

Dr Witbooi

The NCOP

Select Committee for Petitions

Report from Nehawu KDH Branch

8 Nov 2018

Dear Honourable and members of the Select Committee for Petitions NCOP

We thank you for providing us the opportunity to present our case on behalf of the staff of all categories of employment at Khayelitsha District Hospital. We wish to state it from the outset that we came here today in spite of an escalation of the usual intimidation from the entire KDH management who consulted and took advice before doing so from the office of Labour relations Cape MDHS Mr Joey Roman.

Yesterday, there was a high flurry of activity and efforts by the KDH management to prevent Nehawu witnesses who were officially invited by the NCOP select committee from attending today's hearing. In order to protect these witnesses from further abuse, intimidation, and victimisation Nehawu decided not to bring those witness along. I submit this copy of an email which was sent out to all staff at KDH on 7 Nov 2018. Although their immediate managers had no objection, Nehawu shop stewards were denied shop stewards leave to attend today's hearing with the hope that it will be a hindrance and prevent us from attending this hearing. The Nehawu shop stewards decided to go ahead and attend this hearing in spite of those efforts from KDH management, even if it meant leave without pay for some of us. We further attach correspondence showing how the KDH acting CEO, Mrs Mashaba, took her usual abuse of position of power another step further when she prevented our witnesses from attending today. These witnesses were not even allowed by KDH management to use their annual leave to attend these hearings.

In light of the above, we appeal to this committee to assist in stopping all intimidation, threats, bullying and victimisation of staff by KDH Management - assisted by the office of Labour relations Cape MDHS Mr Joey Roman- immediately.

Request from us to this committee

1. We request that a thorough investigation of all the issues raised by us – see all our submitted documents- with resulting appropriate action against all those responsible.
2. We request that this committee assists with the process of steering KDH towards a better opportunity to restore the public image of KDH and improved relations with the community of Khayelitsha.

Background of the issues raised by us

The staff and shop stewards at KDH have followed all the lawful and recommended procedures before turning towards the NCOP for assistance as follow:

1. Using public service regulated Code of conduct and Public service Act grievance procedures
2. Engaging with KDH management and KESS in IMLC (Institutional Management and Labour Committee) meetings
3. Referring issues to the WC Provincial Chamber

4. Requesting Special IMLC meetings (these were declined) in between routinely scheduled IMLC meetings
5. Referring associated cases to the Public Service Commission
6. Referring associated cases to the CCMA
7. Requesting intervention from the office of the Chief Director
8. Requesting assistance from the Head of Department (WC metro) *P. Engelbrecht*
9. Requesting assistance from the office of the MEC for health
10. Requesting assistance from the office of the Premier WC
11. Picketing

We invited the media to our picket in Sept 2017 but only a journalist from the Argus attended. Radio stations, ETV news, SABC news and other newspapers did not attend and showed no interest. The lone Journalist from the Argus declined to publish our story. Thus, we found ourselves even outcasted by the media, the same media who claim to be fighting for press freedom and people's right to be given information.

Misuse of Public Institutions against the staff

We wish to state that we believe that Public institutions like the Office of Labour Relations WC (headed by Mr J Roman) and the Public Service Commission only exist and function on the back of taxes paid either directly through personal Income Tax and VAT by the public or indirectly from taxes paid by employers in private whom the public work for. We therefore expect that these institutions will assist both the staff and management with equal determination and vigour. However, from this experience we learnt that these institutions are mainly, we can almost say only, in the service of management. While the staff are delivering a service to the community, these institutions together with KDH management are constantly busy using this public money to make the life of the staff unbearable by either doing so or tolerating harassment -including sexual harassment-, victimisation, bullying, financial mismanagement, corruption and intimidation of staff. While doing so, the staff and public are left powerless and at the mercy.

Over the past two weeks, the Office of Labour Relations WC together with the Public Service Commission provided "Grievance procedure and staff Discipline Training" at KDH. However, certain supervisors and managers were deliberately excluded from attending these training sessions. When one looks at whom they were it will be found that they were the ones who spoke out against the wrong doings at KDH. Yet, as supervisors and managers they should have been invited to attend. When at least two of these excluded supervisors/managers complained then they were allowed to attend these sessions. The general non-managerial staff of KDH would also benefit from such training sessions. None such training sessions have been mentioned as planned by the above institutions. Once again, are these institutions not funded by public finding contributed towards by all who work at or outside KDH? Why are they only serving management? We ask this committee to assist with investigating how it happened that some supervisors were exclude and by whom from attending that event.

Financial Mismanagement at KDH

Over the past three years we reported the financial mismanagement at KDH to all the above institutions but it all fell on deaf ears. Instead, it continues as we speak here today. I refer you to the various documents to you submitted by us. The case of the CEO of KDH being paid a R quarter million in cash for untaken annual leave is a case in point. The office of Mr Joey Roman (labour relations WC) has been aware of this but noting was done about it. The Public Service Commission did an investigation into this

CEO payment and conclude that they found nothing irregular about it. Consequently, no action was taken to restore public confidence. The argument used by the Public Service Commission in defence of the pay-out to the CEO of KDH was that all the necessary documents to make the pay-out were signed appropriately. It was clear to us that the PSC attempted to cover up and protect this corruption. I refer you to the reply we wrote the Public service Commission report of their investigations of KDH.

In a hospital which repeatedly say that budget and fiscal allocation constrains reduces its ability to provide an improved health service to the Khayelitsha Community, how can any officially followed signing off of documents justify allowing the CEO to not take his annual leave so that he can end up with a cash pay-out of a quarter million rand? In the end the greatest victims here were the community of Khayelitsha.

The current acting CEO of KDH, Mrs Mashaba, appears to be even more dangerous with her abuse of power. Once Mrs Mashaba is thoroughly investigated, we request that everyone who have been part of KDH management under her leadership and knew of her wrong doings but kept silent, be held accountable. All this corruption needs to stop so that provision of an improved quality service can be delivered by KDH.

Quality of clinical care at KDH

As a union, we never dealt directly with quality of care because it is not a direct labour related issue. However, indirectly it is a labour related issue because financial mismanagement, corruption and constant victimisation of staff has a negative impact on the quality of care in the following manner:

1. The required number, type and quality of staff will not be appointed e.g. the case of Mr Stamper
2. The resources of the hospital will not be allocated locally in their most effective way e.g.
 - a. KDH not having enough drivers to transport specimens in between KDH and Tygerberg Hospital during after hours
 - b. a senior Nursing assistant manager have been removed from her position/role by Mrs Mashaba and placed to work away from KDH so that she cannot witness the wrong doings of Mrs Mashaba and Mr Plaatjies,
 - c. Mr Kaizer Mbobo resigned from his position as labour relations officer for KESS a month ago then got re appointed by KESS within one week of leaving to be able to access his benefits. This smells of corruption in KESS. We have heard that the health staff at Mfuleni clinic are unhappy with a recent KESS appointment at Mfuleni because it is alleged that KESS did not follow a proper Recruitment and Selection process. The Mfuleni case appears to be linked with the irregular re-appointment of Kaizer Mbobo. We do know that both KESS and KDH management owe Kaizer Mbobo a lot because even though he was employed at KESS, he assisted and advised them how to not resolve grievances at KDH and get away with it. He also advised and assisted them to render the KDH IMLC dysfunctional
 - d. Two weeks ago, an attempt was made by Mrs Mashaba and Kess to make another irregular appointment into an Operational manager post in the labour ward (where babies are delivered). The process was stopped after KDH staff lodged a complaint. We request that this KESS and Mrs Mashaba be investigated for that incident.

3.

Over loading the hospital with patients without clearly communicated contingency measures e.g.

The Mfuleni drainage area case.

A few months ago, patients from Mfuleni who used to be managed in the Eersteriver drainage area was added to the Khayelitsha drainage area. No clear explanation was given to staff for that decision and no information was provided about the consequences for quality of care of patients at KDH due the increased burden form an additional drainage area. One expects that an executive decision to increase the patient load for KDH would be accompanied with an announcement of increased resources for KDH but it did not happen that way. Thus, staff got exposed to greater risk for individual errors and burnout while the complaints from the public against KDH quality of care escalated.

4. Many high-quality staff will not be attracted to work at KDH due to financial mismanagement
5. Occupational Health and safety will be compromised as has been and continues to be the case at KDH
6. Corruptly appointed staff members will be blindly loyal to management, protect management, and eventually assist with such corrupt practices
7. Constantly Bullied and victimised staff will not buy into the plans of management and will not provide a service to the best of their ability. If you are a nurse e.g. and you have personal problems- like we all have at some point- whom do you trust and turn to get back to your level of performance when you are a constant victim of the above.

We have submitted reports relating to quality of care which I refer the commission to. Many more reports will surface once a thorough investigation is done. The case of nurse Mr Stamper comes to mind.

Mr Stamper was a corrupt appointment which has been defended by KDH management in spite of multiple complaints from both staff and patients. He was appointed at KDH as an advanced midwife but could not even function at the level of a normal -non-advance qualified- midwife or even worse a general professional nurse who happen to work in labour ward-i.e. the ward where babies are delivered. As a result, pregnant patients were repeatedly exposed to his clinical mismanagement. His biggest defenders were the current acting CEO Mrs Mashaba and Mr Plaatjies. The severe and inappropriate discipline which many staff members at KDH were subjected to was not applied to Mr Stamper. We can state that we think this happened because Mr Stamper was a corrupt appointment. Although Mr Stamper has now left KDH, and the PSC found absolutely nothing wrong with his appointment and role at KDH we strongly feel that his case must be reopened for investigation. If he was such an outstanding candidate in the interviews, how come he was the exact opposite after being employed? Did he perhaps get the interview questions before hand? Was he the person who was interviewed or did an imposter get interviewed? We don't know and can only speculate.

Training and Skills development at KDH

Since there are public complaints about quality of care at KDH, one would expect that the KDH Skills Committee and its sub-committee (the KDH nurse training co-ordinating committee) would be trusted and tasked to intensify training and skills development. To contrary, over the past year Mrs Mashaba and Mr Plaatjies have tried to subvert the efforts of the Skills development committee. Further, after being appointed acting CEO of KDH, Mrs Mashaba intensified her efforts to subvert the nurse Training and the KDH skills Committee. The motivation behind their behaviour can only be abuse of power, abuse of public funds, nepotism because this is not new to them. The very existence of the Nurse training committee and the KDH Skills development committee is a hindrance to their corrupt efforts. The Skills Committee requested Mrs Mashaba and the KDH management team to attend a Skills Committee meeting and explain their efforts. As usual, that request was ignored.

Public Service Commission Investigation

We refer this committee to our reply to the KDH investigation done by the PSC. In our reply we stated that that investigation was done inadequately and that we were disappointed that such highly qualified commissioners could conduct such a poor-quality investigation. That investigation was done so poorly that we feel it was a waste of public money, the same money which we are told is not available for healthcare for the community in Khayelitsha.

In Conclusion

The damage that was done at KDH over the years extend deep and has become extensive. There will be no quick fix solution now because it was allowed to continue for far too long. However, we can start by addressing all the issues raised in our reports and documents submitted to the committee. The KDH labour caucus has always been committed to participating in the IMLC at KDH but not with people who constantly ignore, are devious and have no interest in resolving issues raised by staff and the community.
