

Health Department Status Quo Report

**Complied by:
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1. VISION

To achieve optimum health and an ecologically safe environment for all households in the Nkomazi area.

2. MISSION

To manage and conduct health services in an effective, accountable, economically affordable and efficient manner and to optimize the use of intersectional collaboration to enhance community development in a democratic and participating approach.

3. KEY PERFORMANCE AREAS

- PHC
- General Cleansing (waste disposal sites)
- Malaria Control
- Business Licensing
- Occupational health and safety service
- HIV/Aids
- Paupers burials
- Water quality monitoring
- Abattoir premise inspections
- Control of Public Nuisances
- Facilities for the Accommodation, Care and Burial of Animals
- Licensing of Dogs
- Hawkers Licenses

4. STRENGTHS

- Experienced staff
- Batho Pele Principles well practiced
- Staff trained in VCT and PMTCT
- Committed staff
- Good political and community support
- Conducive environment

- Good cooperative image
- Good relationship with the state department, NGO's and other stakeholders
- Good patient and nurse relationships
- Have managed to come up with a HIV/Aids and Waste Management Strategic Plan
- Managed to establish a recycling centre
- Established a wellness clinic on Saturdays for infected patients
- Launched a Local Aids Council

5. WEAKNESSES

- Lack of database and information technology
- Not enough mobile clinics
- Lack of communication with the private health sectors
- No section in occupational health and safety
- Policies and by-laws not approved
- Shortage of medication from the source
- Non consistent and unreliable emergency medical services (EMS)
- No Section on Environmental Health

5. OPPORTUNITIES

- Training and skill transfer
- Implementation of projects
- Sourcing of funding
- All staff members have an opportunity for strategic planning and the implementation
- Extend the current services e.g. Waste Management
- Minimizing waste through recycling
- Collection of refuse in rural areas

6. THREATS

- Overcrowding of patients
- Lack of resources

- Personnel
- Finance
- Equipment

- Devolution of services, especially the Provincialization of Health Care
- Lack of environmental health section
- Powers and functions not in place
- Achievements (HIV/Aids)
- In 2003 the Nkomazi municipality launched its Local Aids Council at Langelooop Stadium.

- Appointed a service provider, Thembaletu Home Base Care to manage a project, called, Male Sexuality Project.
- The project is still implemented at Jeppes Reef and is called Siyancoba Madoda.

7. HIV/AIDS Strategy Document

- Nkomazi Municipality saw a need to develop a plan that will help in the Endeavour to fight against HIV/AIDS.
- The strategy is a product of a two days workshop.
- The workshop was held on the 3rd-4th of August 2004.
- Education Training Unit was the facilitator.
- Nkomazi Strategic plan
- Educating the delegates on the issue
- Analyzing the situation by looking at
 - Statistics
 - Available services
 - Future impact of HIV/AIDS
 - * Key needs and gaps in responding to HIV/AIDS

7.1 Nkomazi HIV/AIDS Strategic Plan

- Setting of an overall goal, mission, vision, and immediate objectives.
- Situational analysis and the strategy for the 3 focus areas namely:
 - Education, Prevention and Openness.
 - Caring for people living with HIV/AIDS
 - Caring for Orphans
- Examining the possible co- ordination of services for more effectiveness.
- HIV/AIDS Workplace Policy
- A HIV/AIDS workplace policy for Nkomazi personnel was drafted and presented to the Nkomazi Municipality Policy committee by the HIV/AIDS task team.
- HIV/AIDS workplace programme was drafted, implemented , and monitored.
- An HIV/Aids work place committee has been formed comprising of one employee from all six Departments.
- Know Your Status Campaign
- A ‘know your status’ steering committee was formed.
- An action plan was drafted by the steering committee.
- The action plan was implemented to schools, clinics, church leaders, Farm workers, Social services, Municipal Workers, Youth, Traditional healers, Church Members and Business sector.

7.2 Khomanani Project

- Khomanani Project is a Pilot Project.
- Its aim is to facilitate awareness about HIV/AIDS and TB activism that thinks nationally and acts locally.
- Khomanani Community Partnerships and Ambassadors were selected and trained.
- They are working 10 days a month and each get a stipend.

7.3 The Rural Action Committee

- Trac together with Thembaletu HBC are concentrating on the needs of orphans caused by the pandemic.
- They are conducting a pilot project at Ward 20, 23 and 24.
- Different Departments are involved in this project e.g. DOH, DOE, DO Housing, DOA & LA, Social Services & Matsamo Tribal Authority.
- HIV/AIDS Projects
- HIV/AIDS awareness programmes were extended to the local schools, industries, farms and wards.
- A friendly Road block was done at Nkomazi toll plaza whereby 5000 motorists were issued with pamphlets, HIV/AIDS ribbons and condoms.
- 116 Home Base Care groups from all over Nkomazi were taken on a tour to Kruger National Park in appreciation of the hard work they are doing in the community.
- Treatment of HIV
- Wellness clinics are run weekly in all clinics, whereby the following specialized services are rendered:
 - Prophylactic treatment for PWA
 - Treatment of opportunistic infections
 - Support and monitoring of patients on ARV
 - from Tonga and Shongwe ARV clinics

8. Waste Management

- Waste collection has been extended to rural villages covering 25 000 new households, schools and clinics.
- A regional Landfill site has been permitted in Ward 8 Steenbok, the department of Health has applied for MIG funding to establish the landfill site.
- Cleaning up campaigns were done in a lot of villages. E.g. Ward 1, 2, 3, 4, 5, 7, 8, 9, 10, 12, 23, 24, 29 and 30
- Recycling centre built in Kamaghekeza Ward 4.
- Waste Recycling entrepreneurs were trained to manage the recycling centre at Kamaghekeza. (Nine entrepreneurs)

- During 2000 to 2003 Nkomazi waste collection strategy was formulated through a number of studies that was done to determine the most effective and economical viable option for council to collect and do away with waste
- The studies included a System Analyses, Current Status Report and a Master Plan
- Standby quarters were erected in Malelane and Marloth Park for refuse workers.
- Malaria Control
- Provincial Malaria programme was supported by the department by continuous spraying of all house holds, rivers and pits in Ward 6 and in Ward 7
- The Provincial Malaria programme is continuously spraying all the villages.
- Active surveillance is done continuously in high risk areas
- Paupers Burials
- A marked increase in the number of paupers buried during last five years due to the HIV/AIDS epidemic
- 750 paupers coming from different wards were buried of which most were indigent.
- Hawkers Licensing

- Hawkers licenses are issued to hawkers in Ward 6 and 30.
- 280 licenses are renewable every year for those who occupy council's stands.
- New hawkers facilities were constructed in Ward 6 Komatipoort old airport, Ward 30 Malelane Lorenzo-and Impala streets.

9. Primary Health Care

- Over the last five years our four clinics catered for 360 000 people
- The following services were successfully rendered:

1. Preventative and Promotative Services

1.1 *Awareness campaigns on following Malaria, TB, STI s, HIV/AIDS, Cholera.*

Primary Health Care

2. Family Planning

2.1 *Family Planning Services*

2.2 *Immunizations*

2.3 *Condom Distribution*

3. Curative services

3.1 *Emergency Care*

3.2 *Minor Ailments*

3.3 Chronic Care

10. EXPANSION OF SERVICES TO RESIDENTS

Workings hours were extended in the municipal clinics from normal eight hours to standby service and Saturday morning clinic.

- Mobile operation programme
- Home visits to TB and HIV patients
- Saturday Wellness Clinic
- Support to Local Prisons
- Support to HBC givers
- Food parcels to patients

11. HOW THE DEPARTMENT HAS BENEFITED THE INDIGENT FAMILIES

- Free Primary Health Care service
- Paupers burials
- Accessible services through the mobile clinics e.g. Ndindela.
- Milk supply to indigent families, for infants on PMTCT Programme
- Instant meal and Philani porridge to malnourished children and TB patients

11. COMMUNITY PARTICIPATION

- Clinic Committee
- Home Base Care & TB DOT Support
- Local Aids Council
- First Aid at schools, churches, political rallies
- Women's Clubs
- Recycling Projects managed by community members
- Before the extension of the waste collection project communities were consulted.

12. Water Quality Control

- Water quality is monitored on daily and weekly basis.
- Water tests are done by SABS approved laboratories.
- Where micro organisms are found preventative measures are taken to assure good quality drinking water.

13. Environmental Management

- Continuous monitoring of our water resources is done to ensure safe drinking water .
- Air pollution is controlled on our waste sites.
- Noise pollution is controlled.

- Council approved a no-smoke policy in line with National Legislation.