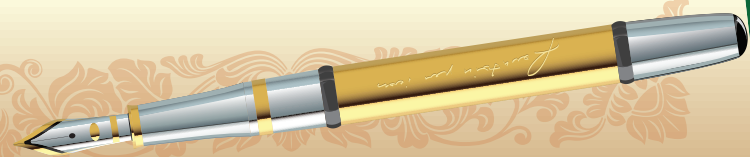
Regional Hospitals: Ngwelezane; Port Shepstone; Stanger; R.K.Khan; Prince Mshiyeni Memorial Hospital; King Dinuzulu; Edendale; and Ladysmith Hospital. We also have the following psychiatric hospitals: UMzimkhulu, Madadeni, Town Hill, Fort Napier (Forensic and State Patients).

I would also like to thank all parents and guardians who have responded positively to our campaign to fight the spread of HIV and Aids through Medical Male Circumcision. We have medically circumcised more than 700 000 men and boys, since his Majesty, King Goodwill Zwelithini, revived the tradition of circumcision. We remain confident that, with your support, we will realise our goal of one day having an Aids-free generation.

With that said, we would also like to urge all men to remember that medical male circumcision is not a license for them to have unprotected sex, as it only lowers the chances of HIV infection by 60%.

We are particularly proud to report that no death has occurred since the initiation of the programme.

We strongly appeal to parents and guardians of all boy children in KwaZulu-Natal to take advantage of the medical male circumcision camps that we organise throughout the province during the school holidays. Medical Male Circumcision is not only about cutting the foreskin; it also entails exposing young males to mentorship, moulding and life orientation. By attending these camps, the boys are also taught how to become good and responsible men of tomorrow, who respect themselves, as well as women and children.



# MEDICAL MALE CIRCUMCISION IS NOT A LICENSE FOR UNPROTECTED SEX, WARNS MEC DHLOMO



**KWAZULU-NATAL Health MEC Dr Sibongiseni Dhlomo has urged all men to remember that medical male circumcision is not a license for them to have unprotected sex, as it only lowers the chances of HIV infection by 60%.**

MEC Dhlomo, who is a qualified medical doctor, was speaking at Mbumbulu Clinic today (04 October 2016), where he personally performed medically circumcision to four men. There was a huge turnout of men and young boys who have taken advantage of the medical male circumcision clinics that are being held across the province during the school holidays.

Since 2010, KwaZulu-Natal has already medically circumcised more than 700 000 men and boys, since his Majesty, King Goodwill Zwelithini, revived the tradition of circumcision.

MEC Dhlomo says the province is particularly proud to report that no death has occurred since the initiation of the programme.

Speaking after personally circumcising the four men at Mbumbulu, MEC Dhlomo said: "We strongly appeal to parents and guardians of all boy children in KwaZulu-Natal to take advantage of the medical male circumcision camps that we have organized throughout the province during the school holidays, as we always do. This is not only about cutting the foreskin; it also entails exposing young males to mentorship, moulding and life orientation. By attending these camps, the boys are also taught how to become good and responsible men of tomorrow,

who respect themselves, as well as women and children."

However, MEC Dhlomo issued a strong warning that MMC should not be used as a license for wayward and sexually irresponsible behaviour, stating that circumcision only lowers the risk of HIV infection by 60%.

"Medical Male Circumcision is not a license to behave anyhow. Do not make that mistake of having unprotected sex just because you are circumcised. If you test positive you will be counselled and initiated on treatment. If you test negative, you must strive to remain negative for as long as you live. This, you can achieve by ensuring that you use Dual Protection, which entails using condoms during every episode of sex, and combine this with contraceptives for women to avoid unwanted pregnancy."

The MEC urged young people to remain sexually responsible and make the right decisions at all times.

"Even when you go to your matric dance, you must always make sure you come back clean and free of diseases? You must remain HIV-free so that you can go to university and Tertiary Vocational Education and Training (TVET), graduate, so that you can find work and fulfil your dreams.

"You're at a crucial moment in your lives. Whatever you do can either lead you to a good future or to a bad future. It is all up to you to make the right decision. Do not waste your lives. Look after yourself. That is all we ask of you."

# INTERVIEW WITH DR SIFISO MTSHALI, HEAD OF THE KZN DEPARTMENT OF HEALTH

## 1 ONE

You've been HOD for the past 15 months. What has been your assessment of the Department's strengths and weaknesses?

In the short time spent at the helm of the Department, I have come to realise that the Department does have many excellent programmes that are making an impact on the health of our citizens. We have innovative and transformational strategies in relation to health care. Our successes in the PMTCT, MMC, NIMART, TB treatment and cure rate, and our reduction of Severe Acute Malnutrition (SAM) all attest to some of our strengths. We also have strong executive leadership in our MEC for health, whose vision and passion spurs us on to do better and build on our strengths. The employees of the Department are our greatest strength, because without them our services will not be successful.

Some of our weaknesses could be attributed to our inability to maximise on certain services such as our EMS, where we do not have sufficient EMS vehicles to services our needs. Further to this we are dealing with the quadruple burden of disease and this impacts negatively on our resources. Whilst we are innovative with our projects, there appears to be a lack/lull in implementation of such and at times other Provinces pick up our initiatives.

As raised in the recent AGSA Regularity Report, there is a lack of controls and accountability within the Department which we are vigorously addressing.

## 2 TWO

The Department has 5 Strategic goals,  
1. Strengthen Health System Effectiveness  
2. Reduce the Burden of Disease  
3. Universal Health Coverage  
4. Strengthen Human Resources for Health  
5. Improved quality of healthcare.

What is your take on the implementation of core priorities as identified in the 5 year strategic plan. Are we on track?

KZN Health at times sets unrealistic or ambitious targets which then become difficult to attain; this does not mean that we are not achieving but rather that we are trying to over-achieve within the constrained resource envelope available.

I am not going to say that the Department is fully on track to achieving its goals as there are areas and targets set that we appear to repeatedly not achieve in.



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## 3 THREE

**KZN remains the epicentre of diseases like HIV and TB. What needs to be done to reduce the burden of diseases in the province, and what is the Department doing to ensure that this happens?**

Whilst we may be the epicentre for HIV and AIDS, we have certainly made remarkable progress in the fight against the disease.

We have reduced our mother to child transmission rate to 1.2%; we now have nurse initiated treatment for HIV and AIDS through our NIMART programme, we reached our 1 millionth patient on ART in 2015; we have led and are continuing with campaigns to promote behaviour change – anti-illegal abortion campaigns, anti-sugar daddy, teenage pregnancy; substance abuse and healthy lifestyle campaigns, amongst others.

Our Medical Male Circumcision is running smoothly and we have performed in excess of 124 000 MMC's; we also reduced severe acute malnutrition in under 5's new cases from 7 329 to 6136. Our household visits have expanded from 103 852 to 617 610, this demonstrating our extended reach and access to care.

Since we have commenced with Operation Phakisa (Big Fast Results), we are seeing improvements in the Ideal Clinic Realisation and Maintenance (ICRM) programme, with 141 of our clinics having achieved more than 80% against the National Core Standards. We have also improved medicine dispensing with more than 155 000 patients receiving their chronic medication at various community distribution points. I think we are on the right track however there is still a lot more to be done. There is no room for complacency in our sector as we deal with people and their health.

## 4 FOUR

**The Department often encourages people to undergo regular health screening, and not be hospi-centric. How can people change their behaviour, so that they can help the Department help them?**

People are always encouraged to take charge of their own health and be aware of the warning signs pointing to possible health risks. Whilst the Department can provide preventative health care, it is ultimately the people who must embrace the measures introduced. Diseases of lifestyle can be controlled through healthy living – inclusive of healthy nutrition, good habits and exercise. The information, education and communication material that is available must be used.

All our outreach programmes include health promotion activities and we also have lots of activities emanating from our non-communicable diseases programmes – our senior citizens clubs at PHC level are proving to be very popular.

## 5 FIVE.

**What is the feedback to the new “Test and Treat” HIV policy that came into effect on 01 Sept 2016?**

It's too soon to tell. We are indeed excited about launching this new model and I am sure that we will see the benefit of this in the next 6 to 12 months.

The goal is to reduce the incidence of HIV infection in South Africa through the provision of expanded prevention and treatment options.

Clients who will be tested and put onto to treatment regardless of their CD 4 count will definitely benefit from this and this strategy will see better outcomes in terms of reducing the burden of HIV and AIDS in the Province.

This model will address certain gaps in the treatment of HIV; currently there is a gap of 13 % of people who are HIV positive but are not initiated on ART with another 23 % of the population who are HIV positive but are not aware of their status.

*continued on page 6 >>>*

## The critical success factors are:

- Provision of comprehensive pre and post HTS services;
- Increasing access to non-traditional health facilities (mobile clinics, HTA sites etc)
- Continuous training of Health Care Workers
- Adequate number of Pharmacist assistants for the CCMDD programme
- Uninterrupted availability of pharmaceutical supplies
- Upscaling of adolescent and youth friendly services
- Integrating clinical HIV care into routine medical care in hospitals.

As mentioned earlier, it is too soon to assess the impact of the programme.

## 6 SIX

**It is quite worrying that despite so many efforts to create public awareness about HIV infection, young women between the ages of 15 – 24 are still among the most vulnerable for new HIV infections. How is the Department planning to put a stop to this?**

We are hopeful that all our campaigns will have a positive impact on the young people. Whilst young women are the

most vulnerable, we also want our young men and boys to respect these women and take precautions. The ABC concept is still a basic concept that can go a long way. Health promotion in partnership with the Department of Education is one mechanism that can assist in educating our teenage girls and boys about the dangers and consequences of early and unprotected sexual activities, the consequences of teenage pregnancies, the risks of contracting HIV and AIDS and the effects thereof. The Department will not on its own be able to stop this but a collective effort by government and society will surely make a difference.

## 7 SEVEN

**What upcoming new campaigns can be expected from the Department in the short to medium terms?**

The Department is continuing with reinforcing our current campaigns such as Anti-abortion campaign, healthy lifestyle campaigns, World Health Day (reducing salt intake), awareness of disabilities and the rights of our people, continuing with the reduction of malaria incidences in the Province and of course the Government as a whole will embark upon the campaign for the elimination of violence against women towards the end of November. It is critical that we protect, respect and uplift our women in our lives as they are the backbone of society.



# CLINIC TO HELP CURB TEENAGE PREGNANCY IN RURAL NONGOMA



His Majesty the King, Goodwill Zwelithini has thanked KZN Health MEC, Dr Sibongiseni Dhlomo for building a clinic in the Usuthu area at Nongoma. The R25 million facility was initially built in 1968 but due to its size and limit in the number of services it offered had to be rebuilt and was completed in April 2016

During the official opening, the King admonished young girls who at an early age run to have sex instead of remaining celibate as per Umkhosi Womhlanga prescripts. He said he hopes the Clinic would help in decreasing teenage pregnancy and illegal abortions that the nation has seen growing.

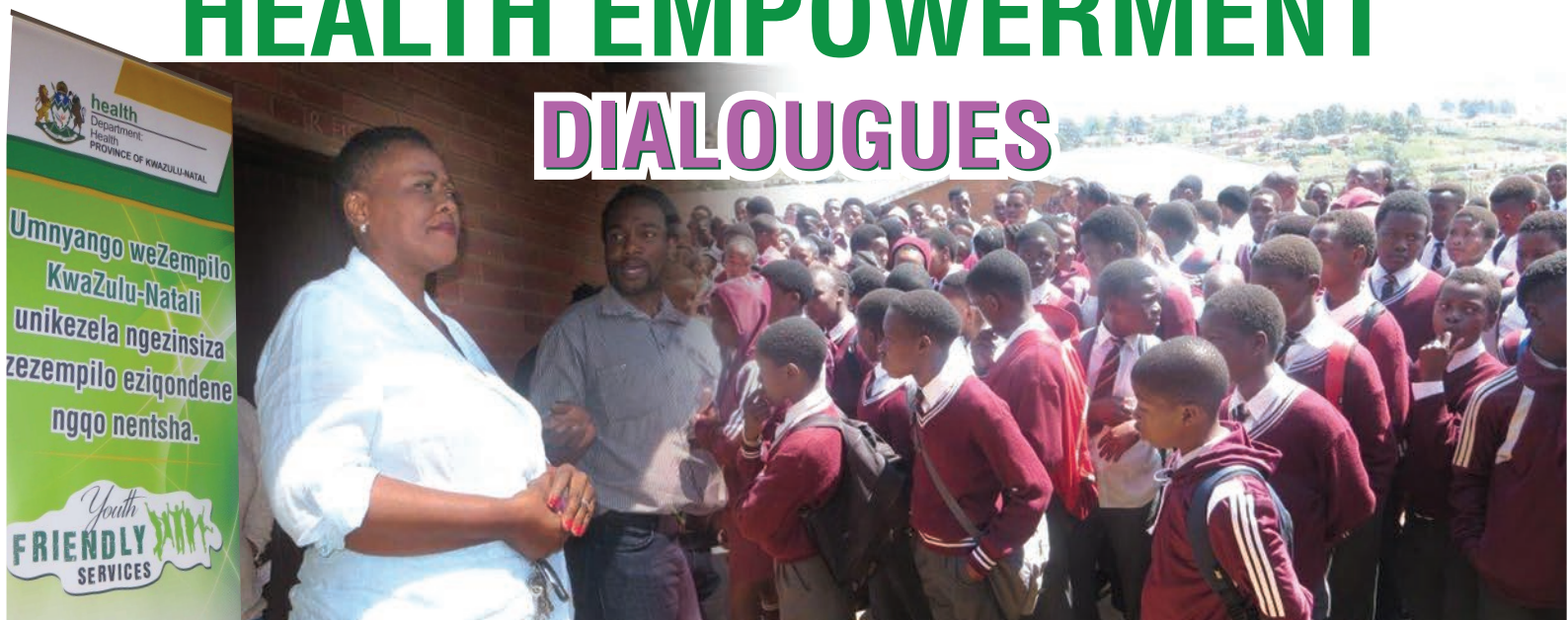
In handing over the clinic, MEC Dhlomo thanked the King for his continued interest in the health wellbeing of His subjects, saying: 'As a nation we feel very blessed that we have a Monarch that over the years has shown interest in the good health of its citizens. As we again converge here to open the New Usuthu Clinic for close to 12 000 citizens, we thank His Majesty the King, Zwelithini, ka Bhhekuzulu for insuring that no-one here dies prematurely because they now have this beautiful health facility which offers:

- o Reproductive Health and family planning
- o Pregnancy management (Antenatal, Perinatal and Postnatal)
- o Integrated Management of Childhood illnesses that include Immunization and weight monitoring
- o Adolescent and youth friendly services
- o HIV and AIDS as well as Sexually transmitted infections management
- o Cervical screening
- o Oral care
- o Management and treatment of communicable diseases; common illnesses; Chronic care and geriatric diseases
- o Diagnosis and referral of rabies
- o Mental health care services as well as,
- o Recruitment for circumcision'

The Usuthu Clinic offers its health services on a 24 hour basis and is visited by a Doctor from Benedictine Hospital twice a month. it also services three mobile points for hard to reach areas and is supported by the Health System Trust, an NGO that visits once a month to help with ARV initiation and Prevention of Mother To Child Transmission of HIV Management.



# YOUNG WOMEN HEALTH EMPOWERMENT DIALOGUES



Schools with high teenage pregnancy rates at Vulindlela in Umgungundlovu District were recently visited by the KZN Department of Health to roll out health services to in school youth and the community. The services were brought under the umbrella of the Adolescent Youth Friendly Services Campaign where the Department provides information to school going children and engage with them on issues of sexual health and the dangers of having sexual relationships with older men.

The visit to Vulindlela was prompted by the high occurrence of teenage pregnancy in four schools, Qondisizwe High School, Laduma High School, Sikhululiwe High School and Mpande High School. Amongst all these schools the most affected is said to have 21 learners that are pregnant. A team of healthcare professionals visited Vulindlela and held dialogues with the learners and community with the aim of arresting the scourge of young women having unprotected sex which result in teenage pregnancies and exposure to HIV infections.

The dialogues entailed having a public address during school assembly, followed by a meeting with the Learner Representative Council (LRC) and lastly a deep conversation with the pregnant learners. Each level of engagement was geared towards sharing information on health management and neonatal support programmes for the pregnant learners. The health outreach to schools is in line with the National Young

Women and Young Girls Campaign which was launched by the Deputy President at the Royal show grounds in June and the research done by CAPRISA. The susceptibility of Young Women and Young Girls to various diseases including HIV was also a key subject during the 21st International Aids Conference such that the Young Women and Young girls Campaign was named there with a title "She Conquers".

## The dialogues are meant to strengthen the 5 key pillars of this campaign which seek to:

- Decrease new HIV infections in girls and young women.
- Decrease teenage pregnancies and number of deliveries in girls less than 18 years of age.
- Increase retention of girls and adolescent girls in school until matric.
- Decrease sexual and gender based violence adolescent girls and young women.
- Increase economic opportunities for young people and especially young women.

The Departments' Youth, Gender and Transformation Directorate regularly convenes such dialogues throughout the province in a bid to reach as many young women as possible. Vulindlela is the latest area to be visited with an integrated programme where numerous departments also joined to render services and empower young people.

## *Celebrates* **WOMEN IN LEADERSHIP**



**DR LINDIWE SIMELANE**  
DDG: Specialised Services and Clinical Support



**DR SIPHIWE MNDAWENI**  
DDG: District Health Services

**KwaZulu-Natal Health MEC Dr Sibongiseni Dhlomo says he is proud of the impact that female managers in the department are making in accelerating service delivery.**

The Department not only has two female deputy directors general in Dr Lindiwe Simelane (Specialised Services and Clinical Support) and Dr Siphwe Mndaweni (District Health Services), out of four, but 34 out of 49 hospital CEOs and 56 out of 156 medical managers are women.

And out of 3678 doctors, nearly half of the province's doctors – 1828 – are women. Out of a further 744 KwaZulu-Natal students who are studying medicine in Cuba, a considerable 301 are women.

In the generally male-dominated field of Infrastructure Development, Michelle de Goede and Gugu Masondo are keeping the flag of women flying high as senior managers for Planning and Programme Delivery respectively.

The unit also has eight female deputy managers. They are: Yolanda Thambiran (Health Facility Planner), Angela

Forbes (Chief Architect) Hazel Ndwandwe (Chief Quantity Surveyor), Xolisile Mtolo (Chief Project Manager), Nonzukiso Mbambalala (Chief Works Inspector), Mbali Maduna (Monitoring and Evaluation), Nonhlanhla Mngadi (Real Estate) and Silindile Ngcobo (Occupational Health and Safety).

MEC Dhlomo says these Department's female employees are living proof that gender is not an impediment to service excellence and achieving personal goals in democratic South Africa.

“As a Department we firmly believe in women empowerment. We are extremely proud of these women, who are making a mark in their respective fields as managers. They are living proof that if you work hard you can attain your goals, irrespective of your gender, race or social station in life. In a month where we honour the special women in history, as well as those who are in our midst, I wish to congratulate them and urge them to continue working hard. They are an inspiration to other young women out there, and living proof that nothing is insurmountable,” said MEC Dhlomo.



# PRAYER TO COMMEMORATE FALLEN EMPLOYEES OF THE DEPARTMENT

Health MEC Dr Sibongiseni Dhlomo has urged women not to stay in abusive relationships, but to immediately seek help if they feel that their lives may be in danger. MEC Dhlomo said this at a prayer meeting held at Grey's Hospital to pay tribute to three fallen Department employees, who were all allegedly murdered by their partners.

The employees are:

- Sr Thabisa Daysen Doyisa, a midwife at Edendale Hospital, who was gunned down in her home, in Naperville, in Pietermaritzburg, on 22 April 2016;
- Twenty-eight year-old Nelisiwe Shelembe, a professional nurse from Grey's Hospital, who was shot dead, in Pietermaritzburg, on 07 April 2016 while on her way to work, and
- Mrs Ntokozo Molefe, a labour relations manager who was stabbed to death on 06 March 2016.

A sombre atmosphere hung inside the hall at Grey's Hospital, with relatives of the departed looking on solemnly from the front row seats, as prayers were said and hymns sung.

MEC Dhlomo said that it had been a wish of his to meet these families and help them find closure.

He described healthcare workers in general as "a gift from God, who minister in a wonderful way," adding that their deaths were always difficult to deal with. "When they die, even if their deaths are natural, it is always painful to us. It is even worse when their lives are taken by people who are supposed to love and protect them." "The violence that is there in society... whenever you hear a woman has been raped, shot, or stabbed... it is usually men who are the perpetrators. To all women out there, I wish to say, if it concerns your life and you feel that you are under threat, report it. Do not stay in an abusive relationship."

MEC Dhlomo also urged all nurses in the province to exercise care and compassion towards terminally ill patients, saying that affording them dignity may deliver them from spiritual pain, which may automatically result in relief from physical pain. "Damp dusting windows in the wards should move towards ensuring that your patients are always in a dignified state. Wipe their faces, apply petroleum jelly or another ointment... Even when they pass away, it helps relatives cope better when they see that their loved ones were being looked after," he said.

# MEC CALLS FOR URGENT ACTION TO AVOID EYE-RELATED AILMENTS



**KWAZULU-Natal Health MEC Dr Sibongiseni Dhlomo has called on the people of the Province to take better care of their eyes to prevent problems, and act quickly when ailments arise.**

This as the country commemorates World Eye Care Awareness Month, which began on 19th of September to 16th of October 2016.

According to the South African National Council for the Blind (SACB), 80% of blindness can be prevented. A significant preventative measure is ensuring that your eyes are regularly tested, increasingly so as you age. Your eyes should be tested every 3- 5 years if you are over the age of 40 and annually once over the age of 60 since the elderly have a higher chance of attaining damages to the eyes resulting in conditions such as glaucoma and cataracts.

*“Our concern is that most eye conditions are detected very late. Therefore, we would like to call for all people to have their eyes tested. Every child who complains about eyes should be taken to the doctor immediately. Children under the age of 5 years must get a dose of Vitamin A every six months. And people with Diabetes Mellitus and Hypertension must have their eyes tested yearly,”* says KZN Health MEC.

MEC Dhlomo also stresses the importance of regular physical exercise, following a healthy diet and drinking a lot of water to reduce risk of chronic diseases. He adds that donating the cornea can be a very important gift to save other people's eye sight.

MEC Dhlomo says the KwaZulu Natal Province is well equipped and resourced to deal with eye and sight problems saying:

*“In our hospitals we now have deployed ophthalmic nurses and we continue training more at the Edendale Nursing College. We also have optometrists even at Community Health Centres.”*

For complicated eye problem cases, the Department has McCord Hospital which was commissioned in April 2015 as an Eye Care Centre of Excellence that offers:

- High volume cataract surgery service for the whole province with planned 40 operations per day
- Links secondary, tertiary and outreach eye services to all the districts
- Tertiary ophthalmic services
- Optometry and refractive service
- Optical laboratory for in-house production of glasses, contact lens in phases
- Regional Training centre for post graduate students, registrars in Ophthalmology, Ophthalmic nurses and Optometry students through the University KwaZulu Natal.

MEC Dhlomo says: “The fact that up to 80% of blindness is avoidable means that each and every one of us has a responsibility to ensure that we take better care of our precious eye-sight by presenting early to facilities. Help is at hand.”

# REVIVING WORKPLACE ETHICS CHAMPION

MS PRASHEEKA PADAYACHEE

# SHEDS MORE LIGHT

## Ethics in the workplace

Organisational ethics refers to the values and the standards that determine the interaction between an organisation and its stakeholders. Whilst there are many definitions for ethics in the work place, it is generally accepted that being ethical involves:

- Conducting oneself in accordance with accepted principles of right and wrong
- Behaviour that is based on certain standards of conduct which are aligned to shared principles and values that guide the individual
- Using integrity based decision-making procedures to guide ones actions
- Being morally right, honest and acting with integrity in all relations with the employer, co-workers or clients
- Not committing acts of theft, fraud, corruption, misusing departmental resources, amongst others
- Treating all stakeholders with respect, dignity and without discrimination
- Not wilfully misleading colleagues or the employer

It is basically doing the right things, for the right reasons, even when not being watched by anybody. Ethics is the basis for good corporate governance which is essentially about effective, responsible and accountable leadership.

## 1 ONE

**Some people may not have been aware that there is an Ethics Committee in the Department. For the benefit of our readers, please tell us what it does and what its objectives are.**

The Department established an Ethics Committee, which is made up of a multi-disciplinary team, at the Head Office. This Committee is responsible for providing strategic direction, oversight and control of ethics management activities in the work place. The Ethics Committee must ensure collaboration and integration with other ethics related functions, such as anti-fraud and corruption, risk, compliance, internal audit, investigations and labour relations.

The Ethics Committee also plays a pivotal role in monitoring and reporting of ethics activities in the Department, the overall ethical performance based on a code of ethical conduct (soon to be released).

The Ethics Committee will report on ethics related matters to the Senior Management team (ManCo), on a quarterly basis.

*continued on page 13 >>>*

## 2 TWO

### Which legislative framework are these ethics and values and objectives based on?

Since ethics cuts across all activities within the Department, it is informed by various pieces of legislation and other prescripts. Key to ethics is the Constitution of the Republic of South Africa, 1996, Public Service Act, as amended, 1996, Public Administration Management Act, 2016, Public Finance Management Act, 1999, national health Act, 2003, KwaZulu-Natal health Act, 2009, the Promotion of Administrative Justice Act (PAJA), 2000, the Promotion of Access to Information Act (PAIA), 2000, Protection of Personal Information Act (POPI), 2-14, protected Disclosures Act, 2000 as well as the Public service Integrity Management Framework, Public Service Code of Conduct, King Report, I, II and III, Public Service Anti-Corruption Strategy, 2002, the Minimum Information Security Standards (MISS), Whistle Blowing Policy, amongst others.

## 3 THREE

### What is your analysis of the status quo in the Department, regarding adherence to the highest ethical standards?

The Department has to establish an ethics risk profile, which is part of the activities that will unfold in the next few months. As a Department we are aware of the unethical conduct of some employees, who commit acts of theft, fraud and corruption and the like, however this is not an indication that we operate in a totally unethical environment. Most people are generally honest and want to do the right thing. The roll out of ethics awareness and promoting ethics dialogues will assist in analysing the perceptions and realities in terms of how ethical the operational environment is. It must be remembered that ethical conduct is expected not only of the employees of the department, but also its stakeholders such as the general public, suppliers and clients that we serve and that we have to always consider the expectations of these stakeholders.

Another area that needs to be strengthened is the identification of role-models within the Organisation that employees/colleagues can approach to discuss ethical dilemmas that they may face in their day to day work.

## 4 FOUR

### What are some of the most common examples of non-adherence to ethics that you've found in the Department?

#### Some examples that come to mind are:

- Theft of resources – medicines, revenue collected from patients, mismanagement of time and leave, groceries and other supplies
- Fraud and corruption – tender fraud, ghost employees, nepotism, bribery
- Dishonesty in financial disclosures in some instances
- Employees doing business with Government

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## 5 FIVE

### Why is it important to adhere to the above-mentioned ethical standards in the workplace, particularly in the KZN DOH?

The Department must be seen to be adhering to corporate governance principles. As a service delivery department, we are accountable to all our stakeholders and the communities we serve. Public funds are utilised to implement our constitutional mandate and there should not be abuse of such resources, abuse of power, and there should always be clean governance practices which allow us to account with honesty and transparency to all stakeholders. Public funds must be utilised for their intended purpose and as public servants we owe it to the public to do exactly that. Being unethical will bring disrepute, leading to loss of credibility and confidence in the Department.

When the Department is seen as ethical, it will improve the image of the Department as well as the perception of public service as a whole which is something we are all striving for. Ethical behaviour in an Organisation ensures that you are accountable for your behaviour and decisions (ethical decision-making)

## 6 SIX

### What will the Department do to ensure that these ethical standards are adhered to?

**The Ethics Committee together with the Ethics Office will develop and implement the following:**

- A Code of Ethical Conduct
- An Ethics Policy for the Department
- Ethics strategies – workshops, posters, leaflets, ethical dilemma dialogues/coffee breaks amongst other things.
- Creation of departmental web page for Ethics where information will be shared. This will include ethics bulletins received from The Ethics Institute South Africa (TEI)
- Dedicated line for reporting ethics related matters

## 7 SEVEN

### What are the consequences of not adhering to these ethics for individuals?

Non-adherence to the Code of Ethical Conduct does have consequences. Employees who are allegedly guilty of unethical behaviour will be subjected to the relevant disciplinary procedures/investigations/criminal proceedings etc. Sanctions will be imposed accordingly.

## 8 EIGHT

### What is expected from both internal and external stakeholders in relation to support they can give to the Ethics Committee, if any.

As employees it is our responsibility to report any known or potential unethical conduct to the Ethics Committee. All incidents of unethical conduct lodged will be treated with utmost confidentiality. Employees who fear reprisal/victimisation will be able to report independently of their direct line supervisors/managers.

External stakeholders also have a responsibility to ensure that the Department is conducting itself ethically – that it is meeting the expectations of the public and the communities we serve. Should any external stakeholder be aware of unethical conduct of an employee/supplier/etc, this must be reported to the Department for further attention.

# BIG HERITAGE AWARDS FOR KZN HEALTH INFRASTRUCTURE DEVELOPMENT TEAM



**KWAZULU-Natal Health MEC Dr Sibongiseni Dhlomo has congratulated the Department's Infrastructure Development team for working hard to restore the integrity of buildings considered to be of historical significance in the province.**

**This follows the handing over of two prestigious awards by the Heritage Society of South Africa awards to the Infrastructure Development team yesterday, in recognition of its efforts to renovate the Old Boys Models School (OBMS) and the Edendale Hospital Nursing College, both in the city of Pietermaritzburg.**

Once completed, the OBMS building, situated on 310 Jabu Ndlovu Street, will be used as office accommodation for government officials. The Boys Model School started as Pietermaritzburg High School in 1866 until 1887 when it moved to College Road.

The property was always owned by the state, but after the school moved out, its condition began to gradually deteriorate. Apart from major termite infestation which caused serious structural damage to the roof timbers, the building also suffered an invasion by homeless vagrants, who stripped metal flashing and valley linings to sell for cash and ripped out sash windows and doors which they burned for firewood.

Meanwhile, the people of KwaZulu-Natal are already reaping the rewards of the renovation of the Edendale Nursing College building, which is now a state-of-the-art institution.

The building was inherited in 2003, following the discontinuation of a 99 year by the Pietermaritzburg Rotary Club. At the time, the building was already more than 100 years old with a huge maintenance backlog. Being a former Government School, it was found to be an ideal building to house a Nursing College because of the appropriateness and the size of the space necessary for classrooms and other support facilities.

The renovation project, which began in 2011 and ended in 2013, presented an opportunity to install latest technologies around IT, electrical and mechanical Installations including modernizing of computer room, library, model wards ablution facilities, security entrance and landscaping.

In congratulating the Infrastructure Development team for receiving the awards, KZN Health MEC Dr Sibongiseni Dhlomo said: "We are very proud of the good work that has been done by the Infrastructure Development team, under the leadership of Mr Bongi Gcaba, to renovate and restore these buildings for the benefit of the Department and the people of KZN."



# KZN DEPT OF HEALTH EMPLOYEES REWARDED FOR THEIR LOYALTY AND DEDICATION AFTER 40 YEARS' SERVICE



**Ms Prasheeka Padayachee**  
Chief Director: Executive Support Service

**Ms Shanti Ramkilowan**  
Deputy Principal of the KZN College of Nursing

**Mr Jabulani Gumede**  
Pool Vehicle Driver

**PASSION**, selfless dedication and an unwavering will to always serve the public with distinction. These are the three common qualities that have underpinned the longevity of three employees of the KwaZulu-Natal Department of Health who received accolades after 40 years of service.

The employees are Deputy Principal of the KZN College of Nursing Ms Shanti Ramkilowan; pool vehicle driver Mr Jabulani Gumede; and the Chief Director: Executive Support Service Ms Prasheeka Padayachee.

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## 40 Years' Service



“And once you become a nurse, you must stay focused, committed, dedicated and honest. You must communicate. You must always remember as a nurse that you are dealing with patients’ lives. That’s very important. Also, you must stick to the ethics of the workplace, then you will go a long way.”

She believes the impact of nurses in the value chain of healthcare is such that the profession should be the most recognised in the world.

“Nurses save people’s lives. They have the lives of patients in their hands, unlike doctors, who are in short supply all over the world. As a nurse, you are the eyes, the ears... you’re everything, of the patient. You’ll be the first to recognise a change in the patient’s condition. You have to know your patients. You have to be there for them, on the ground. And it is very rewarding. When you see that you’ve saved a patient’s life, nothing compares to the feeling... I loved working in casualty and in the resuscitation ward.”

## Shanti Ramkilowan

Ms Shanti Ramkilowan is a self-confessed bookworm who genuinely cares about the nursing profession. For her Master’s degree – which she completed at the tender age of 62 last year – she did a thesis based on the causes of attrition among nursing students. She interviewed 290 students.

Among her findings were that some people enter the nursing field despite it not being their career of choice, while many are not aware of the academic intensity of the nursing course and the amount of work it involves.

### So, what does it really take to become a nurse?

“The passion must come from you, from inside. You must want to be a nurse. It is a calling,” she says.

She joined the Department as a nursing student at RK Khan Hospital in Chatsworth, Durban, in 1973. She then worked her way up the ranks, becoming a midwife at Northdale Hospital before getting her diploma in nursing education in 1981. This allowed her to become a nursing lecturer. In no time, she had been promoted to senior lecturer. She became assistant manager at Grey’s Hospital nursing college in 1997. The following year, she became deputy principal of the then Natal College of Nursing, acting as the principal soon afterwards until 2004. For the past 11 years, she has been one of two vice-principals of the KZN Nursing College, responsible for 10 of the Department’s 25 nursing schools and four campuses in Zululand, Amajuba, Umzinyathi and King Cetshwayo (ex-Uthungulu) districts.

When she retires in 18 months’ time, the mother of two and grandmother of one hopes to find time to pursue some of her hobbies. “I love flowers. I love knitting, and doing lots of community work.”

Shanti Ramkilowan

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## 40 Years' Service



“Time is everything,” he says, in IsiZulu. “You have to be on time. It’s a mark of respect for other people. When you are late, you end up making mistakes. You must also give people your time. My job has often entailed working away from home, ferrying people to conferences, sometimes during weekends. You can’t be in a rush. You can’t just leave people, you have to wait.”

A devout man of God, he adds: “My Maker has been good to me. It is not of my own doing that I’ve had such a long career without accidents. God has been protecting me all this time.”

He is just as meticulous when it comes to ensuring the roadworthiness of all vehicles that he uses. “You have to check the vehicle thoroughly before using it, and be convinced that it has no problems. If there are, then you must endeavor that they be fixed, or you don’t use it. That way, everything will always go smoothly.”

His advice to others who wish to have similar staying power in the workplace?

“You must learn to be content with what you have. Finding faith at a young age has helped me a lot in my life. Many people that I started working with left. I must admit, there were times when I thought I’d leave, but I didn’t. There’ll be ups and downs in life. You just persevere, work hard, and respect yourself, your job and the people around you.”

Mr Gumede says that when he retires next year, he will spend most of his spare time preaching the word of God.

## Jabulani Gumede

Mr Jabulani Gumede, a father of four children and two grandchildren who lives at Imbali Township, Pietermaritzburg, joined the Department in 1976, as a general worker. He became a driver five years later. The soft-spoken, well-dressed 64 year-old is a stickler for time management, and says he has never been involved in a single motor vehicle accident in his career - except for minor fender-benders which were caused by other drivers.

## Jabulani Gumede

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## 40 Years' Service



“I developed a passion to serve and always believed in doing the very best in my job, so that I could realise a sense of achievement in serving the needs of others,” she says.

“I’ve also benefitted from the set of values that were inculcated in me in my early days of employment – a strong sense of discipline, loyalty and commitment have remained high on my agenda throughout my career.”

The 59 year-old, who has three children and one grandchild, was born in Pietermaritzburg and has lived there all her life.

She started out as an administration clerk at Northdale Hospital on 01 May 1975. Having served for 17 years at the hospital and having achieved the post of Administrative Assistant, she was promoted to the post of Principal Personnel Officer in the former General Provincial Services which was based at Natalia building, in Pietermaritzburg at the time. In March 1993, the amalgamation of the former KwaZulu-Government Services and the Natal Provincial Administration resulted in the disbandment of the General Provincial Services Unit. This saw staff being redeployed to different departments.

She moved to what was known as the Community Services Branch at the time, which was later renamed Local Government and Housing and which is now the current Co-Operative Governance and Traditional Affairs (COGTA). Whilst there, she was promoted to Personnel Practitioner and thereafter to Senior Personnel Practitioner and remained there in the Human Resources Policy Unit until July 1998. That year, she was promoted to Deputy Director in the Office of the Head of Department of Health. She became Director in the same office, a position which she held until a further promotion in 2006 wherein she took up the position of General Manager: Corporate Governance.

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## Prasheeka Padayachee

Commitment to service excellence is Ms Prasheeka Padayachee’s second name. Never one to settle for less, her job entails providing executive support to the Head of Department and the MEC, covering a wide range of strategic activities. This includes managing relationships with stakeholders, managing identified special projects, and co-ordinating functions relating to donations and sponsorships. She also prepares complex reports and presentations, and the project management of the prestigious MEC’s Annual Service Excellence Awards ceremony (MASEA), among others. She is also responsible for the overall leadership of Inter-governmental relations, which includes international relations. She also manages ethics in the workplace.

## 40 Years' Service

She held this position until December 2012. At the start of 2013, she became Chief Director: Executive Support Services in the office of the HOD, where she is currently based.

Sharing her pearls of wisdom about life, she says: “Nothing comes easily. It takes hard work, sheer dedication and perseverance to achieve your goals in life. I’ve always lived by the values inculcated in me by my parents. Education is the best legacy that I can give my children so that they can have a good quality of life – the rest is up to them. Life has also taught me that it’s critical to embrace change, in order to be successful in life.

“Young people should learn that a qualification does not get you to where you want to be immediately – give yourself time to acquire experience and become an expert in your job before taking the next step. Build confidence, be hungry to learn new things. Do not be afraid of new challenges – they will make you stronger and help you grow. Remember that when you choose your career, you must have a passion for it. Always be true to yourself and hold on to your dreams and aspirations. Always put aside emotions in a difficult situation and deal with the issue. Be objective, honest and conduct yourself with integrity. Never give up.”

At a high-level management meeting held at the Department’s provincial headquarters, Natalia building, in Pietermaritzburg, KwaZulu-Natal MEC for Health Dr Sibongiseni Dhlomo and Head of Department Dr Sifiso Mtshali congratulated the three employees for their loyalty, and for serving the Department with distinction.

“We are really fortunate to have in our midst people who are so dedicated to their work. They are a huge inspiration and a good example for others to learn from. They are an inspiration and deserve to be congratulated,” said Dr Mtshali.

MEC Dhlomo added: “We are indeed honoured to call this distinguished trio our own colleagues. Between themselves, they have 120 years of invaluable institutional knowledge and experience in their chosen fields. This kind of loyalty is rare. It is truly special, and it’s something that no amount of money can buy. We hope that other employees will learn something from them before they retire,” said MEC Dhlomo.

*Prasheeka Padayachee*



**health**

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Health  
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