



KWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

NGWELEZANA TERTIARY HOSPITAL

“Our patients, our priority”

NGWELEZANA NEWS HUB

NEWS

MARCH 2021

VACCINATION TEAM AFTER A JOB WELL DONE



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MSF & NGWELEZANA

TERTIARY HOSPITAL PARTNERSHIP



Ngwelezana hospital team led by Mrs C.N.N Mkhwanazi with MSF representative during the stakeholders meeting

Medecins Sans Frontieres (MSF) is an international, independent, medical humanitarian organisation that respond to medical needs of people affected by conflict, disaster and epidemics.

At the end of December 2020 Kwa-Zulu Natal Department of Health requested support from MSF for the COVID-19 response in the province.

MSF decided to concentrate on King Cetshwayo District with an integrated approach (MSF & DOH) supporting Ngwelezana tertiary hospital amongst other hospitals.

In the second week of January 2021 the MSF COVID-19 response team started providing support at Ngwelezana tertiary hospital as the hospital needed more support to respond to the second wave.

Furthermore they had Medical activity manager who was dealing with management of medical services and processes, ensuring that protocols are being followed.

Nursing activity manager who was supporting in the Organizational of nursing services and processes & management of Resources in field Ward.

Public Health Specialist was providing technical support to both doctors and Nurses & conducting trainings .

Inter movements of patients from PBU to field hospital (Covid19 ward) was made easy by MSF as they temporarily donated an ambulance that was doing internal transferees only.

Hospital management appreciate the partnership received when fighting Covid19 second. wave.

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MASS COVID19

COMMUNITY TESTING / LOUD HEALING



DDG: Mr Mfowethu Zungu leading the team during loud healing programme in ward 27



PHC team led by Sr Mtshali (PHC supervisor) during the mass community testing in Ngwelezana Township

On the second week of January Ngwelezana hospital embarked on Loud Hauling in Ward 27 to alert the community about Covid 19 second wave. The awareness was to remind the community on precautions set by the Department of Health to assist in preventing the spread of Covid 19. A team drove around ward 27 handing out Covid 19 related pamphlets to people.

Ngwelezana PHC team held a successful mass community testing program in Umhlathuze Covid 19 hotspot areas namely Eskhawini, Ngwelezana, Mandlanzini, uMhlathuze Village, Arbortum, Ebomvini, Portdunford and the surrounding Taxi ranks and Malls. Total number of people screened was 1698. Those who were found positive were advised on how to isolate themselves and their contacts were traced for testing.



BLOOD DRIVE AT NGWELEZANA TERTIARY HOSPITAL

According to South African National Blood Service, less than 1% of South Africans are active blood donors. A unit of blood only lasts 42 days after donation and, for that reason, it is important for blood donor to donate regularly. Donors can give blood as often as every eighth week.



Every unit of blood can save a minimum of three lives as blood is separated into red blood cells, plasma and platelets. SANBS aims to collect 3000 units of blood per day to ensure a safe and sufficient blood supply in the health care system. (www.sanbs.org.za)

All employees that are eligible to donate blood are requested to be part of the blood drive that occurs every 2 months. Dates will be communicated prior to the drive.

Its not just blood. Its saving a nation, thanks to your blood donation.

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COVID 19 VACCINATION



Vaccination team during the last vaccination day

Mrs CNN Mkhwanazi (Acting CEO) after receiving vac-

King Cetshwayo District kick started its first phase of the vaccination rollout Programme using Johnson & Johnson vaccine on the 29 March 2021.

Ngwelezane hospital old citizen 66 year old Dr Rolinson (HCU Orthopaedic) was one of the frontline workers who received singled dose with no complication.

The first group of health care workers across the district visited Ngwelezana hospital to receive their shot of the vaccine. 2000 vaccines were successfully administrated in 4 days.

Gratitude is forwarded to the vaccination committee for working tirelessly in ensuring that vaccination rollout programme runs smoothly with no glitches. Support from partners is always appreciated as they played a crucial role in making the programme a success.

The single dose J&J vaccine is currently being administrated to the country's health care workers as part of the Sisonke implementation study.

All health care workers are encouraged to register using electronic data system self registration Programme in order to qualify to get a vaccine.

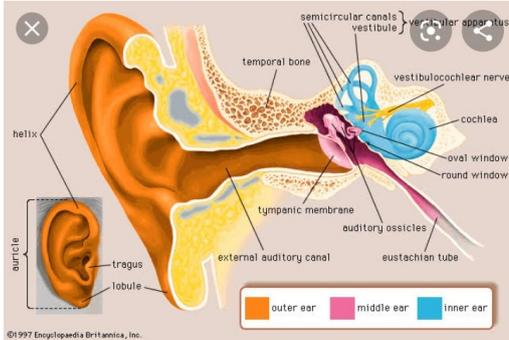
Dr Garach (HCU Emergency Unit) was the first person to be vaccinated in King Cetshwayo District.



WORLD HEARING DAY

World Hearing Day is an initiative of the World Health Organization (WHO) that is internationally held on the 3rd of March each year to raise awareness on how to prevent hearing loss, promote ear and hearing care across the world. According to WHO, over 60% of hearing loss in children can be prevented through public health strategies.

THE STRUCTURE OF THE EAR:



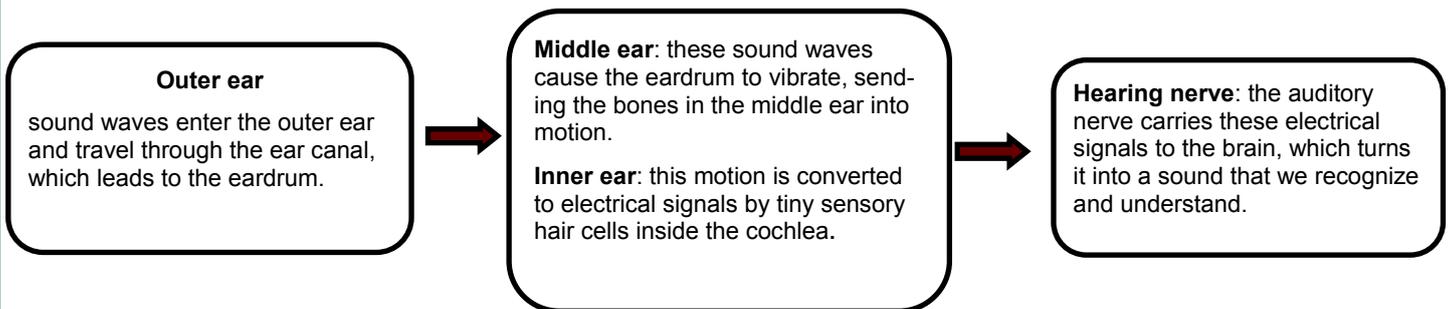
The ear anatomically consists of the sound conducting system (outer and middle ear) and sound transducing system (the cochlea)

The outer ear: Pinna and external ear canal

The middle ear: Tympanic membrane, ossicular chain (malleus, incus, stapes) which are the smallest bones in the human body and the middle ear space.

The inner ear: Cochlea (organ of hearing), vestibular labyrinth (organ of balance)

HOW DO WE HEAR?



TIPS ON HOW TO CARE FOR YOUR EAR

Do's

- Clean the outer part of the ear with a soft cloth
- Visit your nearest health care facility in case of ear pain, discharge or hearing difficulty.
- Only use medication prescribed by a qualified health care professional
- Protect your ears from noise by using appropriate hearing protection devices such as ear plugs when exposed to a noisy environment.
- Test your hearing every year at local clinic

Don'ts

- Don't put hot contents in the ear
- Don't use unknown home remedies
- Don't insert pins, cotton buds, match sticks or tissues in the ear
- Swim or wash in dirty water
- Don't share headphones or ear plugs

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FROM LEFT: Mr. T Mncwango (CSO Audiologist NGWH), Ms. A. Mkhulisi (Audiologist QNH), Ms. M. Govender (Chief Audiologist QNH), Ms. N. Ndlovu (Speech Therapist NGWH) & Dr. L. Setoaba (ENT NGWH).

Bottom row: Ms. G Ndlamlenze (Audiologist QNH) & Ms. S. Sithole (Audiologist NGW),

Ngwelezana Tertiary Hospital Speech Therapy, Audiology and ENT Department in collaboration with Queen Nandi Regional Hospital Audiology Department using this year's theme: "Hearing care for ALL! Screen. Rehabilitate. Communicate" dedicated these three days 02 March – 04 March 2021, to celebrate world hearing day.

The campaign's aim was to ensure that the communities are given preventative actions to avoid hearing loss and how to care for their ears.

It is hoped to publicize the event not only to raise awareness for individuals in the community who may be at risk of hearing loss, but also to raise awareness to health care practitioners who are in the forefront in order to facilitate efficient referral pathway

The campaign was hosted at Queen Nandi Regional Hospital and two surrounding Primary Health Care which were Mandlanzini and Mkhontokayise Clinic.

On the first day 02 March 2021 the multidisciplinary team from Ngwelezana Hospital went to Mandlanzini Clinic in Richards Bay.

On the second day 03 March 2021, the team went to Queen Nandi Regional Hospital together with the Queen Nandi Hospital team and on the third day 04 March 2021 they went to Mkhontokayise in Port Dunford.

Information stands with complimentary gifts, pamphlets and banners containing a written form of the educational talk were made available in both IsiZulu and English to cater for every personnel who attended the hospital and the PHC's.

There were educational talks covering topics such as structure of the ear and how does sound travels, improving ear hygiene and hearing care.

The screening program followed after the talk in all three days conducted by the Audiologists and ENT specialists.

Screening was conducted to the willing general public attending the clinics and Queen Nandi Regional Hospital, interested healthcare personnel were screened.

Audiologists visit the local clinics every Tuesday and Thursday

SALT AWARENESS WEEK

Salt awareness week ran from 8 – 14 March 2021. This week aims at raising awareness to the members of the public on the dangers of salt and to provide evidence-based interventions to protect the population's cardiovascular health. A high intake of salt leads to high blood pressure (hypertension), which is a major cause of cardiovascular diseases and premature death. It can exacerbate diabetes, cataracts, kidney disease, osteoporosis, and stomach cancer. Salt also contributes to oedema (swelling and water retention in the body). Cutting down on the amount of salt one ingests has many health benefits, it helps to reduce your blood pressure in a short space of time, it also reduces the risk of developing cardiovascular diseases and stroke.



kid-

dema

South Africans consume more than the recommended amount of salt per day (5g and less), they consume 6 to 11g of salt per day. 55% of salt consumed by South Africans is hidden salt, which comes from processed foods. Discretionary salt accounts for 40% of salt consumed, it is salt that is added during cooking and at the table. This high intake of salt contributes to the high prevalence of hypertension in South Africa. One in three South Africans has hypertension, and 50% of people with hypertension are unaware of their condition. Only a third of the hypertensive population is on treatment, and of those, only a third has adequate control of their hypertension. Hence, hypertension is responsible for 50% of strokes and 42% of heart attacks in South Africa.

Among different ethnic groups, all types of bread remain the single greatest contributor to sodium intake, approximately 5-35% of sodium intake comes from bread. The South African 2013 sodium regulations have been a literal lifesaver by restricting salt levels in certain foods, this regulation reduced the salt content of foods like bread, potato chips, and stock cubes. However, the sodium legislation does not apply to all salty foods, and choosing foods with less salt remains a challenge. The greatest challenge with nutrition labels is that salt is hidden under names like sodium glutamate or baking soda, and suggested portion sizes on products are not always appropriate. The Heart and Stroke Foundation South Africa urge all food manufacturers to comply with sodium limits and that the salt content of food be made easily discernible.

Written by MS Mkhize (Community Service Dietitian, Ngwelezana Hospital)

Source: The Heart and Stroke foundation CVD statistics reference document

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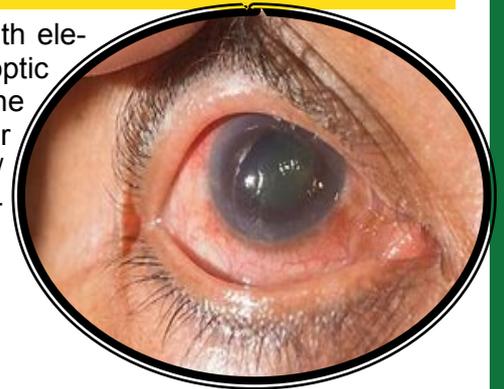
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GLAUCOMA AWARENESS

Glaucoma is a common eye disease that is often associated with elevated intra-ocular pressure in which damage to the eye (optic nerve) can lead to loss of vision and even blindness. It is the leading cause of irreversible blindness in the world. Intra-ocular pressure increases when too much fluid produced in the eye / the drainage or outflow channels (trabecular mesh work) of the eye become blocked.



PEOPLE AT RISK OF GLAUCOMA

- ◆ People aged 6 years and older are six times higher at risk.
- ◆ People with diabetes leading to diabetic retinopathy
- ◆ People from families of glaucoma history (hereditary)
- ◆ People who had trauma

SIGNS AND SYMPTOMS

- ◆ Most of the time it is painless
- ◆ Patient experience peripheral loss of vision
- ◆ Sometimes it is accompanied by pain and headache leading to nausea and vomiting
- ◆ Tunnel vision leading to loss of vision if not treated
- ◆ If not attended lead to blindness that is irreversible

TREATMENT

- ◆ Glaucoma cannot be treated but vision only be maintained by using medication such as tablet, eye drops and eye ointments that are used continuously (chronic medication) to control intra-ocular pressure
- ◆ Surgery is also done for fluid drainage so as to decrease intra-ocular pressure if necessary (trabeculectomy)

On the 11-12 March 2021, Ngwelezana Eye Clinic department held a Glaucoma awareness to educate patients about Glaucoma. The awareness took place at the outpatients department entrance where it was accessible to all patients who wanted to be a part of it. Patients were offered a free check up and referred to Eye Clinic if diagnosed with Glaucoma.



Dr Pupuma (HCU Ophthalmology) and her team during the Glaucoma awareness

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PHOTO GALLERY



Sister Khumalo, OM of Eye Clinic addressing the patients during Glaucoma awareness



Dr Coetzee examining patients.



From left: Mr Sibiya (Principle Telephone Operator NGWH) as the guest speaker advising patients about taking care of eyes



Dr Coetzee examining staff



Inmates who were attending the hospital also got a chance to check their eyes for glaucoma disease.



Ophthalmology team & Quality manager during the awareness.

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WORLD KIDNEY DAY

Chronic kidney disease is a common disease that attacks when your kidneys stop working effectively and efficiently as they should. They lose the ability to filter blood. If left untreated the kidneys could stop working completely. The kidney function can be measured using a blood test which measures the filter function called an eGFR as well as monitoring the urine dipsticks for blood or protein.

There are 5 stages of chronic kidney disease based on the eGFR:

Stage 1: GFR > 90ml/min with abnormal urine or imaging (ultrasound)

Stage 2: GFR between 60-90ml/min with abnormal urine or imaging (ultrasound)

Stage 3: GFR between 30-60ml/min where symptoms of kidney disease become more apparent and a diagnosis is very important

Stage 4: GFR between 15-30ml/min where patients need intensive treatment and may require preparation for dialysis

Stage 5: GFR less than 15ml/min where dialysis and transplantation become necessary

What are the causes of kidney disease?

The most common cause are due hypertension and diabetes. The other common causes include an inflammation of the kidneys called Glomerulonephritis which involves the tiny filtering unit. Some patients, especially females may have auto-immune disease such as systemic lupus which affects the kidneys. Others may have inherited diseases such as Polycystic Kidneys. Another common cause is the use of medications that can damage the kidney such as non-steroidal anti-inflammatories commonly used to treat arthritis.

How is Chronic Kidney Disease monitored?

Early detection and treatment of chronic kidney disease is the key to keeping kidney disease from progressing to kidney failure. Some simple tests can be done to detect and treat kidney disease. They are:

- A test for blood creatinine which gives doctors an estimated GFR (eGFR) and stage of chronic disease.
- A test for protein or blood in the urine. An excess amount of protein in your urine may mean your



kidneys filtering units have been damaged by disease.

Kidney function can be achieved by the following:

- ◆ Taking the prescribed medications and following advice from the health care.
- ◆ Following the diet as advised by the dietician
- ◆ Controlling your blood pressure and blood sugar as recommended
- ◆ Stop smoking as smoking accelerates the loss of kidney function
- ◆ Exercise as recommended by a health professional. One should start a gentle walk every day. Build up the amount of exercise you do slowly so your body copes with it.
- ◆ Maintain a normal weight.
- ◆ It is important to identify stress in your life and manage it appropriately.

TREATMENT

Kidney failure may be treated with:

Hemodialysis: blood is filtered by a machine. A patient gets connected to a machine at least 3 times a week for up to 4 hours.

Peritoneal dialysis: a special fluid is piped in and out of the patient's belly every day. This can be done at home or in a clean environment at work.

Kidney transplantation: a relative or deceased person can donate one of their kidneys by means of an operation.

WORLD KIDNEY DAY CONTINUATION.....

Salt and fluid

Restricting the intake of sodium (mostly from salt) is important to help blood pressure medication to be more effective as well as to help prevent fluid buildup.

Protein

This is an essential nutrient that enables the body to build muscles. Low levels of protein can lead to fluid retention and to a reduction of the body's ability to fight off infections. Too much protein however increases the level of waste products in blood and can make one feel nauseas and lethargic. The amount of protein each patient should consume is individualized according to a patient's weight and stage of disease.

Phosphate

Phosphate is a substance that is widely found in different foods. It works very closely with mineral calcium and the healthy body keeps these two substances in balance. When the kidneys are damaged phosphate levels in the blood may start to increase. High phosphate levels may be associated with itching and over the long term can damage blood vessels and the bones.

Article by: **S.J Makhwasa**

Organ Transplant Coordinator

Ngwelezana Tertiary Hospital held Kidney day awareness on the 15th of March 2021 to educate patients about Kidney disease.



Kidney Transplant receiver, Mr Johnson Mthethwa addressing the patients in OPD about kidney failure



Sr Makhwasa (Organ Transplant Coordinator NGWH), Mr J. Mthethwa (kidney Transplant Recipient), Sr Mwandla (Renal unit OM) & Student nurses.



Nursing students with posters educating about kidney



Sister Makhwasa (Organ Transplant Coordinator) handing patient a gift during a Q&A Session.

STI & CONDOM WEEK

STI & Condom week took place on of March 2021. The HAST unit held an awareness at the Out Patient department to educate patients about STIs and the importance of condom use. STI is a sexually transmitted infection.

Types Of Sexually Transmitted Infections

- * Vaginal Discharge Syndrome
- * Lower Abdominal Pain
- * Male Urethritis Syndrome
- * Scrotal Swelling
- * Genital Warts Syndrome/ Genital Ulcer Syndrome

STIs can be transmitted through sexual intercourse with an individual that is already infected with sexually transmitted infection. Transmission of body fluids (sperm, vaginal or cervical secretions) are also a transmission.

Some sexually transmitted infection can be transmitted to a new born baby during pregnancy and delivery and also by sharing of contaminated needles between intravenous drug abusers.

Male Medical Circumcision

It is the removal of a male foreskin 1,5cm from the prepuce to the corona

The benefits of male medical circumcision:

- * Reduced chances of getting infected with HIV, Aids and STI's
- * It is easy to keep the penis clean
- * It reduces the risk of prostate cancer
- * It reduces the risk of cancer of cervix in female sex partner

Circumcision does not prevent your female partner or your wife from contracting or infecting another with HIV

Circumcision does not completely prevent contracting HIV/AIDS, continue using a condom when engaging in sexual activities.



Sister Ndlovu, Sister P. Khumalo (Hast unit) & Mr T.I Gumedede (Male Medical Circumcision) with student nurses after a successful STI & Condom awareness



Student nurses waving their educational posters



Sr Gumedede briefing the patients about the importance of male circumcision.

WORLD TB AWARENESS DAY

Ngwelezana hospital held a T.B awareness on the 30th of March 2021, this year's theme was: "The Clock Is ticking" this conveys the sense that the world is running out if time to act on the commitments to end TB made by global leaders.

This is especially critical in the context of COVID-19 pandemic that has put End to TB progress at risk and also equitable access to prevention and care in line with WHO's drive towards achieving universal health coverage.

Purpose of the event was to make clients to be aware of TB signs and symptoms.

- Educating the patient and the community to recognize symptoms of TB and to seek health care.
- Patient should understand how to protect themselves and others from exposure to TB by practicing cough hygiene measures.
- To emphasize that COVID-19 AND TB symptoms are similar should also check for TB.
- Knowledge about TB infection and disease may be significant in understanding the models of TB infection prevention and control measures.

TB risk factor

Knowledge about TB infection and disease may be significant in understanding the models of TB infection prevention and control measures.

Infection is the invasion of organisms body tissues by disease causing agents and reaction of host tissues to the organisms and the toxins they produce.

Disease – is an impairment of normal physiological function affecting all organs, it may be caused by external source such as infectious disease and internal factors such as autoimmune disease.

TB infection

TB infection refers to a situation in which a person has TB bacilli in the body and the individual is not sick.

It begins with the multiplication of tubercle bacilli in the body.

Individual is infected with TB bacilli but his / her immune system is strong enough to prevent the bacilli from multiplying.

The individual shows no signs and symptoms to TB.

The individual is not infectious. It is also called latent TB infection. A positive tuberculin skin test is the only evidence of infection.



Sr Biyela and HAST TEAM & student nurses



Sr Biyela (HAST OM) and HAST Outreach Team

ACCOLADES !!

By NhlahloQhub's Mzimela

Compliment captured from Facebook

Been gathering strength to write about my experience with a government hospital just recently ,Ngwelezane hospital to be precise.

I am one person who likes complaining but I also like complementing ngoba nje iqiniso ngiyalithanda.

Having grown up in a home with a medical aid facility and having been on one myself ,I had never had a serious encounter with public hospitals and Infact I have always looked down on them.I always thought laphaya uyalufela ubala.What we read about in the news didn't really help the situation.

I pictured wards full of cockroaches ,amagundane..Nurses abahlanyayo who would shout at you for just breathing.

So when I got hurt one of my daughters engimphiwa wu Jehova Wathi kimi

“Ma wami I know you want to go private but ngiyakucela for your type of ukulimala mina I am more comfortable with Ngwelezane hospital as much as it is a public hospital.I can assure you ,you will get the best treatment laphaya and you will be walking in no time”I was not convinced initially.She insisted that Ingwelezane had the best specialists ahlonishwa umhlaba wonke when it came to ithambo.

Ngaphezu kwa lokho Wathi there are new wards,clean and I know uyazi Thanda so don't worry ku clean la uzobe ukhona and the attitude of the nurses is pleasant.

Day one we went in.There was a strike in Ngwelezane Township on that particular day.We went there and there was a que and I thought uyazini ayikho ke le and I was in pain.My son insisted we left ngoba angeke sisizakale but my daughter naye wayengazibekile phansi ethi asibekezele sizosizakala .

While sitting in a wheelchair in pain ,the doctor ordered medication for me for pain..more doctors started coming in ke futhi no line wanyakaza ngokushesha.

We were told the CEO in charge of the hospital arranged for the police to get the doctors to the hospital as they were stuck due to the strike and I only got to understand that the que was due to the hospital operating with limited doctors then I was at peace.

My consultation time came and the doctor looked at my exrays wanikina ikhanda nami ngabona kubhedile but then she said to me don't worry we will fix you. Bangifaka ukhonkolo banginika I date to come back for a CT scan of which was about 5 days later. I went for the scan and was soon admitted for surgery to fix my left leg.

I spent almost two weeks in the hospital ngoba ngangivuvukele so that had to be dealt with before surgery. I couldn't believe impatho from the nurses,the wards were clean.For food we would be asked about our diets and they got us what we needed with no complaints.I also had great ward mates,kwakuhlekwa lishone.Those ladies were too nice nama stories abo.

Operation time came and nakhona everything was explained to me thoroughly and was even told my operation needed a senior specialist as it was complicated. After almost three hours in theatre I was sent back to my ward and was taken good care of so much so that the pain was not as bad as I had anticipated it to be.I only got scared after seeing the X-rays showing what the doctors had done to fix my leg. The screws and the plates really made feel the pain engekho nje kuwukuthuka

When I thought that was too much ngisa overwhelmed by the whole experience ngathunyelelwa a physiotherapist to teach me how to walk with crutches ekhaya so I don't solely depend on a wheelchair.I remember when she came the first thing I told her was there is no way I can stand up on my own mina and let alone walk

Within an hour the lady had taught me how to stand up on my own using crutches for support and how to walk using crutches .I was so excited I walked out the ward by myself on crutches ,she had to run after me with a chair incase I got tired and I did ngacishe ngawa vele

Anginawo amaningi ngifuna nje ukubona ngempatho engiyithole e Ngwelezane Hospital .My experience was too great and I thought I will not be doing justice if ngingakhulumi o kuhle engikubonile.I hope the department invests in this hospital ngoba they are really doing great kodwa uyabona resources are sometimes limited .

Sometimes there would be limited nurses but shame benga complain kuwukuthi nathi nje siyabona ukuthi cha kunzima sesimbiza sonke nathi ingekho into esingayenza siyamdinga asikwazi nokuhamba si njalo nje.

I also want to command the CEO and her team for the improvement and efforts.The fact that the CEO Organised police to fetch the doctors on the day of the strike made me realize ukuthi she is a selfless individual who only wants what's best for the patients.

I don't know her name but I know she is a lady and ngithi nje Mbokodo Abamaziyo bamtshela ngithe muhle umsebenzi,uyancomeka.

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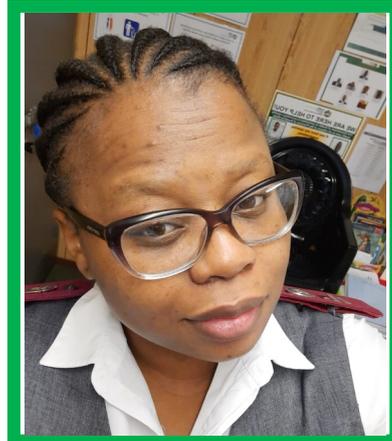
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A WARM WELCOME . .

Ngwelezana Tertiary Hospital is pleased to welcome new staff members, it is of great pleasure to have more staff boarding the ship to help serve our clients. This warm welcome is extended to all staff members who recently joined Ngwelezana hospital. May we all continue to serve our clients better.



Ms N. DLAMINI— SECRETARY TO OFFICE OF THE CEO



MRS N. MKHIZE- MONITORING & EVALUATION MANAGER



Mr T.G NGUBENI — CHIEF ARTISAN



Mr M.T SIMELANE — ARTISAN FOREMAN



Mr K.G MSWELI — ARTISAN FOREMAN



Mr X.T MDLADLA— ARTISAN FOREMAN



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Mr S.E Buthelezi
WRITER
PRO



Ms S.N Mgabhi
DESIGNER
PRO INTERN



Mrs CNN Mkhwanazi
EDITOR
ACEO



Mrs Ntenganyane
EDITOR
RADIOGRAPHER



KWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

CONTACT DETAILS

Physical Address: Thanduyise Road
Ngwelezana township
Empangeni
3880

Postal Address: Private bag X 20021
Empangeni 3880

Web Address:
www.kznhealth.gov.za/ngwelezana

SWITCH BOARD:
035 901 7000

FAX NUMBER:
035 795 1684

Email address :
pro.ngwelezana@kznhealth.gov.za

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