APPENDIX L

Archive transcript

Netcare recording 1
Bridging course for registration as a general nurse. Clinic Holding group of hospitals
would like to apply for approval as a training school for the bridging course for the
registration as a general nurse commencing on 1 March 1988. Approval for the
enclosed curriculum with retrospectively is as soon as the regulation is promulgated.
Curriculum, the philosophy clinical evaluation instrument plan learning experiences.
Head of the school Mrs. S. Hamilton with B. cur. Admin, M. Cur, Nursing Management.
Matrons. The matrons of each hospital clinic are reflected. The main tutor, Mrs. MW.
Paolini, B. Art Ed Science PU for CHE en ed. 1984. Supporting lecturers, Garden City,
Millpark Parklane clinic, Rand clinic, Rosebank clinic, Nedpark clinic, Jakaranda
hospital union hospital. Anticipated number of learners, 20 -25. Duration of each
course – 2 years. Frequency of intake – 1 intake, 1 March. Second intake will be
considered 1990.

Clinic Holdings philosophy: Clinic Holdings believe in participation in the national
comprehensive health care plan through the medium of nursing education. Nursing
education is aimed at guiding the learner towards provision of quality patient care
within accost effective practise. It is also aimed at stimulating the learners awareness
of the need to support the individual and his significant others in their total health
needs, to develop skills and attitudes and knowledge that will permit professional
growth and functioning within the multi-professional health team. We believe that
this can be achieve through implementing and???????? Principles of education
with learner responsibility for learning and self directed learning. Education will be
based on the dignity and right of each individual and the worth of all persons.

Your letter of 5 Oct. 1988 refers I have to inform you that the above application can
only be considered once the regulations for the course have been promulgated. I
further have to inform you that the institutions are subject to inspection by council.
You will be informed of the date and the inspection of the necessary arrangements to
be made at a later stage. 24 – 09 – 89 The other mentioned institutions will be
inspected by Mrs. J. K. Bierman and Mrs. K. V. de Witt, professional officers of the
SANC at 8:30 on the following date: Garden City – 6 February; Mill Park – 7 February;
Park Lane 8 February; Rosebank Mine – 9 February; ??Clinic – 9 February; Union
Hospital – 10 February; Medpark Clinic – 20 February; Jakaranda Hospital 21 -
February. Some dates are subject to change. The following will have to be available:
Proposed student record system, situational analyses indicating bed occupation,
patient turnover, proposed timetables to display correlation between theoretical
input and clinical practica. Facilities to be inspected: Clinical facilities, Teaching
department, library, equipment for teaching.

10 March 1989, is there again a ‘n request for approval as a training school for the
bridging course for registration as a general nurse van Clinic Holdings Group of
Hospitals.
28 March 98?? Letter from the council approval as a nursing school for the bridging course for enrolled nurses. Your letter dated 5 October 1988 refers. Please note that the regulation for the above mentioned course has not yet been promulgated and that only provisional approval as a nursing school for the course can be granted at this stage. Council has resolved that Clinic Holdings Group of Hospitals be permitted to conduct the examination for the bridging course. On behalf of the council I wish to clarify the following:

The course remains a council course and will not become an in house course of Clinic Holdings Group of Hospitals.

The examination will remain a council examination and the examination fees will be payable to the council.

The appointment of a moderator must be clarified with Mrs. K. de Witt of this office.

The examination question papers will be moderated by the appointed moderator, who acts on behalf of the council and there fore the examination papers will not be send to the council for final approval.

The procedures with regards to failure remains unchanged.

Once the examination results are finalized the copy must be sent to council, in order that the relevant diploma can be issues to the candidates who had successfully completed the course.

The examiners moderators will be remunerated by the council of the seat of prescribed claim form????

12 May 89. ??????? By council appointment as moderator has been offered to the following person for the examination for the bridging course which are doing on behalf of the council, Miss S. J. Armstrong, B. G. Alexander College. You should please arrange all applicable dates for the moderating of the examination with the moderator well in advance. Included is a copy of guidelines for the moderation and I refer you to 2.1 in which you are required to furnished the moderator with the report from the markers on the findings of the examination.

Then there is a letter of appointment to Miss Armstrong, who is being instructed by the council to offer ... appointment as moderator for 1989 for the bridging course. 14 June 89 there’s a letter from the council, I refer to my letter of 28 March 1989, a copy of which is enclosed for you convenience. the regulations for the bridging course for enrolled nurses have now been promulgated and official approval is hereby granted to you as a nursing school for the course.

And then there is the inspection report of all the first hospitals that has been inspected; Garden City, Mill Park, Park Lane, Rosebank, Rand Clinic, Union Hospital, Pretoria Medpark Clinic, and Jakaranda Hospital, to be inspected at a later date. Unitas Hospital and Krugerdorp Private Hospital. The recommendations was that the first intake of candidates be not earlier than 1 July ‘89. Special attention should be given to the orientation of the present clinic hospital staff with regards to the implementation of the bridging program. Former programs with regards to issues

Such as legislation pertaining to the practise of nursing, Sisters, of record keeping, student evaluation, written policy manual should be developed. Placement of students should be organized according to the available expertise and learning opportunities. The number of clinical teachers required to give students accompaniment to be increased to one per hospital. Teaching facility and library should be inspected once the building has been completed and the proposed ??? and equipment has been bought. The curriculum and revised lectures indicating the placement of students, evaluation instruments, current staff statistics should be admitted.
29 May ‘89. Here’s a letter to Mrs. De Wit. It is with pleasure that we acknowledge the council appointment of Miss S.J. Armstrong as moderator for the examination in the bridging course. An appointment with moderator to discuss applicable dates will be arrange forth with.

Then there’s a letter from Mrs. K. de Wit, 13 September ‘89, to Mrs. Hamilton. I refer to our correspondence dated 11 July ‘89 regarding the inspection report. Commence on pertinent issues requiring attention would be appreciated. Then the reply 16 Oct. ‘89 from Mrs. Hamilton to Mrs. De Wit. SANC inspectors recommendation with regard to pertinent issues identified in report as requiring attention are in the process of being implemented in our clinics. Our commitment to creating a clinical environment and attitudes conclusive to excellence in nursing practice as well as in formal and informal educational programs continues. Although it is a slow process, it requires continual flexibility and application. We are determined to succeed. Here commence for your information.

Then there is an acknowledgement of the documentation, dated 16 Oct. Please inform council when it will be convenient for reinspection of the following areas: Med Park clinic, Rosebank Clinic, and the teaching facility and the library.

Here’s a document on the bridging program. Again it’s about orientation clinic and hospital staff, formal programs, there’s in service education program, clinical teachers, scientific nursing a lot of documentation with regards to student placement, student allocation, student clinical experience records, professional nursing practise module. Probably most documents refer to in the previous correspondence.

Then a letter 29 Oct. ‘89 to the Registrar. Former nurse examination has a pre requisite to registration with the South African Nursing Council. With reference to our discussion on 27 Oct. ‘89, we wish to submit the following proposal for consideration. Request the Clinic Group of Hospital request exemption to the pre requisite to register for the recruits. Shall undertake an arrival of each foreign nurse in RSA to conduct the orientation instruction and examination in respect of SANC’s prescribed learning package. I have a SANC and sister nurse to acquire registration certificate.

16 Nov. ‘89 From the council. It has come to our notice that the Unitas Hospital will be involved in the training of students in the bridging program as from January 1990. The application for the approval for this facility has not been received by the SANC and there for the clinical experience contained by the students was placed in this facility will not be recognized by the council. Signed by Mrs. De Wit.

28 – 11- 89. St. Augustine’s Hospital. Application for approval as a nursing school for the bridging course. All races, male and female. Approval for the proposed curriculum. The letters received from the matron St. Augustine’s Hospital, dated 17 July ‘89 and 16 August ‘89 respectively refers the above mentioned has been approved by the executive committee.

15 Dec. ‘89. Letter to Mrs. Hamilton. Your letter of 29 Oct. ‘89 refers. In regard to foreign nurses recruited by your organization the executive committee has resolved that nurses who qualify for registration in South Africa will be registered without having passed the prescribed professional practise examination, provided that Clinic Gardens Group will not place such nurses in a clinical situation until they have received the appropriate instruction in the professional and legal aspects of practise in South Africa in accordance with the prescribed learning package and have passed the examination prescribed. The executive committee has also noted that Clinic Gardens will assist nurses recruited abroad to obtain the necessary records of training and verification of registration in order to facilitate the processing of their
applications by the council.
Letter from Clinic Holdings, 4 Des. ‘89. Bridging program Unitas. With reference to your letter dated 16 Nov. ‘89. Unitas Hospital has not presently and will not be used for training purposes until it has been inspected and approved by SANC. Four candidates employed at Unitas Hospital will be ????? to Jakaranda Hospital for training in 1990. The candidates will be notified of these arrangements prior to the employment.
An undated letter, 08 Jan. 1990 letter to council, requesting approval of curriculum of SANC course for enrolment as nursing assistant. The enclosed curriculum is presented with permission of Dr. J. Bornman, director of Nursing education TPA. We have added clinical links education philosophy and adapted a few aspects of the curriculum. Approval is requested for application of the new curriculum in Clinic Holdings Hospitals listed in the document. Curriculum is attached – both English and Afr. Versions
Brief 8 Jan. 1990 from Clinic Holdings to SANC. SANC inspection of Clinic Holdings Group of Hospitals for the bridging course. Please include Unitas Hospital on the inspection program scheduled for April 1990.
Request on 26 Febr. 1990 for the SANC inspection to exclude the Krugersdorp Hospital
March 1990 to Clinic Holdings. Letter from SANC . application for approval as a nursing school for enrolled nursing assistant. Your letter dated 8 January 1990 refers. I must inform you that the above mentioned application can only be considered until we received the enclosed application form ??? completed. You will also have to furnished me with a list of persons who will take part in the training. Van Weltagen.

Maandag 13 Desember.
Document 4 Dec. 2005. To the principal of the Netcare Training Academy, Pretoria and it is with regards to the audit of the approved providers of nursing education and training ?? appliance with accreditation requirements. ???????In all the other files for the other institutions where the audit was done.
1 March 2007, so this is past 2006. There is no correspondence in this file for 2006.
Maart 2007 waar Netcare aansoek doen om ‘n naamsverandering . Netcare Training Academy would hereby like to inform SANC that we would be changing our name to Netcare Education with immediate effect. Campus name will now be Netcare Education Gauteng South West Campus, Gauteng North East Campus, KwaZulu Natal Campus, Western Cape Campus, and Eastern Cape Campus. Signed by? In addition, the documents following are 2007.
Ander leer opgespoor wat lyk of dit volg op daai ene July 1999. Letter to Mrs. Paolini. Application for the approval of the extension of clinical facilities to Acacia Clinic, Wilgers Clinic. The above application was discussed and approved by the council at its meeting on 13 and 14 July .
11 August 1999 letter to Mrs. Paolini. Our letter dated 17 July refers. The revised guidelines for short courses were approved at the council meeting held in July 1990. You are kindly requested to bring your application in line with this guideline, copy of which is here with enclosed. We are returning the original documents submitted to the council.
Brief aan die Raad, gedateer  29 Sept. 1990. Application for approval of extension of clinical facilities, and the ones listed are ?????????? Eben Dongs Hospital, ??????? Hottentots Holland Hospitaal,Lynmed Hospital, Louis Pasteur, Noord Algemene
Hospital, Olive Dale, Pretoria Urology, Sanmed Park, Wilmed Park. It is that all the facilities will be utilised from January 2000. Signed by 13 Oct. 1999 reply from the council. Acknowledge receive of the letter with accompanying documents. In order to process the application for approval by the council the following information is hereby requested: Agreement documents from Lynmed. Louis Pasteur, Eben Donges. Names and qualifications of the clinical facilitators are the following: Noord Algemeen, Wilmed Park. Extension of the clinical facility are required for the indication of other learning opportunities for the students placed in Pretoria Neurology Hospital.

Letter to the council Jan.2000. examination results, Nov. 1999. Final examination in General Nursing bridging course. We hereby request an urgent and in depth investigation in the results of the above mentioned examination. It is extremely disconcerting that only 50.7 of a total of 6 candidates passed the examination. Only 0.15 of the total candidates passed the examination with honours. From an academic point of view this is totally unacceptable and I believe it an in depth investigation. I presume that these results reflect the final examination results of those candidates who wrote the first year examination during Oct. 1998, of which the results were as follows: Pass – 85%, pass with honours – 8.4%, fail – 8.4%. The above mentioned results reflect an unacceptable percentage of distinction and failure. My concern is in the fact that the final examination results of the same group of students do not reflect the same. I do believe that once a student reach the level of final examination the results should be similar as with the results of their first year examination. I am also aware that a 50% pass rate for national matriculation examination might be acceptable to our country due to various circumstances, this figure is however unacceptable in nursing as it comprises candidates of another calibre. I trust that you share my concerns. Signed by Maggie Polini.

There’s a follow up letter from Netcare Training Academy, 7 Febr. 2000. Thank you for your prompt response on the above mentioned problem. In addition to my previous correspondence I would like to add the following points as further motivation for an in depth investigation. Although there is a 50.7% pass rate for the entire country, 6 of the nursing school manage to obtain a 100% pass rate. Contents of the memoranda for both papers were alarming due to the following: Incorrect and incomplete memoranda, leading to the fact that most students were actually disadvantaged by the memoranda, substantiating arguments available on request. Although the South African Nursing Council claims in the examination report the paper that paper one was primary health key orientated. The memoranda does not reflect this. Although the answer guide refer to critical points on the covering page, these are not reflected anywhere. The answer guide state that all relevant information must be credited, we would however like to be advised as to what specific relevant facts not included in the memorandum were credited. Both the examination papers and the memoranda reflect a poor application of the English language. The contents of the memoranda do not always correspond with the questions asked. I would like to quote prof. Gumbi during a vote of thanks at the National workshop on this scope of practise for nurses, 4 Febr. 2000. “We should make the following statements: SANC is concerned about standards, setting of standards, and maintaining those standards. Taking her statement into consideration I would like to express my concerns about the standard the SANC is setting with regards to the mentioned examination. We expect the SANC to demonstrate accountability and transparency regarding this issues, and I therefor request the following: An in depth investigation preferably by an independent investigating committee, as well as the involvement of the educational committee of
SANC; a list of all examiners and moderators and their present workplace, area of interest to be sent to me at your earliest convenience. A date for conclusion of this investigation. If this investigation has any positive results and any adjustments are made, it should be completed prior to the date scheduled for the re examination. Serious consideration from the SANC to alarm nursing schools to conduct their own examinations especially those nursing school affiliated to universities. This will not only prevent students waiting?? Two to three months for results, but believe that it will also contribute to standards which Prof. Gumbi referred to. Thank you for your co-operation. Maggy Polini.

Then there’s an acknowledgement, 21 Febr. 2000. Acknowledgement of the discrepancies in the examination results for the bridging course, second year examination, Nov. 1999. Correspondence acknowledge. Your written concerns and complains will be presented to the education committee at a meeting, scheduled for 29 and 30 March.

Kennisgewing van inspeksie, 26 Maart 2000, met ‘n uiteensetting van alles wat benodig word daarvoor.

14 April 2000. Application for approval of extension of clinical facilities in order for Hottentots Holland Hospital to be approved by the council. Clinical facility: the following information is needed: Copy of the situational analysis, course for which students will be placed at the facility, the number of students/pupils, person who will be responsible for the clinical accompaniment. Signed by Miss Nomana.


Then there’s a list, 17 May 2000, List of facilities to be inspected, Kruger dorp Private, Unitas, Linksfield??? Millpark, Park Lane, Netcare Training Academy, Rand Clinic, Rosebank Clinic, Meyerton Day Clinic, Vaalpark Unionpark, Barney Herbur t Centre, Sunning Hill, ??? Acasia, Pretoria East, ???loew, Randburg Day Clinic.

23 May. Approval of Aroub Medical centre for bridging and enrolled, Kayler clinic for bridging and enrollment as a nursing auxiliary, medical, surgery nursing, critical care and operating theatre. Eben Donges, bridging enrolled, Gatesville Medical center, bridging, enrolment as a nursing auxiliary, medical, surgical, critical care and operating in theatre. Lynnm ed for bridging, auxiliary, medical, surgical, critical care, neonatal nursing, operating theatre. Louis Pasteur, bridging course, medical, surgical, operating theatre. ??? Burtun Hospital, medical, surgical, neo natal and critical care. Edenvale Clinic, enrolment as a nurse,bridging, medical, surgical, critical care, general and trauma, operating theatre, and short course anesthetic and recovery, room infection control. Pretoria Urology ??? Hospital, bridging. Sunmed Park, bridging. Wilm ed Park, enrolment as a nurse, auxiliary, bridging, medical and surgical nursing science, critical care, operating theatre, orthopaedic nursing, short courses in trauma, anesthetic and recovery room and infection control. Signed by Me Lomana.

31 May 2000. Discrepancy in examination results. Your concerns were noted. The council, on its meeting on 16 and 17 Febr. Adopted the following recommendations of the education committee: Not to approve Miss Polini’s request for an indepth independent investigation into the complains regarding the discrepancies in the examination results, due to ?????? financial implications, to mandate the education committee with one or two co-opted council members to investigate the alleged discrepancies as a matter of urgency. You will be informed about the developments pertaining.

28 06 2000. Accreditation report of the Pretoria, East, Union, Rand Clinic, Union
28 June 2000. Copy of documents forwarded to SAKWA for interim registration of qualifications as offered by Netcare.

19 July 2000. Extension of learning facilities for Netcare Training Academy. They apply to extend to Midvaal Private Hospital for nursing auxiliary and enrolled nurse bridging course. Victoria Hospital, enrolled, bridging. Swartland Hospital for enrolled, bridging, general, critical care, operating theatre, trauma and emergency.

27 Sept. 2000 To Netcare Quality promotion visit report. 20 June. The report was discussed by the council during the meeting held on 06 and 07 Sept. copies of the report are included for your attention. Council adopted recommendation of the inspectorate. Recommendation challenges the NIES???? Expected to address the following challenges in order to meet the ???? of higher education institution.

Making the system of decentralization ???? ?????, the lack of adequate integration of the distance sub campuses was illustrated by the absence of the regional heads at inspection. Developing the college into a fully fledged higher education institution, by for instance, involving students more in governess and requiring broader roles from teaching staff, which includes publishing and doing resurge, making education more Phd orientated and in line with national needs. Problems: There seems to be three problems to be addressed. The student/staff ratio is unacceptable. To have a one to eighty ratio for a professional course cannot allow for quality teaching. This is probably what gives rise to some of the other issues which needs to be addressed. Course outline reflected totally content focussed approach to teaching learning. There’s no indication that self directed learning is promoted and it gives students almost no feel of what is expected of them, except lists of content. These documents reflect an outdated approach and total lack of integration. They should urgent seek transform. Self directed learning should be encouraged. The under utilization of the libraries and the fact that the collections are not adequate to support a number of students and any real use while the students need attention. Further resolved that a ratio of nurse educated to student should be one to twenty. Netcare Academy to address all issues raised during quality promotion visit at the concerned campuses and clinical facilities. A report please submitted to council within six months. Approval of clinical facilities, Medvaal, Victoria, Swartland Hospital. Swartland Hoospital 5 Bridging, 5 pupil nurses for enrolment. Clinical opportunities are not adequate for critical care or clinical nursing science specialization. Critical care, general critical care nursing, trauma, operating theatre. Victoria Hospital, 5 students for bridging, 5 pupil nurses for nursing auxiliary. Medvaal one pupil nurse for enrolment as nursing auxiliary, one pupil nurse for enrolment as a nurse, one bridging course student.


10 April 2001. Letter to Registrar. Extension of learning facilities for Netcare Training Academy. Situational analysis for Morotana Hospital for program in leading to enrolment as a nursing auxiliary, enrolment as a nurse and bridging. Nood/Noord?? Algemene Hospitaal, program leading to enrolment as auxiliary, enrolment as a nurse and bridging. Provincial Hospital, Port Elizabeth, all three programs requested.

20 June 2001. Extension of learning facilities for Netcare Training Academy. Hibiscus Hospital auxilary enrolment as a nurse, bridging. Port Shepstone Hospital enrolment as a nursing auxiliary and enrolment as a nurse,bridging, medical, surgical
2 Oct. 2000.?? Extension of clinical learning facilities. G. F. Jooste Hospital, Manenberg, for enrolment as a nursing auxiliary, enrolment as a nurse bridging. Somerset Hospital and Green Point, the three basics as well as medical, surgical nursing, operating theatre, medical surgical nursing, general critical care. Hottentots Holland Hospital, Somerset West, enrolment as a nursing auxiliary, enrolment as a nurse and bridging.


31 Aug. 2001  Extension of learning facilities for Netcare. Conradie Hospital for the three basics. Joined Medical Holdings, auxiliary, enrolment, bridging, medical, surgical, operating room, medical, surgical, general critical care. Livingstone Hospital, auxiliary, enrolled and bridging.

29 Oct. 2001. Extension of learning facilities for St. Adens Mission Hospital, nursing auxiliary, enrolment as a nurse, bridging, medical, surgical, operating theatre, medical, surgical general critical care, and trauma and emergency nursing.

2 Oct. 2000??? Application for approval of a sub campus for the Netcare Training Academy in Port Elizabeth. I hereby request approval of a sub campus for Netcare Training Academy in Port Elizabeth for the following already approved hospitals as learning facilities. Green Acres Hospital in Port Elizabeth, for auxiliary, enrolment, bridging. Kayler Kliniek, Uitenhage, auxiliary, enrolment, bridging. First Floor Heroic Plaza, Ringroad, Green Acres, Postal address, P.O.Box 24788, Green Acres, 6057. Regulations, procedures and policies all will apply as for Netcare Training Academy infrastructure. The proposed sub campus will be managed by miss R. Scheyffer. Fully equipped lecture room is available which can seat up to 60 delegates. Hereby requested that above mentioned facility be included as a sub campus for the Netcare Training Academy. Signed by Me Polini.

Sub campus documents receipt find enclosed. You are advised to submit information with regards to the application and then there’s documents. Termination of training. And there’s a short course in orthopaedic nursing . 6 March 2000. This letter serves to notify you that our institution will commence tution in the above program 1 July 2000, included please find SANC approved curriculum. We also have interim registration with SAKWA. The modurator will be Miss G. van Rensburg. Hope you will find this in order. Gerda Meyer. Acting regional manager.

3 May 2002. This letter is dated 2 Febr. 2002. To Miss Lemtwaba. Application for creditation as nursing school for the following courses: enrolled nurse auxiliary, enrolled nurses bridging course. As the information needed for the registration of a sub campus in PE , signed by R. Scheyffer, regional manager, Eastern Cape. Re submission of the curriculum, 28 May 2002, certificate in orthopaedic nursing. Re submission updated to comply with the requirements.

29 – 10 – 2002. Communication problems to the council. Our institution is experiencing serious problems with the registration and examination department of the council. The following are specific problems that are being experienced: Learner registration forms and postal orders are send by courier to the SANC timelessly. Despite this we often received communication from your office that the above have not been received. The same apply for completion of training and termination of training documents. Application for examinations for the basic courses is also here of
concern. On many occasions documents are faxed to your office upon which we received communication that the originals were not received. There are times when such documents are re faxed more than once. This is costly and time consuming exercise. We specifically courier important documents and prescribed fees in the form of postal orders to eliminate the above mentioned problems. Your office has managed to misplace this as well on many occasions. Telephonic queries from our institution are often met with an unmotivated, unhelpful attitude from your clerical staff. It appears that the administrative processes in the above mentioned departments are inefficient. We request that the necessary action be taken to rectify this highly ineffective, frustrating, unproductive situation. We are looking forward to your written correspondence regarding this matter. Signed T. Vermaak.

There’s an internal memo, communications current cash management system. Money in suspense account. Direct deposits allocated to suspense account. Faxed prove of deposits not send to account sections directly. Records standing false with money and application forms straight to account section. Cannot open new student files because there are no new file covers. Maintenance does not provide records with an adequate number of files. Registration back lock ??? verification as money is allocated under suspense. Increasing fear to write letters to applicants call centre, assuming that things have not been received without ????? with registration.

Solution: change management system, minimize suspense account, call centre to write up things in action list, maintenance to provide and keep a supply of at least 2000 files at all time. Information for completion and declarations send straight to registration from cash management. Development of a program for scanning files electronically processed the number one account allocated any ??? fees automatically by computer. Managers at registration section to handle telephone queries. The ????? proposal ????? to discuss at the general management executive meeting with partners involved.

1 Febr 2003. Application for approval for revised curriculum for Netcare Training academy. Enclosed please find separately bound revised curriculum for the following programs: for the course leading to enrolment as a nursing auxiliary, 2176; course leading to enrolment as a nurse, 2175; bridging course for nurses leading to registration as a nurse, 683; situational analysis for all regions. These revised curricula will be implemented nationally at the following already credited campuses: Gauteng, Johannesburg; Gauteng, Pretoria; Kwazulu Natal; Western Cape; Cape, Town, Eastern Cape; Port Elizabeth. Situational analysis for all the facilities throughout the region is contained in a singular regionally ????? document. This situational analysis is applicable to all the program curricula. Each region will use the clinical facility in that region. Please note that the curricula 2175 is a module for personal development and life skills has been included to cover aspects such as basic computer literacy, communication skills, personal finance, assertiveness, training, conflict management, study skills and time management. This module was seen as adding value to the overall development of the learners and is not for examination purposes. Your positive consideration for approval of these revised curricula will be greatly appreciated.

Shanon Nell.

11 March 2003. Application for approval of short course programs for Netcare Training Academy. Enclosed please find separately bound certificate short course for the following: revised curriculum for the listed short course in orthopaedic nursing, curriculum for approval of certificate in orthopaedic nursing, science for enrolled nurses, certificate in elementary critical care nursing for registered nurses, certificate in elementary critical care for enrolled nurses, certificate in operating skills for
registered nurses, certificate in operating skills for enrolled nurses, certificate for operating room skills for auxiliary nurses. Certificate in anaesthetic and recovery room skills for registered nurses, certificate for anaesthetic and recovery room skills for enrolled nurses, certificate for anaesthetic and recovery room skills for auxiliary nurses, certificate in elementary accident and emergency nursing for registered nurses, certificate in elementary accident and emergency nursing for enrolled nurses.

Copies of all the supporting documents are included as part of the submission. And then it is again, Johannesburg, Pretoria, KwaZulu Natal, Eastern Cape, Cape Town, Western Cape, Port Elizabeth, campuses. Duplicate of the letter.

Letter dated 25 Aug. 2003. Application for approval of curricula for short courses. The above mentioned application were discussed and the following recommendations were made: Curricula for the program that leads to enrolment as a auxiliary, enrolment as a nurse, bridging course, short course for registered nurses as listed has been approved. The short course for the enrolled nurses and the enrolled auxiliary nursing will be held in ab???? Until guidelines for the short courses for the enrolled category be developed by the council. A sight visit scheduled for the Eastern Cape, Port Elizabeth campuses ????????????? will be sent to you in the near future.

A letter to the managing director of Africon????, Miss S. A. Zandberg. Placing of learners at Netcare Medicross facilities for training purposes. Due to the increased number of learners who are registered at Netcare training Academy, we regret to inform you that the Netcare Medicross will no longer be able to accommodate learners from external training providers, such as yourselves, for clinical practica, for any nursing programs at Netcare Medicross facilities. Will naturally honour training agreements that may exist with any current learners or ready placed for practica was allowing for one supplementary opportunity for practica per learner if required. Netcare Medicross are however not in a position to cater for any new or further placements or applications for placements at our clinical facilities with immediate effect.

A letter to the council, dated 12 August 2003. Copy of the letter addressed to Mrs. Zandberg, from Health???. You will note that due to increased numbers of our own learners, we are no longer able to accommodate this external training provider. This letter serves as formal notification that Netcare and Medicross will no longer be accepting placements from this external training provider. Netcare will honour all training agreements that may exists with current learners placed at Netcare and Medicross facilities, allowing for one supplementary opportunity for practica per learner if required. However Netcare and Medicross are no longer in any position to cater for any new or further placements . signed by Shannon Nell.

Accreditation by SANC, 3 Oct. Eastern Cape, Port Elizabeth campus. There is an indication for what will happen at the school. It is important that the senior staff, as well as the staff responsible for the teaching be present during the discussions. Community members who are involved at the school are to be present. General discussion, short overview of the nursing school is presented. The location, motivation of the sub campus, including community, curricula. Date of approval. date of review examination policy. Learner contract, disciplinary code, staff establishment, number of professional personnel, qualifications and responsibilities regarding programs. Administrative plans staff development, induction, orientation and in service teaching and learning resources. Classroom library simulation teaching aids. Tests and examinations, disaster plan, clinical facilities devide into group visit facilities. Staff involved in training be to company. If time permits we shall briefly be held. The program is reasonably flexible. Adequate time will be held
Documents with regards to problems with registration of learners. Letter of complaint to SANC, 23 Sept. 2003 I would like to bring to your attention the following problems experienced by Netcare, Johannesburg.

Letter, 13 Oct. 2003. Education and training quality. The insurance for non nursing training within Netcare, Network Healthcare Holding Ltd. currents skills development legislation and regulations relating to quality insurance of education and training refers. Netcare Training Academy and Netcare Hospitals are accredited by SANC to provide specific nursing training programs as by SANC requirements and regulations. Furthermore SANC is regarded under the mentioned legislation and training quality assurance body for nursing training in South Africa. In terms of the skills development requirements Netcare is require to apply for approval. For all other programs, short courses and in house training provided that could lead to the learners acquiring credits. The current regulations state one provider, one each ETQ**** which requires Netcare to approach the primary ETQA, that being SANC to facilitate the quality assurance of the non nursing training programs we offer. This would entire that a memorandum of understanding between SANC and the relevant ETQA being brought up. We understood from Mr. Behki Zulu, executive manager, ETQA, of HWC, that this role has been discussed with yourselves. There for we request that you forward the necessary guidelines and program approval documentation to complete, in order for this process to be actioned. Your response will be highly appreciated. Kindly also acknowledge receive of this correspondence. Francina Zaayman. National training co ordonator.

Response to this letter 2 Nov. 2003. The SANC is a primary education training quality assurance body for nursing programs. It does not credit non nursing programs. You are there for advised to seek assistance from the education training development and practices ETDP SETA. They will send you a training evaluation file, which you will pursue and respond to. You will there after submit the documents to the ETDP SETA for evaluation. Signed by onklwu.?????????.

Application for approval of revised and updated curricula. Enclosed please find separately bound revised and updated curricula for the course in clinical nursing science, leading to registration of qualification 212, medical and surgical nursing, critical care nursing, general infection control nursing, operating theatre nursing, anaesthetic and recovery room nursing, and trauma en emergency nursing. The regulation as set out in regulation 212 has been used in development of this programs in an attempt to meet the principles of outcomes based education and to align this to the NQF requirements, curricula have been structured over a period of 18 months where by part one is done during the first months will cover the subject of nursing dynamics, pharmacology and capita selecta, and part two is done during the following 12 months will essentially cover the elective in a speciality selected 120 credits. These revised and updated curricula will continue to be implemented at the following already credited regional campuses: Johannesburg and Pretoria with a proposed assumption agreement with University of Witwaters Rand, Johannesburg, and then KwaZulu Natal full agreement between Netcare Training Academy and University of Natal. The situational analysis for the facilities through out the regions is included in each curriculum and is applicable to this specific program. Each region will use the facilities in that region. Added to the examples of the specified field of study in medical and surgical nursing science, infection control nursing has been included as NTA????? And Netcare has recognized that this field has evolved and matured to the extend that the nature of the possession requires...
evidence based critical thinking. Decision making and clinical expertise compensate with that of a full additional clinical qualification to enable candidates to contribute meaningfully health care services. Your positive consideration for approval of these revised curricula will be greatly appreciated. Signed Shanon Nell.

2 March 2004 Letter to Francina Zaayman. ETQA process on non nursing courses. Your fax dated 1 Febr. 2000 ????? has reference. Your query has been discussed at great length at SANC. the SANC has subsequently advised, that where feasible, you should make direct contact with the relevant ETQA or SETA to seek program evaluation and send them copies of your correspondence with the SETA or ETQA concerned in order for SANC to facilitate the process from their side. Alternatively you could send the learning program to SANC and they will in turn send it to relevant SETA or ETQA. The first option is seen by SANC as less cumbersome while at the same time they are mindful that some SETA’s or ETQA’s insist of getting learning programs directly from the SANC and not from the educational and training providers. I trust that you will find this information useful. signed by Beki Zulu.

A letter to the registrar, 17 March 2004. Education and training quality assurance for non nursing training within Network healthcare holdings. With reference to the related correspondence subsequent to our regional request for accreditation of our non nursing training, dated 13 Oct. 2003, the following: Your recent discussions with each other regarding our request has been noted and fed back to us by Mr. Bekhi Zulu from H.W. SETA. We decided to follow your direct approach and may additional enquiry ?????????????? Hier was nou vir meer as 10 min. geen opname nie. Kindly also guide me as to which channels to follow in order to engage in this process. Since we offer in house short course ranging from NQF level 2 to 6, I find it very confusing to identify the correct procedure and contact persons. F. Zaayman.

Letter 21 May 2004. Application for approval of curriculum for the course in clinical nursing science, leading to registration of an additional qualification in medical and surgical nursing science, anaesthetic and recovery room. Infection control nursing. The above application has reference. Be informed that above specific fields of study do not fall within the government notice 212 as amended Febr. 1993. You are advised to re submit the curriculum for short courses.

20 May 2004. Application for approval for revised programs. that is the revised 212 critical nursing science, operating theatre nursing, trauma and emergency nursing, Clinical facilities for critical care nursing science and then there’s a loooooooooooonnnggggggggggggg list. For the application to be presented to the education committee the following must be included: sub field mode of instruction, program objectives according to the applicable regulations and there is a long list of requirements.

Letter to the registrar, 10 June 2004. Application for approval of revised and updated curricula for Netcare Training Academy. Our submission of curricula, dated 3 Febr. 2004, and subsequent communication regarding approval process of the SANC refers. We have not received any further information pertaining to the status of this process. The curricula has not been admitted to the education for approval. please Confirm by return letter the date on which we can reasonably expect an outcome in this regard. The lack of information regarding the status of the process directly impedes???????on our ability to plan our training strategy and interventions. Your most urgent assistance in furnishing us with the information is appreciated. For your convenience I have attached copies of our urgent original sub ??? letter as well as council acknowledgement of receipt of this request and supporting curricula and documents. Your’s truly, Shanon Nell.
15 June 2004, approval of elementary programs for registered nurses, following submission of a letter dated 13 Jan. 2004, and a telephonic conversation with you on 5 Feb. 2004, assurance was given that the communication from SANC on 25 Aug. 2003, on page 2, implies that approval is granted for the programs for registered nurses as submitted, while those for enrolled nurses and enrolled nursing?? Is held in abeyance until guidelines for the enrolled nurse categories has been finalised. Formalization and record purposes written confirmation of the approval of the short courses for registered nurses as submitted is requested.

Letter 15 June 2004, Campus versus sub campus. Approval for Netcare Training Academy, Eastern Cape. Attached for ease of reference my letter dated 30 Sept. 2003, as well as correspondence from yourself. 11 March 2004. Acknowledge and thank council for the approval of the following: auxiliary nurse, enrolment as a nurse, bridging course, 60 learners per program, one intake per year. The main query lies however with the fact that this approval has been granted with the Netcare Training Academy, Eastern Cape, as a sub campus. Application for approval of this training provider was specifically to ???? the opportunity to function as a campus in its own right and no longer as a sub campus of the Cape Town Netcare Training Academy. Hence is understood the need for a site visit and evaluation as undertaken by the council on 3 Oct. 2003. Your assistance in clarifying this matter is highly appreciated.

Letter from SANC, 24 June 2004. Application for approval for clinical facilities for community service training at Netcare Training Academy, Port Elizabeth campus. In support of our application to have the following clinical facilities accredited as community service training facilities, for our basic course, pupil assistant nurse, pupil enrolment and bridging course leading to registration as learners, attached, please find the following: situational analysis for SANCA, Nightingale lodge, Ecuumleni home for the aged, Maranata frail care, Louisa Myburg, Medicross Walmer, Huis Najaar, Motwa Haven, House of Resurrection Haven, Theo Claassen Educare, Newton Park crèche, Stepping Stones educare. Letter from the campus manager Netcare Training academy, Port Elizabeth, showed projective number of basic course learners per placement. Your kind consideration and action is appreciated.

13 July 2004. As per your advised from the letter dated 21 May 2004, attached please find our re submission of the curriculum for the infection control nursing for registered nurses as a 6 months certificate program. Please note that the situational analysis form part of this document and is available for your ???? under section C. Your kind assistance for having the program approved most urgently is appreciated.

Summary – this is application for approval of advised curriculum for certificate O K this was the infection control and it has been approved.

Check list for evaluation of post basic programs according to the SAKWA format. Reference must be make to the following regulations, 48212.

Letter dated 27 Oct. 2004. Application for approval of revised curriculum for the certificate in infection control for registered nurses. Accreditation committee on 20 Oct. it was approved. Kindly notifies this office of the number of students per intake and the number of intakes per year. Then there was a list from the Netcare Training Academy with the number of students, total 50.

27 Dec. 2004. Certificate course for infection control nursing for registered nurses. Thank you for your approval. Maximum per annum per Netcare Hospital. Please contact me. So it was 50 in total and it was really like Cape Province 6, Eastern Cape 3, Gauteng 21, Kayser 9 and Pretoria 11.

Request for a meeting. There is a letter from Dr. Victor ?????? executive director, requesting a meeting with Hassina Subidar, Hereby I request an opportunity to meet
with you at your office at a date and time that will be of convenience to you. I was the head of the department of health in the Free State Province until I resigned the post and was appointed as an executive director for Network Health care and Holdings, from 1 Dec. 2004. The purpose of the meeting is to discuss the following: My role in Netcare and the relationship with the nursing council; the future of nursing in South Africa. Greatly appreciate your response.

Netcare. BBBEE presentation. Netcare will be announcing a broad based black economic empowerment transaction soon. The transaction include shareholding by trust of nurses registered at SANC. Nurses will be encouraged to support the trust. Network healthcare holdings is listed on the JSE market capitalization of about ten billion. The afore mentioned trust will receive the stake of about 2.5% of Netcare through the transaction. Netcare believes nurses form an important component of the health system and must there fore be considered for any meaningful BBBEE transaction. Our understanding is that nurses who with the SANC are not prohibitat from acquiring shares from the listed company and that they will not be contravening the ethical rules of conduct of the SANC. A written response to confirm the above will be highly appreciated. Signed Laklakanyane.

Then there’s the response for request for meeting. Congratulations on the new appointment as executive director. Meeting arranged for 29 April 2005 at 14:00 if the date and time suits you.

And then a response, 25 April. Your letter dated 11 March, has reference. Take note of the contents of your letter regarding BBBEE shareholders trust for registered nurses with the SANC. I will take this matter to our next meeting and report back to you as soon as possible.

28 Febr. 2005, updating of SANC data base. Please clarify the following issues: When Netcare training academy applies to the SANC for approval of a course, does it apply on its own behalf as a campus, or does it apply as a main campus on behalf of all the campuses. According to the data base, Netcare main campus apply for approval of short courses for registered nurses for enrolled nurses and for auxiliary nurses in May 2000. Only the short courses for enlisted nurses were approved.

Certificate approval of Netcare course. Certificate in orthopaedic nursing science for registered nurses, certificate in orthopaedic nursing science, certificate in elementary critical care for registered nurses, certificate in critical care in general, certificate for operating room for registered nurses, certificate in operating theatre nursing science. Certificate in anaesthetic recovery room skills, certificate in anaesthetic recovery room skills. Certificate in elementary accident and emergency nursing for nurses, certificate in trauma and emergency nursing. Certificate in scrub technique for registered nurses. Certificate in operating theatre nursing science. Certificate in emergency nursing for registered nurses. Certificate in trauma and emergency nursing. Enclosed please find a list of short courses find on the SANC data base. To prevent confusion and to speed up the process of listing qualifications behind a learners name, please ensure that the declaration send by the college reflect both the names of the awarding authority as well as the SANC approved course name. thank you for your cooperation.

Then there’s the response, 20 April 2005. Application submitted to SANC for approval as submitted via Netcare Training Academy National Office. Netcare Training Academy has 5 separate accredited campuses, namely, Netcare Training Academy, Johannesburg; Pretoria; KwaZulu Natal; Eastern Cape and Cape Town, or Western Cape. Johannesburg S1047, Pretoria S1588, KwaZulu Natal S177, Eastern Cape S1587, Cape Town or Western Cape S172. All submissions are forwarded to
SANC for approval per separate Netcare Training Academy, specific clinical facilities per course per Netcare Training Academy. In other words approval applied for and approved is not transferable between Netcare Training Academies. If for example the Netcare Training Academy Pretoria and at the same time the Netcare Training Academy KwaZulu Natal and Netcare Training Academy Johannesburg wish to offer the post basic qualification in for example critical care nursing science R212 a standard measured curriculum is admitted for approval for use by each Netcare Training Academy, separate and specific situational analysis per Netcare TA for approval ceditation for clinical facilities for each Netcare TA is submitted for approval. Clinical facilities approved for Netcare TA, Johannesburg, are not taken as approved for Pretoria ens. If the Netcare TA, Pretoria wishes to place learners in a clinical facility approved for the Netcare TA, Johannesburg, then the Netcare TA in Pretoria will apply for their approval. Your letter makes reference to Afrox. I am assuming this is incorrect, as it should be directed at Netcare TA. Approval was granted by SANC. See attached copy of this dated 25 Aug. 2003 for short courses for registered nurses as listed in that letter. that the qualification behind the learners name on the declaration send in by the Netcare TA will reflect both the name of the awarding authority as well as the SANC approved course name. Please note that the Netcare TA has also approval for the certificate course in infection control, which has not appear in the table in your letter. Signed by Shanon Nell.

Late applications for entry into first year examination to be held during Oct 2005, for three learners Pretorius, Sidio, n’Kosi. We apologize for the above mentioned learners not being registered by the due date as required by you office. According to our policy at the NTA, Johannesburg, regarding performance standards review, these learners marks were incorrectly calculated. This led them to be excluded from the examination. However after careful persueing these results, the error was identified. This letter serves as a special request to allow these learners late entry to the examination. We implore your office to consider this request favourably. Yet again we apologize for any inconvenience caused. Signed Mr. F.B. Flemming, HOD Basic Nursing courses.

Late registration 1 July 2005. Admission examination for Labuschagne, Masiga, Masibuku, Meyer, van Zyl, Zondu. By telephonic discussion with Me A. Mangena, executive, finance and staff committee had a telephone conference on 11 July 2005 to discuss late registration by nursing education result that the students be granted permission to write examination. According to your correspondence dated 18 July 2005, these candidates are to be registered for Nov. examination. If the candidates are ready for 9 July, Netcare may lodge the application with the council. The examination fee to include the late registration fee of R17.10 per candidate. Please respond in writing.

Response on communication, dated 6 June 2005 refers. The above mentioned candidates will sit for the SANC admission examination held during Nov.to enable them to commence their second year of training, during 2006, pending the outcome of the examination. We will forward the prescribed examination forms and fees before 7 Aug. 2005. Practica marks will be forwarded to your office in due cause.

Application for admission to the SANC examination for enrolment as a nurse. Thank you for allowing the following learner to write the admission examination, O K dis net enetjie.

Extended clerical facility, Setlers Hospital. Additional information has not yet been received to date 2 April 2005, application for registration of students, pupils. See your application 22 March acknowledge. In order to process the application the council.
request that the school submit a list of facilities and approved numbers of each facility per program. The council is aware that the school is previously provided numbers per intake for all the programs. This process ensures that the database is updated and also to ensure that the quality of education and training is not compromised. From the submissions the council will approve specific numbers. Your urgent attention is requested.

Registration and listing of qualifications. Basic qualifications and additional qualifications are provided by the Nursing Council. This letter is dated 09-06-2005. The registration section of the council would like to take this opportunity to acknowledge the excellent records of training and declaration certificates submitted by some education institutions. However, it is noted with concern that there has been a delay in processing registration and listing of qualifications due to records of training and declaration certificates that do not need the council required statements.

13 June 2006. Application for registration as a private further education and training institution with the Department of Education. Attached please find for your further information a copy of the letter submitted with our application to the Department of Education in support of our registration as a private further education and training institution request. To date we have not received any further communication from the Department of Education. However upon confirmation of registration we will forward a copy of registration to notice for your office for your records. Please do not hesitate to contact Shanon Nell.

Then there is a letter application for registration as a private further education and training institution. Enclosed here with please find the national integrated application for the five independently South African Nursing Council accredited NTA campuses. Application for registration as a further education and training institution in respect of the following institutions: Netcare Training Academy, Johannesburg; Pretoria; KwaZulu Natal; Cape Town; Eastern Cape. Tjek to the value of R2500 in view of the registration fees. Please contact my office for further information.

Response from council dated 4 July 2006, where they request proof from the DAE for the submission.

10 July 2006. Letter from Department of Education addressed to Miss Shanon Nell. Application for registration of Netcare Healthcare Holdings Ltd. training as Netcare Training Academy as a further education and training institution. Thank you for submitting the application. Same as was given to all the other institutions.

Confirmation from SANC that they have received this letter on 17 July 2006.

Letter from Council 3 Febr. 2005. To Miss Branningam. Application for approval of revised programs for the course in clinical nursing science leading to registration of an additional qualification in medical and surgical nursing, critical care nursing, trauma and emergency, operating theatre. It was discussed, it was resolved that the program be approved. Critical care, trauma, emergency and operating theatre, number of students per intake 20. Number of intakes per year per program, 2. Approval of clinical facilities as stated. Critical care nursing general maximum of one student per facility. Trauma and emergency, maximum of 2 students per facility. Operating theatre, maximum of 4 students per facility.

Creditation committee. Application for approval of new school S177, Netcare TA, KwaZulu Natal. Application for approval of new premises, programs. Creditation committee resolve that the site visit be conducted.

Volume 7 gaan oor na 2007.

Value 2. Netcare S1047

Brief van die raad aan Clinic Holdings, 30 – 04 - 1990. This letter services to inform
you that due to the circumstances surrounding the inspection of City Park Hospital on 23 Febr. 1990, and the resulted confusion regard to the post basic courses the inspection of the City Park Hospital had ???? for operating theatre and intensive nursing science will be re inspected at a later date. You will be notified in advance of the date. Signed K. Bierman.

There’s a summative report of the re accreditation. City Park, one of the clinic holdings group of hospitals situated in Cape Town. 23 Febr. 1990. Re accreditation as a school for the course in operating theatre nursing and intensive nursing science.

The background City Park was approved as an extended clinical facility of Grote Schuur Hospital in Nov. 1988 with theoretical component of both the above mentioned courses as well as some of the practica was responsibility of Grote Schuur Hospital as the approved school. In March 1989 City Park applied to council for approval as a school with the theoretical component only being offered by Grote Schuur Hospital. This was approved by council and since then these courses have moved to Carina’s College of Nursing. City Park Hospital is responsible for the planning of all the clinical practica and the evaluation of students on the two courses respectively. The following aspects were noted with concern: the record keeping in the intensive care units and the operating theatres visited was found to be inadequate with the regard to the accuracy with which it reflected the nursing care rendered. The records reflected medical regimes and doctors prescribing nursing care. The legislation pertaining to record keeping was not known and the implementation as professional negligence poorly understood. Standard Nursing: there was no formal system of quality assurance available and this was reflected in the problems identified in the areas visited. There were no written criteria by which patients were moved from the recovery area to the wards, nor any documentation with regards to inter operative nursing action which will influence the planning for the immediate post operative period. Only observations are emphasised. There are duplication of information which is time consuming and contrast sharply with the statement generally made that planning of patient care require too much writing. No written policy was available with regard to the critical incidents such as the care of blood and blood products, infection control resuscatation. Teaching: the evaluation instruments available for the students who have completed the two courses. The evaluation was done, using an old model and the tutor is at present designing a more suitable instrument. Recommendations: the Hospital and Clinic Holdings Group be informed of the risks for students inherent inadequate record keeping and that accountability of registered nurse with regard to patient care is stressed. The hospital will be re evaluated before the end of 1990 for evaluation of the revised program. It appeared that the course lack adequate structure and not enough emphasis was placed on the professional development of the students, but rather on the technical skills. Feeling of the council having intruded prevailed during the visit. The importance of accountability of registered nurses and the knowledge of the scope of practise in of admissions was not stressed. Various attempts to remain objective and lessen resentment experienced by the matron and the tutor failed. Concern in this regard was express during the feedback session and assurance was given that these aspects will be receiving attention since the City Park discussions have taken place with the Director of Nursing for the Clinical Holdings Group. The areas of concern were discussed at length and the assurance was given that the problem areas will be addressed. City Park is aware that Carina’s College of Nursing is in the process of developing a post basic course in medical, surgical nursing and that their situation will change as this was implemented in 1990. That is assuming that the regulations for
the present pioneer post

This post basic course are

Application for approval as a nursing school enrolled nursing assistant 21 -05 - 1990.

Unitas Hospital.

06 Febr. 1992. Clinic Hospital accreditation Hospital program and then they have a
program for an internal accreditation process. A letter, 05 May 1992, recruitment of
East European nursing personnel. Application for registration of/or enrolment as a
nurse from the East European countries is proposed as follows:

If the candidate is still in the country of origin, suitable arrangements are made by
the recruiting officer for the candidate to write the council examination. Should the
candidate be successful he is then either registered or enrolled with this council.
The candidates already in South Africa: The candidates shall arrange with an
approved school to write the examination. Should this candidate meets with the
specific requirements of this council for enrolment as a pupil nurse, assistant
candidate shall be enrolled as such and my practise nursing as a pupil nursing
assistant for maximum of two years in which period examination for enrolment or
registering may be undertaken. No person may practise nursing for gain in South
Africa, unless they are on the register of roll of this council. Council is under the
impression that a considerable number of nurses in the RSA are unemployed, but has
no statistics to support this. This council is unable to express an opinion on work

letter to the registrar, 21 April 1992. Immigrant nurses clinical experience. The SANC
requires that certain nurses who immigrate and do not have the required number of
hours clinical experience, require this experience before being allowed to register as
a professional nurse at a SANC approved training school. May we, as a recognized
training school for the bridging course, allow these nurses to acquire the necessary
clinical experience in Clinic Holdings, SANC approved clinical facilities or alternatively
at St. Augustine’s Hospital, which is approved for the four year course. Yours
faithfully, W. Dunc.

Letter form Clinic Holdings to SANC with regards to English trained experience
operating rooms. Staff nurses without the one year operating room post training
course. Question on how they could be appropriately utilized within the South
African facilities.

Still correspondence in regard to immigrant nurses clinical experience. They may
obtain the required clinical experience at hospitals which have been approved as
clinical facilities for the bridging course. Immigrant nurses must be registered at SANC.
Detailed programs be submitted on the proposed clinical experiences as well as the
name of the supervisor in charge of their training. Registered as student nurses pay
the appropriate fee. On completion of the training you must submit the notification of
completion of training and record of instruction.

Then there was a letter with regards to discrepancy between practical and theoretical
marks. Disturbing tendency was observed regarding insufficient knowledge related to
ethos and professional practise and application thereof. Keeping in mind that the
candidate is being prepared for registration this part of the curriculum should serve as
the point of the departure in nursing education. Kindly submit to the council the
micro curriculum for the bridging course, the evaluation instrument for Orsky???
Or an explanation on how you conduct the exam.

Marks allocated for the practical portion of the examination were more than 20%
higher than those obtained for theory. This is a matter of concern to the council as
they indicate the proficiency in the ?????motion skills only is evaluated and this is not
supported by cognitive skills. For the purpose of the council examination regulation
the practical portion of the examination means a portion consisting of a practical examination which may include an oral examination and also include the marks obtaining a system of continues assessment. You are earnestly requested there for to reveal the examination policy used by you school and make any adjustments required so as to ensure that the cognitive psyco-motor and effective demains are appropriately evaluated in determining the marks which are submitted for the practical portion. Thank you for your cooperation in helping to ensure that standard and validity of the examination is maintained. Signed by A. C. Beard.

12-02 – 93. Training of nursing auxiliaries in Clinic Holdings Hospital. As discussed with you a while ago we like to make the following administrative changes regarding the above. Please be so kind as to registered the training school in the same manner as it is registered for the bridging course, which is the following: Training school Clinic Holdings Hospitals with extension of learning facilities at the following hospitals: Garden City, Mill Park, Rosebank, Park Lane, Rand Clinic, Barney Huberts Medical Institute, Union Hospital, Krugersdorp Hospital. As these facilities are all included in our annual accreditation program we assure that standards are maintained for both bridging and nursing auxiliary training. You should need any more details please, I would be glad to provide you with any information. Barney Huberts Medical Institute is the old Cottors Louw Hospital rehabilitation.

04 March 1993. Approved nursing schools for the course leading to enrolment as a nursing auxiliary. According to our records the following schools were approved as clinical facilities for Clinic Holdings: Garden City, Green Acres, Jakaranda, Mill Park, Park Lane, Union Hospital, Unitas. Following our telephonic conversation the changes were made. The approved nursing school with regard to nursing auxiliary, CHL education division, approved clinical facilities for training of nursing auxiliary is Garden City, Mill Park, Park Lane. Change over from clinical facilities for CHL division for school in its own right for the education leading to enrolment as a nursing auxiliary: Green Acres Hospital, Jakaranda Hospital, Union Hospital and Unitas Hospital. With regards to your letter dated 12 Febr. 1993, the following hospitals are not approved as either nursing schools or clinical facilities: Barney Huberts Medical Institute, Krugersdorp, Rand Clinic, Rosebank Clinic. This letter 04 March 1993. Letter, 23 Aug. 1993. My letter of 25 May refers. The inspection which was to be held in Sept. 93 at your institution postponed to 94, Mill Park, Park Lane, Garden City, Union, Jakaranda, Unitas.

07 – 09 – 93. Your clinic will be inspected on 28 Oct. 1993 at 09:00 and this is to Rosebank Clinic.

22 – 11 – 93. The education division and clinical facilities will be inspected by ???? and A. Beard, professional officers of the council on the dates indicated below. Education ???? 24 Jan.; Mill Park 24 Jan, Park Lane 25, Garden City 26, Union Hospital 27, Jakaranda 28, Unitas 28. Inspection documents must be completed and returned before 07 Jan. 1994.

25 Jan. 1994. The Rosebank Clinic has been approved as a clinical facility for Clinic Holdings for the bridging program. Written inspection report. Clinic Holdings education division and the Matron of staff of the Rosebank Clinic worked extremely hard to establish an infrastructure conducive to nursing education and should be congratulated on their achievement.

11 – 02 – 94. Aan mnr. Germishuizen. We recently had an accreditation of our learning facility by the nursing council. We would like to express my sincerest appreciation for the way it was performed. Over all we found the experience very positive and excepted the less positive points as a wonderful learning opportunity.
The approach followed by the officers was exceptional and there for the accreditation which previously was very threatening, has now become a learning experience. Signed by Polini.

Change of address. Holdings Ltd. Nursing Education, 2 Buntingroad, Auckland Park, 2092. Change of address. I have pleasure of informing you that the department is now moving to the grounds of Barney Huberts Medical Institute.

Application for listing of the short course in trauma and emergency nursing. 28 – 03 - 94. I have pleasure in enclosing the above mentioned documentation for your approval.

Inspection report again. Inspection report 21 June 1994. Report on the inspection on the training school was discussed at the recent meeting. Executive committee of the council is attached. The approved program, bridging course 1st and 2nd year, Highly sophisticated nature of the surgery and very rapid turnover in the theatres at Mill Park Hospital make these theatres an unsuitable environment for basic students. It is recommended that students from Mill Park Hospital be allocated to theatres in other Clinic Holdings Hospitals for this part of the clinical curriculum. Programs

Letter from St. Augustine’s Hospital, to the registrar for the bridging course in terms of ref. S1407177, correspondence dated 28 – 11- 89. Approval was granted by council to admit bridging course students twice a year, that is April and August. Due to management decision no August intake was admitted. Approval was however requested for December intake of 15 students. Signed by R. Goosen.

Council approval of admission of students for the bridging course is valid for two intakes irrespective of the months. 30 August 1995.

Aansoek vir goedkeuring van ‘n verpleegskool vir die kursus wat lei tot inskrywing as verpleegkundige, 29 – 01 – 1996. Micro curriculum vir bogenoemde kursus, opleidingskool Clinic Holdings. Eerste innames April 1996. Aantal innames per jaar: 1. 50 tot 60 studente soos tans geregistreer vir die oorbruggings kursus, Me Polini.

Dan is die brief hier in Engels geskryf. Enclosed please find the following three documents: Application for approval for this division as a nursing school for the course leading to enrolment as a nurse; application for a listed course with SANC anaesthetic and recovery room nursing science; application for extension of learning opportunities, Linksfield Park. The above documents were send to you during Sept. 1995 and it appears they might have gone astray, according to this during telephonic conversation on 26 January 1996. I understand that this subsequent submission will now lead to crisis management on your behalf, but I will sincere appreciate it. Please give these applications your immediate attention and consideration. There for request approval of these applications as from 1 April 1996, as we had originally submitted them time? Signed Me Polini.

Extension of facility to Links Field. The following information is required. This letter is dated 08 March 1996. The certification by the school that the clinic facility meets with their standard. A written agreement between the school and Links Field Clinic for placement of students and the outline of arrangement they had been made for the clinical accompaniment of students.

End of the file.
Then there’s a letter 14 – 03 – 1996. English summary of the enrolled nurses course. Please find a copy of the above as requested.

15 March 1996. Addendum to anaesthetic and recovery room nursing course, clinical evaluation ????? done through out the course to comprehensive. Examinations will be conducted. One after three months and one after the end of the course. One case study will have to be presented. Hier is hele curriculum.

Application for short course in anaesthetic and recovery room nursing. and this was submitted 29 – 01 – 96. And there is the whole curriculum for anaesthetic and recovery room nursing.

Letter 18 – 03 – 96. Reference to our conversation,. Persons responsible for accompaniment. Then there’s a list of the names of the facilities, classroom facilities. Application for approval for the course leading to enrolment as a nurse. Your correspondence is acknowledge. Due to circumstances the curriculum will be submitted to the executive committee in May. ??? respective approval as from 1 April will be requested.

Application for extension of learning opportunities for the bridging course leading to registration as a nurse at the Links Filed Park Clinic. Situational analysis submitted 29 - 01 -96. There’s an agreement between Links Filed Park Clinic, and Clinic Holdings with regards to the placement.

27 May 1996. Short course in anaesthetics and recovery room nursing was approved at the council meeting in April 1996.

Extension of training Parklands Hospital 07 October 1996. Application to be approved as facility for extension of training for facilities. And then there’s a request for Parklands Hospital to be approved by council. The school should submit the situational analysis, the number of pupils to be placed, duration of placement, the ratio of nurses to enrolled categories, as this will influence accompaniment of students, names and qualifications of people responsible for clinical accompaniment.

22 August 1996. Course leading to enrolment as a nursing auxiliary. I hereby request approval of the above mentioned course for Green Acres Hospital as training school. Approved curriculum of Clinic Holdings will be utilized. Please be so kind as to grant retrospective approval as from 1 February 1996. Thanking you, in anticipation.

22 October 1996. Extension of facilities for Clinic Holdings, Pretoria sub campus. Situational analysis for Medpark Clinic. Premesis was approved by Mrs. M. Fick and myself on 16 October 1996. Our findings were that the facilities comply with our standards. Due to declining learning opportunities at Jakaranda Hospital, specifically, with regards to nursing of patients with neurological conditions, there is a need of the approval of Medpark Clinic facilities.

Your letter, extension, 14 November. Reply to that letter. Number of students to be placed and duration of placement. State the program for which facility is required.

09 November 1996. Links Field Park Clinic was approved, 17 -18 September. Extension of learning opportunities of St. Augustine’s Training School to Kingsway Hospital and Parklands Hospital, bridging course request was forwarded you during June 1996, but was apparently not received. Great need for training in KwaZulu Natal. We urgently need to extend the facilities to St. Augustine’s Training School. I have accredited the facilities myself. Found it suitable for basic training. Request approval 1 January 1997.

Then there’s a situational analysis for Kingsway Hospital.

St. Augustine’s cannot be approved without written agreement between the head of the training school and the head of the clinical facility, Kingsway and Parklands Clinic. Then there’s an attached extension of learning, Victoria sub campus, number of
students will be placed: 8. Duration of placement, 4 weeks per ward. Students will be placed at Unitas for learning opportunities not available at Medpark. Programs for which facilities bridging course and enrolled nurse course.

30 January 1997. Letter to the registrar. Clinic Holdings nursing education Pretoria sub campus. I wish to inform you that our sub campus move from Jakaranda Hospital to Medpark Clinic. All the educational equipment remain the same as previously. One lecture room, two offices, one store room, one library, one overhead projector, one white board. Facility can comfortably cater for 30 students and should the need arise for a bigger venue, especially during examination periods, a bigger venue will be rented. The SA interim Nursing Council notified accordingly. Please inform me should there be any need to do an accreditation of our new facility. Practical learning facilities utilized by the ????campus remain the same. Jakaranda Hospital, Unitas en Medpark, as from 1 January 1999.

02 April 1997. Application for approval of the curriculum for the course leading to enrolment as a nurse. The above mentioned application was approved respectively, 21 April 1996. The executive committee at its meeting in July.

Application to utilize Medpark Clinic as an extended facility ??????? 11 April 1997. Bridging course, enrolment. Application approved by council 4 and 5 February. Placement of student: pupils should only be commenced at the facility after a positive inspection report.

8 April 1997. Transfer of approved course from Clinic Holdings to Empomweni Education????? The SA interim Nursing Council approved the bridging course for enrolled nurse leading to registration as a registered nurse. From Clinic Holdings. during 1989 the managing director of Clinic Holdings wish to ?????? course with pupils, facilities, tutorial staff and conditions as agreed upon. The SA interim Nursing Council to Empomweni Education as training school. I hereby request the above mentioned course to Empomweni Education as a training school form 1 June 1997.

18 April 1997. Transfer of approved course from Clinic Holdings to Empomweni Education. Your letter dated 8 April refers. We noted with concern that Clinic Holdings intend to transfer the bridging course for enrolled nurse leading to registration as a general nurse to Empomweni Education as from 1 June. The applicant for the transfer is not possible for the Empomweni Education is not an approved school for the bridging course. It will be appreciated if you could inform the council as to the future status of the course leading to enrolment as a nurse, enrolment as a nursing auxiliary. 4 June 1997. Private school utilizing Clinic Holdings facilities. It has come to my attention that Private training schools are listing Clinic Holdings as part of their clinical facilities. My concern are that they are prepared to utilize facilities which this division deems as unsuitable for training, there for I would sincerely appreciate if you could please inform me of any schools listed any of our facilities, especially for post graduate training in their proposals without written permission from myself. Please investigate this matter at your earliest convenience, as Clinic Holdings is not prepared to be associated with any sub standard training.

13 June 1997. Private nursing schools utilizing Clinic Holdings facilities. The council is not aware of any Clinic Holdings Hospitals being utilized by private schools as a clinical facility without written permission form Clinic Holdings. One of the requirements for approval of clinical facility is the written association agreement between the nursing school and the clinical facility. Please inform the council of the names of the nursing schools and the clinical facilities that have come to your attention.

13 June 1997. Application to utilize Medpark Clinic as an extended facility for the bridging course and enrolment.
Letter dated 11 April 1997. Wish to inform you that an inspection of ??? prior to placements is not required, seeing that Clinic Holdings is already a nursing school. Medpark Clinic will be inspected when Clinic Holdings is due for inspection again. Short courses for listing: Infection control nursing. 6 February 1998. Enclosed, please find the curriculum for the above mentioned course. There’s a tremendous need for this course in the Clinic Holdings Netcare Group of Hospitals. We would like to commence 1 April 1998. Following should be included: Garden City, Krugersdorp, Millpark, Park Lane, Rand Clinic, Rosebank, Union Hospital, Links Field, Meyerton Day Clinic, Protea Day clinic, City Park Hospital, Libertas Hospital, N1 Hospital, Wynberg, Kings Way, Parklands, St. Augustine, The Bay Hospital, Barney Hurbets Medical Institute, Die Kroon Hospitaal, Green Acres, Bronkhorstspruit, Jakaranda, Park, Unitas, Sunning Hill, Femina, Randburg Day clinic, ?????stone, Fern Crest, Umchlanga, St. Annes, Vaal Park Hospital and Pretoria East Hospital. First course will how ever only include the hospitals in Gauteng area, but we would like to extend to the rest of the country in 1999. Me Polini.

23 February 1998. Your application will be processed for approval by the executive committee. ?????????????????????????? this department is not aware of the date of the next meeting. ?????????????????????????? not before council’s approval.

5 March 1998. Change of name of nursing school. As you are probably aware, Clinical Holdings Group of Hospitals have been taken over by Netcare Group of Hospitals, Clinic Holdings School of Nursing has there for be changed to Netcare Training Academy. Please note that this is only a name change. Infrastructure, address, courses, staff, learning facilities and so on remain the same. We realised that the name can only be used once it has been officially changed and approved by yourself. Thank you for your cooperation in this regard.

Accreditation for a nursing school 14 April 1998. And then again the document with all the requirements.

Accreditation of nursing schools and clinical facilities. We are in the process of affiliating to a university as a college. A formal application will be submitted to the SANC, as soon as the situational analysis are completed. There is also a strong possibility of the nursing school moving to new premises. Taking all of the above into consideration, I will recommend that this accreditation be postponed or rather scheduled for later this year. Kindly advised me if the above mentioned meet your approval at your earliest convenience. 18 May 1998.

Accreditation of nursing school, refers. In the light of the changes taking place at Netcare, the accreditation visit will be rescheduled for later this year. Unitas will however be visited as school in own right.

Letter 10 April 1998. Registered to the Rand Afrikaanse Universiteit. Prof. Marie Muller, Departement Verpleegkunde. Aansoek om registrasie as ‘n privaat college, Clinic Holdings Group of Hospitals, is reeds vanaf 1998 betrokke by verpleeg opleiding. Die oorspronklike doel van die verpleegskool was nie slegs om verpleegkundiges op te lei vir ons eie behoeftes nie, maar ook om die staat te ondersteun in die opleiding van verpleegkundiges, gedurende die typerk dt daar ´n tekort was aan verpleegkundiges. In 1990 het Clinic Holdings se samewerkings ooreenkoms gesluit. Die Departement Verpleegkunde van RAU vir die opleiding van na basiese verpleegkundiges, in intensiewesorg verpleegkunde. Samewarking ooreenkoms is spoedig uitgebrei om operasiesaal en trauma verpleegkunde in te sluit. Gedurende 1979 is Clinics Holdings Group Hospitale oorgeneem deur die Netcare Holdings Group. Die Netcare Groep van Hospitale bestaan tans uit 34 hospitale wat wissel van dag klinieke tot hoog gespesialiseerde hospitale en
rehabilitasie sentrum wat ’n total van 5608 geregistreerde beddens en dis versprei in Johannesburg, Pretoria, Kaapstad, KwaZulu Natal en Port Elizabeth. Die meerderheid van hierdie hospitale is reeds deur die SA Interim Raad op Verpleegkunde goedgekeur vir opleiding. Die behoefte het nou ontstaan om ’n privaat college, geaffilieer met ’n universiteit op die been te bring. Aangesien hierdie maatskappy vir baie jare ’n suksesvolle werkverhouding met RAU het, en ons ten volle bewus is van die hoë standard wat gehandhaaf word, is dit ons wens om formeel uit te brei en in met u te tree. Die aanvanklike doel van verpleegkundige kursusse aan te bied is uiteindelik verder uit te brei na bestuurskursusse en ander kursusse vir ondersteunende dienste. Onderstaande struktuur word beoog:
Naam van die inrigting: Netcare Training Academy.
Kampusse: Hoof kampus in Johannesburg area, sub kampusse: Pretoria, Kaapstad, KwaZulu Natal en Port Elizabeth.
Beoogde kursusse: Verpleegkundige kursus wat sal lei tot inskryf as verpleegkundige, oorbruggings kursus wat lei tot registrasie as ’n algemene verpleegkundige, diploma kursusse in mediese en chirurgiese verpleegkunde, algemene kritieke sorg, trauma verpleegkunde, operativesaal, kort kursusse wat lei tot die verwerwing van ’n sertifikaat, narkose en herstelkamer verpleegkunde, ortopediese verpleegkunde, infeksië beheer. Ander kursusse volgens behoeftes.
Aantal studente: ’n minimum van tien tot vyftien per kursus per kampus, afhangend van die behoefte in die betrokke streek. Maksimum getalle sal afhang van die fisiese faciliteite.
Personeel; die nodige personeel om die kursusse aan te bied soos in punt drie hierbo genoem, is reeds in diens in Johannesburg, Pretoria en KwaZulu Natal.
Fisiese faciliteite: fisiese faciliteite, klasruimte en kantore is in plek in Johannesburg, Pretoria en KwaZulu Natal streke en sien as volg daaruit: Johannesburg – 4 klasruimte wat onderskeidelik 80, 30, 15 en 10 studente kan akkommodeer. KwaZulu Natal – 4 klasruimte wat 12, 12, 20 en 40 studente kan akkommodeer. Pretoria – die huidige sub kampus in Pretoria moet hervestig word en details kan nie op hierdie stadium verskaf word nie. ’n Versoek om registrasie as ’n privaat inrigting vir hoër onderwys is reeds ingediend en daardie versoek is van hoër onderwys. ’n Formele aanvraag is nodig om die finansiële implikasies wat aan die lig staan uit te bereken en die benodigde aansoekvorme te versoek. Hierdie document is raad toe gestuur, 4 Mei 1998. Extension for learning facilities, 4 May 1998. Please be so kind to include the under mentioned hospitals as extension of our clinical facilities: course leading to enrolment as a nurse, bridging course, hospitals Pretoria East, Femina Clinic, Medcare. All the above mentioned hospitals were accredited by myself and Mrs. Fick from our Pretoria sub campus.
11 June 1998. Receipt of your letter dated 4 May is here with acknowledge. In order to submit the applications to the council for consideration, the following is also needed: copies of the formal agreement between Netcare Training Academy and respective facilities, number of student pupils to be placed, the names and professional qualifications of persons responsible for the clinical accompaniment. Signed van Loggerenberg.
31 July ’98. Application for approval for a short course for enlisting infection control
nursing, clinical facilities as listed in the application. Application was discussed and approved by the executive committee on 29 July. Signed Monama.
Postponement, 31 July 1998. Postponement of accreditation visit. Executive committee of the council meeting held on 29 July. It was resolved that routine inspection of the institution been withheld until the rationalization process of institutions and all the processes have been completed. We apologize for any inconvenience. Signed E. Beyleveled.
Then the letter was acknowledge.

Letter from RAU. To SANC. Collaboration agreement, Netcare Training Academy. I hereby confirm that the RAU agree to enter into collaboration agreement with Netcare Training Academy for the following courses: Diploma in medical and surgical nursing science; Critical care nursing; General operating room nursing and trauma nursing, bridging course leading to registration as a general nurse; course leading to enrolment as a nurse; various certificate courses in healthcare science. The agreement is in the process of developed. Will be negotiated between the two parties in due course. Signed by Marie Muller.

2 September 1998. Our application to register as a private college affiliated to the RAU, dated 4 May 1998. The above mentioned affiliation is planned to take effect on 1 January 1999. We there for request that this application is treated as a matter of urgency. Enclosed the following documents: Letter of confirmation from RAU, mission statement and philosophy, infrastructure of Netcare Training Academy, staff establishment, programs to be offered, facilities to be utilized, curricula for courses to be approved. Maggie Polini.

9 September 1999. Additional letter application to register as a private college, affiliated to RAU, 4 May and 2 September. Please find situational analysis and consent to utilize facilities for AMA Hosp. Group of Hospitals to be included in the above mentioned application. Will apply to the Netcare Training Academy, KwaZulu Natal sub campus, following four hospitals: Chatsmed Garden, Garden Hospital, the Crompton Phoenix Hospital, and Westville Hospital.

16 November 1998. Letter to council. Meeting of Netcare delegation with the SANC. To our telephonic conversation this morning, I hereby request an urgent meeting with the delegation of your council members to discuss the practical application of the scope of practise regulations. Netcare are currently revealing our clinical practise and our skills mix of the various categories of nursing staff. We are planning regional workshops with our staff to NOSA and towards end of November beginning December and would really appreciate an audience before then. As you suggested your Laws committee is probably the most appropriate to meet with us. I understand that they are meeting shortly. If they could see a delegation of about 12 of us for approximately one and a half to two hours. We believe in our understanding of scope of practise issues will be greatly enhanced. Thank you for agreeing to place this on your council’s agenda next week. I anxiously awaiting a report. Eileen Branningham.

27 November 1998. Application for approval of the following facilities: Chatsmed Garden Hospital, Crompton Phoenix Hospital, Westville. Above mentioned application was discussed and approved by the council at its meeting held on 17 and 18 November.

27 November 1998. Application for approval as a private college in association with RAU. The following infrastructure. The Netcare Training Academy main campus in Johannesburg, sub campuses Pretoria, KwaZulu Natal, Cape Town, to utilize the already approved curricula. Course leading to enrolment as a nursing auxiliary, course
leading to enrolment as a nurse, bridging course for enrolled nurses leading to registration as a nurse, short course for enlisting infection control nursing, of the following already approved post basic course of RAU in medical and surgical nursing, critical care nursing, trauma and emergency, operating theatre nursing, anaesthesia and recovery room. Short course orthopaedic nursing, pediatric, congenital cardio disorders. Facilities: a whole list of facilities. The above mentioned application was discussed by the council at its meeting held on 17/18 November. Approval will be granted, pending the submission of the written association agreement with the RAU.

Yours sincerely, Miss Fourie.

24 November 1998. To the council. Application for approval of a short course in neonatal / critical care nursing, extension of learning facilities 2 December 1998. Enclosed please find the situational analysis of Medcare Clinic. The facility has been accredited by Netcare Training Academy. We hereby request that the mentioned facility be included Clinical facility of Netcare Training academy. Signed Maggie Polini.

Programs: enrolled nursing, nurse auxiliary, bridging course. Two to four weeks placement for learning experiences in rehabilitation in the Medcare Clinic. 09 December 1998.

05 January 1999. Extension of learning facilities Medcare Clinic. Receive of the above mentioned clinical facilities acknowledge. Will be forwarded to the council in March. Kindly send us the original copy of situational analysis. Faxed copies faded. Also supply us with the qualifications of the clinical tutors indicated in the situational analysis. S. MnKize.

6 January 1999. Short courses. Our letter dated 14 October we refer. A copy of this correspondence is attached for your reference. It will be appreciated if we could have your feedback by 29 January. With kind regards. Your sincerely.

6 January 1999. Meeting of Netcare delegation with the SANC. thank you for your speedy response to my letter of yesterday and the confirmation that the Laws committee will meet with the delegation on 18 January 1999 at 09:00. I am enclosing a copy of the document we wish to discuss with the committee. Our nursing personnel have debated this document in depth and would like the council to confirm that these practise guidelines do not contravene the scope of practise regulations of the SANC. I look forward to meeting you.

13 January 1999. Application for approval of curriculum of short course neonatal critical care nursing. In order to submit the curriculum for consideration by the council the following is required: physical facilities and equipment, facility for setting and safekeeping of exam papers, clinical learning objectives, clinical learning opportunities and the duration of exposure in each clinical area, program timetables, spread of theoretical and clinical learning opportunities over the total program evaluation, instrument formative evaluation, and summative evaluation. MnKize.


Independent nursing Institute.

Document dated 13 – 05 – 99. Course offered by Independent Nursing Institution. To my concern the above mentioned institution offers a course in nursing for six weeks. I am concerned about this matter because students who do the course with them are promised that they will get credit for the course. I have no information about the institution. I tried to speak with the person in charge, but he is not available. Students who apply for the pupil enrolment make me aware of this institution. They are also
advertising in the local newspapers. I would like to know whether this institution is recognized by SANC, and if so, whether the students will get credit for practical/theoretical hours. Signed Karen Hani.

Course offered by Independent Nursing Institution. 21 May 1999. From council. Kindly note that Independent Nursing Institution is not an approved school by council to offer any training for nurses and the qualifications acquired by this will not be recognized by the council.

Extension of learning facilities, Netcare Training Academy, Acasia Clinic and Wilgers. Situational analysis, 27 May 1999. Application for approval for a short course for listing in cardiac and cardiac??????? Critical care nursing ?????????????. your letter dated 28 May 1999, is acknowledged. The council resolved at its meeting held not to approve this for listing purposes until the SANC guidelines for short courses have been brought in line with the South African qualifications Authority requirements. These guidelines will then be sent to all nursing education institutions so that the courses approved in future will meet with SAKWA requirements to facilitate accreditation thereof.

6 July 1999. Agreement between Netcare Training Academy and RAU is then submitted.

Now starting with Green Acres Hospital, Port Elizabeth. Netcare Training Academy, Port Elizabeth, S172. First letter from S. Hamilton, to Mr. Tate at Green Acres Hospital, 15 June 1990. Dear Sir, Permission has been granted by Mr. I.S. Bloch in favour of the association between Green Acres Hospital and Whatever crip Nursing college for their students to use their clinical facilities. The sharing of the sources of nursing education is encouraged by Nursing Holdings and it enhances our standard of nursing care. Congratulations to you and your staff of receiving the Cape of Good Hope Provincial Administration approval for this association. It is obviously a reflection of the present standard in Green Acres. As you mentioned, the provincial administration must provide an indemnity cover for all potential claims. Signed by Hamilton.

Sharley Cribb.


Die registrateur, Raad op Verpleging. Fasiliteite, Green Acres Hospitaal vir oorbruggings kursus, die 4D kursus, diploma in intensiewe sorg, diploma in operasiesaal verpleegkunde. Die bogenoemde hospitaal is ondersoek. Situasie analyse is gedoen en daar is gevind dat genoemde fasiliteite gebruik kan word vir sekere afdelings van al bogeneomde kursusse. Daar word oordeelkundig gebruik gemaak van die privaat hospitaal se fasiliteite. Fasiliteite by provinsiale hospitale neem af en al die opleidings instansies maak daarvan gebruik met die gevolg dat kliniese leergeleenthede eintlik baie skaars raak in ons omgewing. Die studente roteer tussen die instansies waarvan hierdie college gebruik maak, nl. Provinsiale Hospitaal Port Elizabeth, Provinsiale Hospitaal Uitenhage, Livingstone Hospitaal, Dora NKinza Hospitaal, en Green Acres Hospitaal. Baie dankie, Kollege Hoof, E. Smith.

Na basiese kursus. Diploma in operasie saal verpleging. 16-01-91. Verder tot ons skrywe, gedteer 4-6-90, die goedkeuring van die raad, word dit onder u aandag gebring dat die Green Acres Hospitaal gedeeltelik gebruik sal word vir die kliniese leer ervaring wat die studente benodig om te kan voldoen aan die program doelstelling.
Dis vir operasie saal verpleegkunde.
Privaat fasiliteit vir verloskunde praktika. 16-01-91. Graag word u aandag daarop gevestig dat daar voortaan 4D studente an St. Georges Hospitaal en Green Ares Hospitaal toegewys sal word, om die nodige leer ervaring te kry om aan die program doelstelling te kan voldoen.
Aansoek om gebruik te maak van kliniese fasiliteite by Green Acres Hospitaal vir studente in die 4 jaar program en studente in operasie saal ??????? bogenoemde aansoek is deur die uitvoerende komitee van die raad goedgekeur . met verwysing na u aansoek van die St. Georges Hospitaal se kliniese fasiliteite gebruik gemaak word vir die 4 jarige program moet ek u meedeel dat ‘n skriftelike verslag by die raad ingedien moet word met betrekking tot die fasiliteite daar. Verder moet ‘n brief aan die raad gestuur word vanaf St. George hospitaal waarin hule toestemming verleen tot die gebruik van die fasiliteite.
Brief van St. Georges Hospitaal , 30 Mei 1991. We hereby give consent for the 4 year and post basic students to do their practical at St. Georges Hospital. Signed Mrs. V. Nielsen.
Application for the recognition of the training school for enrolled nursing assistants, Green Acres Hospital, PO Box 27488, Green Acres, 6057, for white nursing assistants, female, white nursing assistants, male, non-white nursing assistants female, non-white nursing assistants male, pupils at the time 10. Average monthly. Daar is overhead projectors, light projector, TV video recorder, person in charge, Llewellyn du Toit,nee Llewellyn Tate, General Nursing science, intensive care nursing science. This letter was dated 22-08-1991.
15 August 1991. Letter to the council. Request approval of curriculum for SANC course, enrolment as nursing assistant. The enclosed curriculum is presented with permission of Dr. Jack A. Bornman, director of nursing education TPA. We have added Clinic Holdings Education policy and adapted a few aspects of the curriculum. Approval is requested for application of the new curriculum in Clinic Holdings Hospital listed in the document. Signed Maggie Polini.
13 September 1991. To the registrar. Application for approval as a nursing school for enrolled nursing assistants, Green Acres. The system of training will include the following: A 5 day orientation block, 8 periods per day, which is 40 periods. Two 5-day blocks during the year, 8 periods per day, 80 periods. 2 hours of 3 periods per week formal clinical guidance for 40 weeks.120, total 240. Signed by Maggie Polini. Then there’s approval of the nursing school 04-11-1990. To the Matron, Green Acres Hospital.,
The principle, Charlotte Searle, Nursing College, Private Bag, Korsten, Port Elizabeth.the Nursing college and its ????? will be inspected by the professional officers, following, Green Acres is included here, for your information.
26-02-92. from Provincial Administration of the Cape of Good Hope. Gebruik van fasiliteite van Green Acres. Skrywe gedateer 21-01-92, het betrekking. U het reeds die fasiliteite van Green Acres goedgekeur en die huidige skrywe was slegs om onder u aandag te bring dat Green Acres Hospitaal toestemming verleen tot die gebruik van hulle fasiliteite vir die algemeen in die 4 jaar program, sowel as die na basiese kursus vir teater tegniek en
intensiewe sorg.
Inspeksie uitgestel van Julie 92 tot 93, datum sal gestuur word.
Situasie analise, van Green Acres Hospital.

Inspection report was recently discussed at the executive committee of council, copy is attached for your information, 9 June 1993.

3 August 1994. Aangesien ek al aansienlike tyd in diens van die bogenoemde hospitaal is wil ek my graag veroorloof om die volgende punte waaroor ek en van my mede kollegas al ‘n geruime tyd onder u aandag te bring. Spyskaart tydens nagdiens. Die spyskaart kan tussen somer en winter verander word.

22 December 1994. Green Acres Hospital will only be presenting the auxiliary course in 1996 again.

To the matron, Green Acres. 15-05-96. List of names for application of the nursing course for ???????? Application for above named for enrolment as ????? nursing auxiliaries. Your institution is not approved as a nursing school for the course for the certificate for enrolment as a nursing auxiliary. You will there for have to submit the proposed curriculum for the course to council for consideration. Also please note that you will have to ask for approval as from 1 February 1996. It will also be necessary to furnished me with certified copies of the identity documents.

Application for approval as a nursing school enrolment as a nursing auxiliary, 02-07-96. Number of intakes per year: 1. Maximum number of enrolled pupils per intake – 20. Person in charge, Mr. Llewellyn Charles Tate. Person in charge of the teaching program, registered nurse, Elna Jooste. Application for the approval as a nursing school for the course leading to enrolment as a nursing auxiliary 2176. The completed application form, dated 25 June and send in by you refers. The institute cannot be approved as a nursing school without an approved curriculum. You will there for have to submit curriculum to the council for consideration as soon as possible.

31 July 1996. Accreditation of the nursing school. Same document as before.

22 July 1996. Motivation for registration as training school. Enclosed here with, please find the following documents with regard to the above: Course objective, course content, proposed curriculum, system of training, system of evaluation, example of question and answer paper, approval retrospectively from 1 February. Signed Mr. L.C. Tate.

16 August 1996. Application for approval as a nursing school. For the course leading to enrolment as a nursing auxiliary. The curriculum submitted by you for approval is according to the Government notice 1571 of 21 July 1989. Since then new regulations have been published for the course leading to enrolment as a nursing auxiliary. You will have to re submit your application under Government notice 2176. Guidelines in respect of information required.

21 August 1996. We refer to your letter dated 31 July 1996, that we have submit the following to the council under separate cover: an outline of the teaching personnel, the situational analysis, curriculum test paper, memorandum system of education. Enclosed here with find the following: Lectures A, B and C. Copies of in service education for 1996, orientation program, nursing organogram, copy of disciplinary procedure, completed record of training pupil auxiliary nurse. Signed by E. Jooste.

17 September 1996. Enclosed here with the curriculum for approval according to Government notice 2176. The following were already submitted, points 1, 2, 6 and 7, as requested in the guidelines. In respect of the information required for the submission of nursing education programs for enrolled categories.

26 September 1996. Accreditation by the SANC.

Course leading to enrolment as an auxiliary. I hereby request approval for the above
mentioned course with Green Acres Hospital as a nursing school. Approved curriculum of Clinic Holdings will be utilized. Please be so kind to grant retrospective approval from 1 February 1996. Maggie Polini.


25 June 1996. South Africa is planning the re-inspection of the hospital on 25 June 1997 and there are the requirements again.

Discrepancy between theoretical and practical marks. The examination committee no. Examination for the course leading to enrolment as a nursing auxiliary held in March 1997. It is been noted that in the case of most of the candidates for the above mentioned examination the marks from your school allocated for the practical portion of the examination were more than 15% higher than those of ????? for theory. This is a matter of concern and the council, as it may indicate that the proficiency in psychomotor skills only is evaluated and that this is not supported by cognitive skills. Same as before, dated 2 June 1997.

20 June 1997. Change of date of inspection visit to 24 June. Due to unforeseen circumstances we have to change the date of our inspection from 25 to 24 June at 9:30. Wish to request that you kindly accept our change of dates as mentioned above. We are aware of the inconvenience on your part. We greatly apologize for this. Fax us directions from Port Elizabeth airport to the hospital. Please acknowledge receive of this. Signed D. Hani. Professional advisor.

Acknowledged.

24 June 1997. Hospital inspection 24 June 1997. With regards to the above mentioned, the following were discussed with management: Report as follows: 10 desks will be purchased. A library facility will be made available to allow for pupils to work independently, two tables and two chairs, laboratory room for clinical teaching with basic resources will also be made available to all pupils. As we wish to promote training of our pupil auxiliary nurses we thank you for allowing us a second opportunity in getting the above facilities up to standard. we there for request you urgently to add this to your inspection report to the executive committee. Assuring you of our best attention at all times.

16 July 1997. Application for approval of the course leading to registration as a nursing auxiliary. Above mentioned course was discussed and approved by the executive committee at their meeting held on 8 May 1997. This letter was dated 16 July 1997. Signed by Miss Monama.

Accreditation of a nursing school report, 18 October 1996. Green Acres Hospital. Problems identified at the previous inspection on 18 ??? were as follows: Curriculum and training – they were training pupil nursing auxiliary from February curriculum being approved. There was no induction program for newly appointed teaching personnel, there was no clinical laboratory, the library consisted of a room of a limited number of books and the nurse educators office with no room or chairs for pupils. There were no funds allocated to purchase books and journals. The school did not have any desks for students to write on, desks were borrowed from Sharley Cribb Campus during examinations. Criteria for evaluation for assignments were not available. No examination policy was available. Pupil records were fragmented. This was a re-visit to look at the aspects indicated. Curriculum for the course leading to enrolment as a nursing auxiliary has been submitted and approved at the 28 May 1997. Pupils on training ?????, they are training for their hospital needs. They plan to train 10 pupils in future. Person in charge of the program has applied for exemption of the nursing qualification during 1997. Completing nursing studies in 1997. Induction program for newly appointed personnel – no guidelines have been
prepared for this yet. Examination policies incorporated in the new curriculum includes mark allocation and instructions to students moderation. Clinical laboratory – a lot of improvisation been done. However the space is there, but needs upgrading. Library inadequity, books are still in the nurse educators office, is not accessible to pupils. Pupils have still no desks, using those of Sharley Cribb during examinations. Teaching strategies – they have improved including methods that require critical and analytical thinking of students. Clinical accompaniment is carried out by the teaching personnel but needs to be structured. Pupils records and comprehensive records have been drawn up and is used. Supportive staff – they use the managers typist for typing, which is done under supervision. Use of lockable cubboards for test papers are made. Clinical area – the learning opportunities are in abundance for the pupils. Clinical staff are co-operative in assisting pupils in their learning experience. New developments have been taken place since the last inspection. At first the management of Clinic Holdings put a monotorium on training at the institution. This meant all the requests for equipment and motivation for use of available space were put on hold. Later the company reversed their decision and now the previous motivated for equipment will be issued, like desks, books, ext. Inspectorate made them aware of the implications of another visit to the institution as very little has changed. They plan to start with a group of 10 pupils and there for need more rooms for the clinical laboratory and library. Subsequently Green Acres has send a letter with high lights. New developments from management as far as the motivation of equipment and space is concerned. Management is prepared to assist with these. The letter is here with attached.

24 October 1997. From council. I wish to inform you that your efforts to meet the necessary requirements for training nurses auxiliary is highly appreciated by council. Training of pupils can continue with the specified limit of 10 pupils. I wish you the best in your future plans.

August 1999. Accreditation of private training providers. I refer to our telephonic conversation today. It would be appreciated if you could provide me with an extract of the criteria, maybe a copy of the accreditation evaluation form that will be used when judging our training school. The education co-ordinator would like to ensure that all systems that are necessary to satisfy, the various accreditation requirements are put in place time. If there are any costs involved in obtaining these copies, please forward your account for attention Henriëtte Burger to the address above. We will be in contact with you soon to arrange a date for the accreditation. From Green Acres. Beatrix Stamps. Nursing Services Manager.

Acknowledge the receipt of the letter. 19 August. Copy of the minimum requirements set by council send to this. Changes to the curriculum for the course leading to enrolment as a nursing auxiliary. Application for retrospective approval, this one is dated 15 November 1996. Changes to the reduction of teaching periods, amended pages, course commence on 1 February without prior knowledge that the curriculum had to be submit for approval. The curriculum which we had submitted for your approval as requested by yourself as according to the Government notice 1571, of 21 July1989. The curriculum according to Government notice 2176 was submitted to you on 17 September, awaiting your approval. Wish to inform you that our clinical teacher in charge of the pupils suddenly passed away and Sister G. Poysat is doing her best to organize the training.

Inspection report, 17 December 1996. The inspection report was discussed by the executive committee of the council during its meeting in December 1996. A copy of the report is attached. Kindly note the recommendations made by the inspectorate as
indicated in the report. Council resolve that a copy of the inspection, including all the consults, forwarded to Clinic Holdings Ltd. The approved curriculum of Clinic Holdings, Unitas Hospital for the course leading to enrolment as a nursing auxiliary, used by Green Acres Hospital, to ensure that all the pupils have met all the prescribed requirements by the end of January 1997. Should Green Acres Hospital not be in a position to complete the training, according to the approved curriculum or Clinic Holdings Ltd., Unitas, the pupils have to be relocated. Council acquired proof by the end of January 1997, that pupils have met with the requirements of Government notice 2176, of 9 November 1993, prior to the forthcoming examination in March 1997, and that if these requirements are not obtained, the school has the responsibility to make alternative arrangements in order for the pupils to be accommodated at another approved school. No further intake of pupils would be allowed until the curriculum of Green Acres Hospital has been approved. We wish to thank you or your cooperation as well as the hospitality you and your staff displayed during our visit. Signed Monama.

9 December 1996. Motivation for registration as a nursing school. It is the policy of Clinic Holdings Ltd that 45% of the total nursing staff employed be in the auxiliary nurse category. As we have not received suitable applications to fill the available post, we wish to train persons who comply with the admissionary requirements. All persons, once qualified, have the assurance of being appointed in such post. Signed Tate.

9 December 1996. Motivation for exemption for requirements of regulation 32E of Government notice of 2176, of 9 November 1993. We hereby respectfully request temporary exemption from the above requirements for the following reasons: Person, Sister E. Jooste, against whose name an additional qualification in nursing education was registered, has since passed away. We have advertised the position, now I am in the process of interviewing three suitable candidates. Trusting our request will receive your favourable approval.

9 December 1996. Application for approval for a nursing school for the course leading to registration as a nursing auxiliary. Enclosed here with the curriculum for approval according to the Government notice 2176. We confirm that we have followed the guidelines in respect of information required for the submission of nursing education programs for enrolled categories to the South African Interim Nursing Council for approval.

Nursing council approval.


13 January 1997. To the registrar. Pupil auxiliary nurse training. We refer to the telephone discussion, our sister R. Scheyffer and had with yourself on 7 January. Wish to confirm the following: The pupil auxiliary nurse training offered by Green Acres, will be completed according to the improved curriculum of Clinic Holdings, Unitas. After consultation with Mrs. Polini, it has been agreed that it may be used. Pupils will meet the requirements of Government notice before March 1997. We trust the above meets with your favourable approval. Thank you for your consideration.

24 January 1997. Pupil auxiliary nurse training. This letter serves to confirm that sister R. Scheyffer has been training our pupil auxiliary nurses from 8 December, and that she will be completing her training as educator at the end of 1997.

Fax to the SANC from R. Scheyffer. Please be advised that our postal address has changed: Netcare Training Academy, PO Box 27220, Green Acres.

The report, date of visit 23 August 2001. Type of hospital: Private Hospital belonging to the Netcare Group. Number of beds 240. Occupancy 60 -65%. Registered nurses, 152. Enrolled nurses, 52. Enrolled nurse auxiliaries, 120. Care workers, 1. 4 still coming. Qualifications: registered nurses are placed in appropriate disciplines according to their speciality. Clinical facility for the following: Netcare Academy – enrolled nursing auxiliary – 57. Enrolled nurses – 24. Eastern Cape College of Nursing: operating theatre nursing science – 4. Students were last place in 1999. Will be placed again in this year 2001. Orthopaedic nursing – 2. Intensive care nursing – 2. University of Port Elizabeth, B Cur. Students are placed twice a week in all the units, except for maternity unit. First year – 4. Second year – 4. Third year – 6. Bridging course first year – 25. Bridging course second year – 25. Achievements: positive aspects. Students are orientated by the institution’s clinical facilitator to ensure that the standard of nursing care are maintained according to the institution’s policy. The quality management assistant the infection status reduce from 1.27% to 1.24%. the joined effort between the nursing and medical staff restrict to adherence hand washing, auditing of patient records and keeping of records of incidents. In sentence are given to the units, which have a good record system and have less or no incidents. Staff development: Central and de-centralised service education is in place, there were available in some units. Nursing staff followed an attitude towards education and training of students. Rapid turnover of experienced nurses in the intensive care unit has made qualified staff to take the initiative of offering a short course to empower the unqualified but experienced nurses. This exercise was reported to have also benefitted the already trained nurses. This intensive care nurses receive debriefing and counseling in order to manage stress. The managing policies and procedures kept in ??????? concerns. Weaknesses: principles of record keeping were found not to be always observed. Patient records did not always reflect the care rendered. Positive re-accreditation: Recommendation. Green Acres Hospital continue to be utilized as a clinical facility of Eastern Cape of nursing university, Port Elizabeth Netcare Academy. 2 October 2000. Application for approval as a sub campus for Netcare Training Academy. I hereby request approval of sub campus for Netcare Training Academy in Port Elizabeth, with the following already approved hospitals as learning facilities: Green Cares Hospital, Hierdie het ek al gelees.

Application from Netcare Academy Port Elizabeth. Ook al gelees.

Letter dated 2 February 2002. Application for accreditation as nursing school. 5 July 2002. Application for accreditation as nursing school, enrolment as a nursing auxiliary, enrolment as a nurse, bridging course. According to council records your program were approved in ‘95/’96 are supposed to be reviewed after 5 years. You are there for advised to re?????? to SAKWA requirements. You are also advised to bind programs individually and not jointly. Find enclosed circular 5 of 2000 and documents programs for re-curriculation. Signed by Miss?????.

Interim registration of qualifications with SAKWA. This was for the diploma leading to registration as a general nurse bridging course. Certificate for enrolment as a nurse. Certificate for enrolment as a nursing auxiliary.

Description of qualifications. This one was diploma bridging course.

Co-operation with RAU. Enrolment as a nursing auxiliary. Enrolment as a nurse. Netcare Training Academy Port Elizabeth. To SANC. 16 September 2002. Submission of qualifications to SAKWA and all the documents were attached to that. Council
responded 22 October. Receipt of your letter. Authority is here with acknowledged. Be informed that the council is still awaiting submission of curricula for the above mentioned programs.

1 February 2003. Application for approval of Eastern Cape campus of Netcare Training Academy, to offer additional programs. Campus is currently registered with SANC. To offer leading course leading to enrolment as nursing auxiliary. Due to the expansion increased demand in the Eastern Cape region, for ongoing training of professional development of learners, who successfully complete their training as auxiliary nurse to enrolled for registered level, the application to extend the approval of this campus is made to allow the training of the enrolled 2175 and bridging 683 programs for the Eastern Cape Campus. Separately bound curricula for the following programs: enrolment as a nursing auxiliary, enrolment as a nurse, bridging course, situational analysis for the Eastern Cape region.

14 November. Dit is Auckland Park. Your letter OK. Netcare Training Academy, Eastern Cape. Outstanding documents accreditation as a nursing school. Letter stating history learner and numbers and accreditation status. Index ????? orientation ???program (die opname is baie sleg hir – kan nie hoor nie) example of the ??? letter to learners 2 December 2003. Our telephonic conversation held on 2 December 2003, refers. We at Netcare Training Academy, Eastern Cape, situated in Port Elizabeth, hereby request to become an independent nursing school, functioning as a sub campus of Netcare Training Academy. We wish council to open a file of Netcare Training Academy, Eastern Cape, independent of the file of the other Netcare Training Academies. Best wishes for the festive season. Signed R. Scheyffer.

Confirmation of learner numbers. Referring our conversation this morning, I would like to confirm that we currently are approved for the following numbers: course leading for nursing assistant 2176: 60 per intake. 2175 – 60 per intake. Bridging course – 40 per intake. Signed R. Scheyffer. And there is no date on this document. Accreditation visit report, 3 October 2003. During the year 2000, Green Acres Nursing School was absorb into the Netcare Training Academy, the training sub campus of Netcare Training Academy, Cape Town. Sub Campus commence the education and training for enrolled and bridging courses for enrolled nurses in December 2000. The sub campus moved to the new venue. Education and training is provided for 18.1 ??students and some employed by Netcare, others by State Hospital 18.2 unemployed students. Human resources: Nursing manager, Lecturers – 1. Lecturers – 3. Clinical facilitators placed in various Netcare. Staff development programs in place. Tutors offices are efficient and well equipped. Classrooms – one with a capacity of 70, one with a capacity of 50. One of the classrooms is also used as an examination laboratory. These are well equipped. Library with reading material for each program. Examination laboratory is well equipped. Community outreach – support Childline, supply food to the needy. Occasional expo, buy groceries for the aged, support of Aids Haven, electronic security is in place, use handprints for identification.

Recommendation: approval of sub campus Netcare Training, Port Elizabeth for the following program: auxiliary nurse – 60, pupil enrolled nurse – 60, bridging course – 60. The above mentioned application was discussed. Resolved that the following confirmation of the accreditation ??? report????

Netcare Training Academy. 25 June 2004. Netcare Training Academy, Port Elizabeth campus, currently listed as sub campus. Hierdie het ek al gesien. Currently Netcare Training Academy, Port Elizabeth campus, is listed as a sub campus to Netcare Training Academy, Cape Town Campus. This implies that all processes and
documentation have to be side off by the campus manager at Netcare training Academy, Cape Town Campus. With the expansion of the Port Elizabeth campus, Netcare also now has on place a principle, lecturers, and facilities as for your inspection. The standard rise curriculum, with the structured packages and processes and procedures in terms of teaching and meeting all theoretical and practical requirements are followed. Port Elizabeth campus is able to manage all training related aspects, including the recruitment selection, registration, as learners progress monitoring academic support, formative evaluation, facilitating writing SANC examination, completing of training, ext. at Port Elizabeth campus level, without requiring it to be forwarded to and signed off by the Cape Town campus. We there for requested that the Port Elizabeth campus be able to sign off its own processes and documentation and operate as an independent campus. Your kind assistance in resolving this is appreciated. Please contact my offices if we may assist in this regard. Signed Shannon Nell. National manager.

Netcare Training Academy campus. Accreditation for approval of Port Elizabeth sub campus to be a campus. The summary of the report, historical. The above mentioned was approved by the executive finance and staff committee at its meeting on 4 and 5 February 2004. Subsequently correspondence has been submitted to the office of the council explaining that the request was that a sub campus become a campus in its own right, independent of the Cape Town campus. The letter stating that the campus has its own principle and lecturers capacity to manage related matters, adiquit facilities. Recommendation: approval of the Port Elizabeth sub campus as a campus.

8 December 2004. Application for approval of clinical facility, Livingstone Hospital. Six months certificate in medical and surgical nursing ICU. Six months certificate in operating theatre science. Enclosed the situational analysis, in respect of theatre and intensive care unit of Livingstone Hospital, Port Elizabeth, for the clinical placement of the learners. We intent of placing maximum 10 learners per facility. Mentors: D.C. Christiaan, S.E. ?????, operating theatre, Jappies???????????? Kort ’n bladsy.

22 February 2005. Application for approval of clinical facility Livingstone Hospital. Receipt of your letter, dated 8 December, the following document is acknowledge. In ICU SANC accreditation PICU. SANC accreditation office would like to apologize for the delayed response. Please note that according to the council records, both previously was written six months or one year diploma courses according to Government notice 212. (maak seker van hierdie opname) as amended relating to the course in clinical nursing science, leading to registration of an additional qualification. You are there for requested to provide clarity in this regard.

Situational analysis of Livingstone Hospital. You are kindly requested to furnished the council of the following contractual agreements between the nursing school and the hospital institution responsible for learners. Indemnity of both partners to write their names in full, signed and it must be stamped and dated. Conditions of termination of contract to be indicated. Other nursing education institutions which arise in the same facility, indicate the name of the education institution , name of program, number of students placed. Lehasa.

15-04-2005. Application for approval of clinical facilities, NEI Eastern Cape Campus. Your letter dated 28 February, and received 15 March, refers. Apology for the delayed and attending to the matter is noted and accepted. Please receive the amended contract for SANC, PE, Nightingale Lodge, Maranata, Frail Care, Walmer, Medicross, Huis Najaar, Stella Lomp Compleks???, Motwa Haven, House of Resurrection, Stepping Stones, Educare, Newton Park, Creche Educare. Learners will be placed in all ???? areas of the above facilities. Learners in the program R2176, 2175 and 683?
will be placed at the respective facilities for the total of 86 hours per year of training. Learners will be supervised by clinical facilitator and the facility staff during this placement. The college of nursing runs a four year diploma course. A number of learners placed by them in the above mentioned institution. We have an agreement with the facilities that our placement periods will not co-inside with that of college. enclosed also receive the Livingstone Hospital contract for the utilization of the Livingstone Hospital as a clinical facility for all the stated course, including the elemental critical care, operating theatre, college of Nursing, Nelson Mandela, Metropolitan University, as utilized facilities for intensive care placed on average. Two learners in the unit at a time, as they also utilize other facilities. We would like to place 12 learners at the facility per course at a time.

Letter from council, 19 October 2005. Please note that in order for your application to be submitted to council, the following outstanding information: overall bed state, overall bed occupancy, staff establishment, disease profile, name and qualifications of clinical accompaniments, exact numbers of students specifying 2175, 683, as these two year programs. Signatures of authorized persons, official stamp, both institution, every page of the memorandum of agreement should be initialised by both parties, depending on the volume of the document. Kindly state number of filed beds in old age homes. State exact number of R425 of nursing college. Kindly submit the name and SANC reference numbers of the principles of this campus. Enclosed please find copies of the following for your assistance: Memorandum of agreement between the nursing education institution and the clinical facilities, outstanding information of all clinical facilities, situational analysis that was submitted. Thank you.

VIERDE OPNAME.
St. Augustine’s Hospital. First letter, 25 January 1951 to Miss Northard. Would you be good enough to let me know what is happening about the establishment of the Training school at the sanatorium here. I am told by the Reverent Mother that they are waiting for someone to inspect. It would be helpful if you could arrange this, and I shall be greatfull if anything you can do to keep. Kindly your regards, sincerely, signed, Aubrey Ratford.

Response from the council. 3 February 1951. To Mr. A. Ratford. Dear Sir, As Mrs. Northard will be out of town for some time, she has asked me to reply to your letter of the 25 ???. I could not trace any application from the sanatorium, Durban, for recognition as a training school. Would it be possible for the Reverent Mother to furnished me with the details of the application with my file reference number. I can definitely say that since my absumption of duty at the beginning of 1950, an application from the sanatorium has not reach me personally and the staff have no recollection of it either. Signed W.J. van Schalckwyk. Registrar.

Letter from Sanatorium, Champsford Road? Durban, 21 March 1952. It is hand written. To Miss Northard, Dear Miss Northard, I regret not having been able to see you when we were in Pretoria last month, as I would have like to have your opinion about the school. We would be so happy to able to re-open it. As I have to go to Pretoria on business at the end of this month, or the beginning of April, would it be convenient for you to give me an approximate date on which I could meet you? I will be in Durban until the 27 March and at Ladysmith Convent High School, Natal, from 28 until 13 April. Yours sincerely, Sister M. Dominique, Regional Superior of the Angels of the Order, Natal.

Application for particulars in regard to training school for pupil nurses. Convent
Sanatorium, 107 Champsford Road, Durban, Natal, established 1910. The date of this application is 17 December 1952. Signed Sister Mary Agnes L. Light, Matron.

Covering letter 17 December 1952. Dear Sir, We hereby wish to make application to open our hospital, The Convent Sanatorium, Durban, as a European training school. I am enclosing here the filled in form. I would like to draw your attention to the following points on the questionnaire, number 6, 7, 12 and 13. Number 6: We are under repairs and renovations, so for the last year our bed capacity has been only 94 beds. We will re-organized, which will be in a few weeks, we shall have one in written 32 beds, which will be duly registered. We are registered at the time 417 beds. Number 7: If out of 94 beds our daily average of occupied beds is 85% out of 133 we shall have 100 – 110%, and by affiliation to another hospital for children and out patients, this average will be increased. In number 12 and 13 for children and out patients, our ours been small, we have applied to the Provincial Health services for affiliation with Addington Hospital, as we have not yet received any reply u to date. We have approached the authorities of Macghotsa Hospital. They are quite prepared to except our students if the Nursing Council agrees. A group part of our students will come form the Mission Hospital and will go back after they have finished their training, to work in these same hospitals. For that reason the Macghotsa Hospital would be of great help to us. I would like to know if there is anything further to be done. Hope this would receive your considerate attention. Thanking you. I am yours faithfully, sister Mary Agnes L. Light. Matron.

Inspection report. 21 January 1953. Your application for approval of the Sanatorium as training school for medical and surgical nurses was laid before the executive committee of the council at its recent meeting. I was directed to inform you that it is impossible for the committee to consider an application when your proposals regarding beds, children and out patient departments have not yet been finalized. The council can only approve of or disapprove of an existing hospital as a training school. It can not consider an application when certain things mentioned in the application will only been finalized or available in the future. It is there for suggested that you renew your application when the various matters referred to in your letter have been brought to finality. In submitting the application again, you should state exactly what arrangements had been made with other hospitals for training purposes, e.g. the details of the training that will be undergone at the hospitals, the periods of posting, ext. On receipt of such application, the matter will be considered by the council. I cannot, of cause give you any indication as to whether such an application will be granted or not. Signed W.J. van Schalkwyk.

15-02-1953. To the registrar, Dear Sir, The Reverent Mother Superior of the Sanatorium in Durban has asked me to write to you to enquire whether it would be possible for the student nurses to go to the Macghotsa Zulu Hospital in Durban to do this two or three months training in children’s nursing and Casualty. In the light of the Sanatorium being passed as a training school for European nurses I understand the Medical Superintendent of Macghotsa Zulu Hospital is quite willing for the students to do this part of their training there. The Sanatorium in Durban could put aside one large room which could take 10 to 12 cots, but I understand the minimum number of children’s beds required by the council is 30. This could ?? we could not to??? They also have a small room which they could commit convert into an out patient department to do dressings, treatments, injections, ext. they could not afford to put up a large casualty department out, but if the nurses could get this experience at Macghotsa, it should be satisfactory. Would it not be possible for the council to send down an inspection to see the building before the make extensive alterations,
because this would cost the sisters a good deal of money if you did not pass it as they, as a training school. Also will it be necessary for secular student nurses to pay government rates of salary, EOLA and uniforms. I would be glad if you could let me have this information as soon as possible. Thank you, yours faithfully. Signed E.J. Dean.

20 February 1953. To Mr. E.J. Dean. Dear Sir, In reply to your letter, 15 February 1953, I have to inform you that there is nothing that I could add to my letter of 21 January 1953. Addressed to the Matron, Sanatorium Hospital, Durban. Council is not empower to advise hospitals regarding buildings, ext. but can only approve of an existing hospital as a training school. I cannot say whether the council will agree to student nurses assigned to the Maccord?Zulu Hospital for training in children’s nursing and casualties. The Sanatorium should put a complete scheme before the council for consideration as stated in my letter of 21 January 1953. The council does not control the salaries payable to student nurses.

Note from Sanatorium. 17 February 1953. Dear Sir, would you please forward to me at your earliest convenience two application forms for the opening of a training school. Sister Mary Agnes L. Light. Forms were sent on 27 February 1953.
There are the completed forms again. Sanatorium. 3 March 1953. Acknowledged on 10 March 1953, saying that the matter will be submitted to the executive committee of the council on its next meeting which will take place on the 15 April 1953. In the mean time I would be grateful if you will kindly complete the attached form and return it to me as soon as possible.

Letter dated 21 March 1953. Receipt of your letter, reference 5216, of 10 March 1953. I thankyou for it and also the information it contained and have take note of ???. Under same cover I am returning the form inspection of training schools for medical and surgical nurses. I hope it is all in order. Signed Sister Mary Agnes.
Then there is the inspection of training schools for medical and surgical nurses.
23 April 1953. With reference to your letter, 3 March, I have to inform you that your application for recognition of the training school for European medical and surgical nurses, was considered by the executive committee of the council at its recent meeting. I regret to have to inform you that the committee decided to refuse the application. The decision was taken in terms of a directive issue to the committee by the council at its recent meeting to the effect that a training scheme whereby European students will be required to be trained by non European trained personnel should not be approved. This will be the position if your students have to be posted to the Maccord???Zulu Hospital for certain periods during their course of training. I might mention that the council did on a previous occasion approved of such a scheme, but the training school itself applied for withdrawal of the recognition to train as the scheme proved as to be completely unsuccessful. The committee suggest that you co-op the assistance of the Natal Provincial Administration or another administration to make a suitable arrangements for the training of the students in casualty and out patient nursing, children’s nursing and fever nursing. At receipt of the proposed scheme, the matter will receive further consideration.

Letter from the Director of the Provincial Medical and Health services. 21 July 1953. Affiliation Sanatorium Durban and Addington Hospital. I understand that the Sanatorium Durban, is desiarous as to register as a training school for medical and surgical nurses of the SANC, but is unable to obtain registration at present as certain facilities for training are inadaquit or lacking. The Natal Provincial Administration has now been approached by the Sanatorium to allow a number of students, not acceding six, to work in the children’s ward and out patient department of Addington Hospital.
With your sanction it is proposed to use the coloured children’s ward for the training of the Sanatorium students. The ward has 40 beds, which are all almost constantly occupied. All types of medical and surgical cases treated, four trained European nurses, 16 nurse aides are employed in this ward, which include the staff in night duty. As regards out patients fanning???? would the council consent to the use of the administrations Indian-African clearing station, Beatrice street, Durban for this purpose. This clinic is staffed by European doctors, nurses and African nurse aides. Attendance at the clinic is in the region of 2000 per month and include medical out patients, casualties, dental out patients, patients attending for dressings. The Sanatorium authorities will no doubt approach you for permission for affiliation, ext. but I should appreciate hearing whether your council would be prepared to allow the use of these departments for the training of students, as neither is used for training of our own students. The arrangements would not in any way interfere with the training of Addington students. Signed L.L. Daniels. Director of Provincial Medical and Health Services.

Response from the council. 21 August 1953. Your letter, G17, of 1 July was considered by the executive committee at its recent meeting. The committee resolve that students be required to attend for three months at the Addington Hospital for children’s nursing, for two months at the Indian-African clearing station for out patients and casualties and for one month at Wentworth Hospital for communicable disease. As soon as these arrangements have been completed, the Sanatorium should renew its application for approval for a training school for medical and surgical nurses. The council will then arrange for an inspection of the hospital and a decision will then be taken on the Sanatorium application. Signed W.J. van Schalkwyk.

Letter from the Sanatorium. 23 April 1953. The recognition of our hospital, the Convent Sanatorium, as a training school according to committee suggestions put before us in your in your letter of 23 April 1953, we at once acted on the advise, and made application to another Provincial Administration with regards to make suitable arrangements for our students to go to the children’s nursing to the Addington which is the only European children’s hospital in Durban and to the Indian-African clearing station in Beatrice Street for out patients. We know for a fact that we are supported for this application by the Natal Provincial Administration, who is still very hopeful, but up to date no decision has been given us. The difficulty seems to be at the hospital itself where the authorities seem reluctant to have other students. We do not see why. We would have wished to have kept you informed during these past months, but as there has been several meetings of the Natal Provincial Administration, at which this question had come up, we waited for a definite answer before we let you know. Only this is delaying our further application to you and it is very disappointing to us as we are still very anxious to help our training school. Hoping to be able to put forward again our application in the very near future, and thanking you for your consideration. Signed: W.E. Beard. Matron.

28 November 1953.I have to acknowledge the receipt of your letter of 23 April 1953, which reach me on the 24 November 1953. I notice that you are endeavouring to make suitable arrangements with the Addington Hospital and in this connection I have to advise you that on 21 August last in reply to an enquiring from the Director of the Provincial Medical and Health Services, Pieter Maritzburg, the executive committee of my council ruled that your students would be required to attend for three months at the Addington Hospital for children’s nursing, two months at the Indian-African Clearing station for out patients and casualties and for one month at the Wentworth Hospital for communicable disease. From the letter from the Director...
of Provincial Medical and Health Services, it appeared that the proposal was for your
students to receive training in the coloured children's ward. He stated that as this is
not used for the training of students at the Addington Hospital, the arrangements
would not in any way interfere with the students. It is there for not clear way the
hospital authorities appeared to be reluctant to allow your students to receive this
training. As soon as suitable, arrangements have been completed, you should renew
this application for recognition as a training school and arrangements will then be
made for your hospital to be inspected.

Letter 8 December 1953. Dear Sir, The Natal Provincial Administration has written to
inform us that they have approved of the affiliation of the Convent Sanatorium with
the Addington/King Edward VIII and Wentworth Hospitals. They asked us to
communicate with the matrons of these hospitals, which we have done, and they are
agreeable. The Addington to except out students in the coloured children’s ward for a
period of three months, for each student for children’s nursing. Wentworth Hospital
to except our students for a period of one month for each student for infectious
disease. Kind Edward to except our students to go to their African-Indian clearing
station at Beatrice Street, for out patients and casualty experience. Hopefully the
above meets with your council's approval. We hereby submit our application for
recognition of the Convent Sanatorium for a training school for European medical and
surgical nurses. W.E. Beard. Sister Mary Agnes.

Then there is a completed application form again.

13 January 1954. Application acknowledged. Receipt of application. Mrs. Northard
and Mr. van Schalkwyk will inspected the hospital on 19 January 1954. Documents
forwarded to be completed and handed to the inspector. To the Mother Superior.
Mrs Northard, I wish to thank you for all the trouble you took to make our visit to the
hospital such a pleasant one. The lunch was excellent, as were indeed all the
arrangements. Please also convey our appreciation to the members of your staff. the
report on the inspection will be considered by the executive committee of the council
on 3 February. We will let you know of the outcome as soon as possible. Then there
are copies included. Regulations for the training and examination for medical and
surgical nurses, regulations regarding the act or omissions by registered nurses, and
registered ??????? by the council might take cognisance. Regulations regarding the
registration of student nurses and student midwives, regulations concerning the
qualifications and conditions for admission to the registers of nursing nurses and
midwives, regulations concerning the annual subscription payable to the council by
registered nurses and registered midwives, and the removal of names from and the
admission of names to the registers. Regulations regarding the distinguishing devices
for registered persons and the list of suggested text books and books of reference.
Then there are some statistics on patient admissions and bedlinen from the Convent
Sanatorium.

There is a form that was completed. Inspection of training schools for medical and
surgical nurses male, and training schools for male nurses. Training school
Sanatorium, rated beds in hospital – 128. Then there was the European occupied
average number of occupied beds of previous calendar year – medical – 75.5; surgical
– 2.9; 3.90. Number of infectious beds – 0. Midwifery cases infants and cots. Number
Infectious cases not excepted. Midwifery is attended for by special staff for that
section only. Number of operations performed during the previous calendar year:
Average daily attendance at outpatient department - just opened. Percentage of
cases available for the training of students – 90%. All the students signed out patient
and casualty departments will be sent to the African-Indian Clearing Station for the
Inspection report. And it was recommended to be recognized as a training school.
Letter 12 February 1954. Dear Mother Superior, I have great pleasure in informing you
that it has been resolved to approve of the Convent Sanatorium as a training school
for European medical and surgical nurses, with effect from 1 January 1954. This
approval is naturally subject to the provision that students go to the Addington
Hospital, Wentworth Hospital and the African-Indian Clearing Station for training. The
forms and other circulars in addition to these will be forward to you under cover of
my letter of 22 January 1954, will be forwarded to you in the near future???????????
In the inspection report the inspectors remarked as follows regarding the African-
Indian Clearing Station. It was found that a non European midwife was employed at
the station. She was practising beyond the scope of a registration. A student nurse
from St. Aidens Indian Mission Hospital?????? Carried out the dispensing under
supervision of a registered nurse. The number of forceps for dressings are insufficient.
The executive committee of the council directed me to bring these matters to your
attention and to asked you to bring the station up to the standard required for
training purposes.
26 February 1954. Circulars that were send out. This is important to note.
12 November 1955. During the recent visit to Durban the chairman of the council,
Miss A. Northard was informed that a male nurse is in charge of the theatre of your
hospital. I should be pleased to be informed whether this is correct, and if so, what
the name of the nurse is and since when he has been in charge of the theatre. It is of
cause, permissible for a male nurse to assist at operations of females and children.
Signed W. van Schalkwyk.
Then the reply. 18 November 1955. Dear Sir, I am in receipt of your letter, S177, and
thank you for say? And also for the information there in. We had a male nurse in our
theatre, but he was not in charge here, since he left the theatre. In ignorance, since
your letter was read, but with the senior medical officers at probation and permission
he was assisting at operations of females and children. It will not be done in future.
Inspection report. 28 December 1955. Training school. Male beds: medical – 28,
surgical – 33; female 32 and surgical – 35. average daily occupied beds: Male, medical
gynaecological female – 6.5; Total – 60 beds medical; 68 surgical. Medical occupied
42.5; surgical – 33.5. total – 6.5. Syllabes : lectures given during the training to cover
8. EPEN theory and practise of nursing – 24. None is given in wards. The first one was
by doctors, anatomy, physiology and first aid. By Tutors the History of nursing and
nursing ethics. Elementary theory and practise of nursing – 24 by tutors. Anatomy and
dietetics and first aid 6 and 7. Demonstrations are given in the lecture room, in the
hospital and patients wards by tutors. Clinical instruction is sometimes in the wards by
MD tutor ward sisters. Students go from department every three months or two
months as stated. Children’s infections and theatre. Last. Male medical – 3 months.

Requirements for minimum training. Medical nursing on both male and female patients to include the nursing of cases suffering from communicable diseases, 6 months. Surgical nursing – male patients, 3 months. Female patients 4 months to include orthopaedic cases, particularly fractures, neurological cases gynaecological cases, ear, nose and throat and otholmic cases. casualty and out patients – 2 months. Operating theatre 1 month. Paediatric nursing 3 months. Total 19 months. The balance of the period of teaching will be divided between other departments and wards and there would there for be no objection to students in questions spending another month in the operating theatre.


Letter 8 May 1958. We have opened a new out patients department at Mayville for colours going three times a week, having an average of 45 patients per visit. Dr. Katherine Smith is in charge and attends each visit. While on trial until your council approve of this out patient department, will it be in order for student nurses to go with the sister in charge, who is sister J.D. Botha-Snyman. Hoping to have your approval.

Letter from St. Augustine’s hospital. 16 July 1958. I hereby wish to make application for the recognition by your council for our out patient department to be used for student nurses in training. We have increased our original out patient department in the hospital itself and in addition have opened in May 1958 an outside clinic in Mayville for Colours and Indians. We have an average of 52 patients per day with the two combined. In the hospital we have treated the following cases: Dressing after patients discharge from hospital, removal of stitches and ???. removal of splinters, warts, calouses and foreign bodies, removal of plaster of parys, stitches, ????? And cuts, stitches to head and knee and fingers, treatment of burns, absesses and ??? and septic sores, bowels wash out, given daily injections for different conditions. The doctor on the case or the sister in charge are present. At the outside clinic in Mayville we have Dr. K. Smith in charge with a registered nurse and we treat the following: cuts and bites, septic sores, boils. Warts, ???? and conjunctivitis, ring worm, dressings and injections carry on after discharge from hospital. We have 12 student nurses in the third year. Hoping this is what is necessary for recognition. If there are any forms, would you please send them to me. Signed W.E. Beard.
Approved. One month of training in all of the out patients department.

Letter. 22 March 1959. We have been giving our students two weeks leave during the last six months. Can this be taken at the end of their time? Student nurse completing at the end of August. May she take these two weeks on the 17 July or must she be on duty on 1 August and take her leave before 17 July. Two weeks leave to be granted during their last six months training may be granted to them at any time during these six months of their training.

1 April 1959. Some time ago I enquire from your council where one could train for the Diploma of nursing. On advice I apply to the registrar of the faculty of Medicine Johannesburg. In his reply he states that it can not be definite if the course will take place next year. Would you advise me as to what to do. It is essential for us to train someone as our present tutor can not carries on indefinitely. Your council, I understand does not make it obligatory for a school to have a diplomat tutor, is that correct? I feel that it is important that if the school can have one, it should. No it seems there is no place of training and the school will not be able to have what they feel is a real necessity for the better tutoring of their students. Is there any other problems outside the Transvaal running the course in English. Could we have the address. Signed by Matron.

Reply 14 April. Suggest that you write to the University of Cape Town. It is not obligatory to have a person against whose name a tutor qualification is registered. 5 May 1959. According regulations as a training school for nurses, we send our student nurses for their infectious disease training to the Wentworth Hospital in Durban for two months. I would like to point out to you and to ask to reconsider these two months for the modern drug and treatment infectious diseases are not so relevance as they were. Our student nurses, it seems to me are being wasted and their time of training is being lost or shortened because there are so few cases. During these two months they are not being occupied nursing. They are losing so much experience and knowledge in general nursing which they could be gaining here.

The student nurses have approached me on this matter. They say as fever is the post graduate course and a special subject, they could do the course in full after their general training. I should respectfully suggest they one month at the fever hospital and they would be pleased to have one month there. I think it is good for them to go there to see the few fevers there are and more especially to learn about polio and nurse it in the iron lung. In the month they could do this. Most general hospitals take time for cases and even nowadays meningitis and also nurse ??????????? to these cases.all these cases student nurses must have knowledge of. I would be pleased to have your permission for this.

Reply from council. It was considered at the recent meeting of the executive committee the matron being informed that the students are required to attend at the Wentworth Hospital for the period of one month. It was never stipulated that they should attend for minimum period of two months. That the matron being informed that the correctness of the statement of the modern drug and treatment infectious diseases are not so profuse or virulent as the were, is questionable, and that students not be permitted to get this impression. In the regulations prescribed that students are receiving instruction in fever nursing in the basic training and that the believe that as fevers is a post graduate course and a special subject they could do the course in full after their training, is incorrect.

16 May 1960. The hospital will be inspected as soon as possible in its capacity as a training school for European general nurses. You will be informed in due cause.

Inspection: School, medical, surgical nurses, St. Augustine. 9 June 1960. The bed
numbers are still the same.
Inspectors report on training school. 7 July 1960. There are no beds for infectious cases. Number of operations performed – 3433. Number of casualties treated – 0. Average daily attendance: out patients department – 60. There is a midwifery department of 18 beds. Students are at Addington Hospital, Colourd children’s ward for three months. Wentworth Infectious Hospital for one month. St. Theresa’s out patient clinic for one month. This clinic is run by St. Augustine’s at Mayville. Practical cooking, 6 lectures of 2 hours each at the Durban Technical College. New lecture and demonstration block is being build which will be ready for use in about a month’s time. the hospital was clean, and all records were well kept.
20 October 1960. We are pleased to inform you that we have build a new teaching centre, apart from the hospital in a quiet position, consisting of two lecture rooms, demonstration room, library and an office for tutor sister, which has been fully equipped and now in use. We would be pleased to show them to you when an opportunity occurs.
16 February 1961. We wish to advise you that we have moved our lecture rooms from the hospital into a separate block. We have now 12 more beds patients which we have allocated as follows: one four bedded ward for female, one four bedded ward for gynaecology, four extra beds for ENT section.
Circular 26 of 61. 1 June 1961. Five training schools have submitted memoranda. The memoranda will be discussed at a meeting to be held in the Provincial building Accott Street, Durban. Commencing at 9:30. The discussion will continue on Friday. In addition to the memoranda such matters the council may consider and such matters as may arise during the meeting, will be discussed. Talk about training regulations in general. Although the training schools have not submitted a memorandum, it is felt that the matter to be discussed, will also be of interest to you, and I have been directed to invite you and the matron to attend this meeting as observers. Please let me know at an early date whether the invitation is accepted. Cannot except responsibility for expenses of persons attending the meeting. If there are other members of the staff of the training school who wish to come and listen to the discussions, they are welcome. Van Schalkwyk.
Confirm that the Mother Superior, Sister Tutor and the Matron will attend the meeting at the Provincial building in Durban.
The council, to the Matron of St. Augustine’s Hospital. 18 March 1963. My council has considered the matter of training of white students belonging to the religious orders in Mission Hospitals of the orders recognized as training school for non white students only. As in the past, my council has no objection to white students undergoing their training in such schools, provided the provisions of section 49 of the Nursing Act, Act
no 69 of 1957 is borne in mind. With regard to the nursing of white patients by such students where the hospital concerned has a white section for white patients, it has been resolved that white student nurses may nurse patients in the white section of the hospital on the understanding that the white section might not be regarded as a ward recognized for training purposes and that the white students may nurse patients in that section on incidental basis only. M. Theron.

Then the students were placed in the central sterilization department for three months and the council is querying that.

Training undergone. To inform the council what practical experience in sterilizing students gain during the course of their training in the wards. The following matter being brought to the attention of the person in charge of the training school, that she be asked to give the council the assurance that this matter has been attended to.

Waste stitches ??? per 100mg and ??? of betadine??? Pethidine??? When only 25 mg are given to a patient are not entered and signed in the drug register.

Reply. 2 July 1963. Students gain experience in sterilization by autoclaving, linen, dressings, rubber, drains and gloves. Needles, syringes, boiling water, instrument bowls, needles and brushes. Chemicals, surturing needles, scalpels, scissors, pressure, water bins, sterilization of water, setting trolleys for dressings, skin preparations, surturing lumbar punctures, abdominal, intra venous injections, packing of drums, care of instruments and equipment, routine in cleaning the depot and the three dressing rooms, one of which is located on each of the three floors of the hospital.

In the wards, boiling of water for emergency trolleys, specially on night duty. Pressure water bins sterilizing.

Theatre sterilizing by autoclaving linen, chemical, sharp instruments, suturing ampules, scopes, suture ampules, scopes, ressecto scopes. Formalyn vapour, broncho scopes, scopes, pressure waterbins sterilization. This matter has been attended to and the instructions given by Miss Wilkens are being carried out. Your post script, miss C. Laffetee, the sister in charge of the central sterilization department, is a qualified surgical and general nurse and midwife. She qualified in 1953.

Reply. 9 August 1963. The response from the council was of the committee’s opinion that three months training in this department is excessive. It has accordingly been decided that students shall not undergo more than one month’s training in that department. Then they are opposing their decision. A whole correspondence back and forth regards to the sterilization. Then they requested to submit a full report on their practical training.

Letter 24 October 1963. Hospital certificates. In reply to your circular, dated 16 October 1963, Hospital certificates issued to students. Here with enclosed as requested by you a copy of the certificate as issues at St. Augustine’s Hospital. These certificates are only given to students whom have been successful in the final examination, set by the SANC, and who for qualify for registration with the council.

Disposable syringes. Will you please be kind enough to advise me if there is any reason why we may not use disposable syringes in our training school. The ordinary record syringes will off course continued to be used, mainly in the theatre, but we would like to know if it is permissible to use disposable ones in the wards.

No objection to the use of disposable syringes in the wards, as long as the students are taught the principles and methods of sterilization of syringes.

Inspection of dressing rooms.
15 January 1965. In view of the chronic marked nursing shortage in Natal, which I fear has nothing to do with the salary structure, and in view of the very few applicants for European auxiliary nursing students so far been trained, I thought by arrangement with our sister tutor we might employ a superior class of person, giving them one year of practical bedside nursing, and on completion of this special one year course, give them a flat salary of R80 per month. The idea is that there are many ladies of leisure, who have their own houses and accommodation, many of whom are engaged in activities for charity, who might just like to take a course of this kind. Off course I realise in no way must it apply any way other than in this hospital, or must it interfere in any way with general nursing training. On discussion with our matron and sister tutor, I understand this could be done. Therefore, with your consent, I propose to insert the following advertisement in the Durban newspaper: St. Augustine’s Hospital Durban. Special opportunity offer to ladies, age limit 45 years, of superior education to take a special one year course of practical bedside nursing. Must live out. Will receive nominal salary during training, of R50 a month for one year. Salary on completion of course, R80 per month. On completion of course will have distinctive uniform and will be known as practical nurse, and an appointment assured in this hospital. Duties will be interesting and worth while. Application in writing. This scheme is not to be confused with nursing training schemes offered by the Nursing council. I am writing to you before placing this advertisement in the newspaper, to ascertain that I am not encroaching on the rules and regulations of the general nursing council in South Africa. You will note that in this advertisement I had deliberately omitted the word “training in nursing.” I wonder if you would be kind enough to let me know your views on this in due cause. R.E. Welkin.

Reply. 3 June 1965. To St. Augustine. In reply to your letter, dated 15 January 1965, I have to inform you, that as far as this council is concerned, the matter is in order. The council has no control over persons who are not registerable or enrollable or who are not in training to be registered or enrolled. The council suggest however that the word “assistant nurse” or “nurse aide” be substituted for the words “practical nurse”. The title should indicate clearly that the person is not a qualified nurse.

8 March 1965. I thought that it might be of interest to you for me to record the incredible response the council has received in response to the advertisement to which you express no objection, in my recent letter, dated 15 January 1965. The advertisement appeared three times. We have had over 40 applications, all from good class women between the ages of 35 and 45 years, out of which 22 had been selected for training, commencing on the 1 April 1965. I am recording this to you because the recent inquiry into the shortage of nursing staff and to indicate that perhaps there might be a third stream who appeared very willing and capable of being trained, and be given the opportunity to become nursing assistants. It follows of course that they will only do this if they are near their own homes and their grown up families are no longer an inconvenience to them. There also appears to be considerable enthusiasm for being given the opportunity to take a short course of this kind.


17 May 1966. I would be grateful if this letter might be placed before the chairman and members of the nursing council for their serious study and consideration. As the council is aware, St. Augustine’s Hospital includes a modern, up to date maternity department with two nurseries, one containing 30 mobile cots, is air conditioned and appropriate facilities for bathing and preparation of babies and a smaller premature nursery, containing two incubators, and a third reserve times four portable incubator. Gaan die sin na. the maternity department includes the isolation
room and facilities for bathing and nursing, also a milk kitchen for preparation of feeds. The maternity department is fully equipped. Both nurseries are served with wall fittings, having pipe lines ????? laid on. Most of the senior specialists in Durban make use of, and daily visiting the nursery, names included. The purpose of the letter is to request that the nursing council grant the approval for our nursing students to work and study periods in the nursery up to one month’s duration to cover the syllabus requirements for paediatric studies and for the nursing council officially recognized our nursery as a centre for student training. Sister L. ?????, sister in charge of the maternity, is fully qualified, having general nursing, midwifery and mother craft certificates. By experience she is well suited as proved to be very good teaching sister. She at present lectures on the care of the laying in woman and the care of the new born, as prescribed in the syllabus. Signed, Balcon.

Approval for not more than one month in all during their training, provided that they are not posted to the delivery room, or take part in deliveries in any way. This will all probably shortly be increased to two months.

31 January 1967. I wish to inform the council that from 1 December 1966 our bed number was increased by 25 beds in the new block. These are private wards, which will be used for both male and female patients mixed, and medical and surgical. Signed by the Matron.

Something about a letter that appeared in the Cape Argus, Tuesday, 14 March. For ????? of yourself and the Administrator of the hospital. The council in a recent meeting in Cape Town, noticed this report with concern. It is again emphatically stated that the report is not a true reflection of the proceedings of the council, as negligence was not alleged and applied at any time. statement issued by the SANC, presently in session, noticed with concern the report in the Cape Argus of 14 March of 1967, in which negligence in handling drugs at St. Mary’s Hospital, Marion Hill, and St. Augustine’s hospital in Durban is reported. The council emphatically states that the report is not the true reflections of the proceedings of the council as negligence was not alleged or implied at any time.

4 April 1967. St. Augustine acknowledge the letter and the press release. For your information, I have written to the Cape Argus, requesting that this allegation being withdrawn, and a copy of the withdrawal to be forwarded to me. Meantime this matter is being placed into legal hands, should the necessity of taking legal act be necessary. I have now received an extract from Cape Argus, dated April 5, indicates the withdrawal in every sense of the accusation of negligence with drugs concerning this hospital, which is now being accepted by the council. There is one point however, I would like to take up with you and that is as to whether discussions of this nature should be dealt with privately by the Nursing council and not at a full meeting with the press present. I mention this because it seems quite obvious that such a situation could easily develop in future situations.

10 April 1967. Council then says that they’ve got the power to deal in committee with such matters as they think fit. I ??? ??? to suggest that it is impossible to obviate such unfortunate occurrences as unjustified conclusions cannot be guarded against. However, I am working on a memorandum which will eliminate matters of a more or less routine nature from the main report of the council. Such a procedure will also have a safe considerable time.

6 May 1967. We wish to inform you that as from 8 May 1967, we have opened our new post operative recovery ward and an eight bed intensive care unit.

29 May. I shall be grateful if you will arrange for this application to be placed before the nursing council for the operating theatres with post operative care and also an
intensive care unit to become training centres for the certificates for operating theatre technique and intensive care nursing care. Both these departments are new and fully equipped and in addition the theatre and intensive care unit sisters in charge are both qualified in respective techniques. We are fortunate in having a majority of medical and surgical specialists, who not only have consulting rooms in this hospital, but concentrate their patients in this hospital. In setting the sallebys for both subjects, the hospital council believe that we are now in a suitable position to offer training to registered nurses who desire to obtain the certificate in operating theatre technique and intensive care. Signed, Balcon.

The regulations for the certificate in operation theatre technique and the certificate in intensive nursing care. Would you please indicate in each connection whether the hospital can comply with the prescribed requirements for the training school. A copy of the guide, regarding the qualifications which lecturers and demonstrators shall hold for the certificate for intensive nursing care, is enclosed. An early reply would be appreciated, as I would probably be proceeding to Durban on the 7 June.

6 June 1967. Modern approach to nursing by use of electronic aides at St. Augustine’s Hospital, Durban.

21 April 1967. The Arch Bishop of Durban officiated at an opening ceremony to mark the completion of the new building complex, providing additional bed accommodation in private wards, consulting suites for specialists, operating theatres, and there is a whole description of ethics and intensive care and operating. All the equipment that they are using.

14 June 1967. Following your letter dated 2 June 1967, ref. S177 in which I have to thank you for the enclosed copies of regulations for the certificate in operating theatre technique and intensive nursing care. I would like to mention that in both instances the hospital can comply with the prescribed requirements for recognition for the training school, with the following reservations: It is found that two months in the anaesthetic and recovery room are sufficient time to learn all that is necessary. It is suggested that an extra month or even more time be allocated to the section as passed experience has revealed that one month is insufficient. We have a neurosurgical, neurological unit in this hospital. Nurses can be trained in intensive care ward or neuro care ward. Suggested two months in respiratory cardiac renal resusatation in the intensive care and out patients. We are to receive accident cases in this hospital by virtue of agreement with the work man’s compensation commission. The following points of reservations concerning permission to visit Addington Hospital to see human dialysis, permission to visit Wentworth Hospital to see lung and heart machines, for the high perk barric oxygine chamber, if this is regarded as essential. It is regarded here that twelve months are sufficient time to for the training of intensive care, but this is a matter which may be discussed on site during your visit. We proposed to limit the training to eight students and each one to be screened by a selection committee. Signed. F.E. Balcon.

Confidential report. Operating theatre technique. There are four registered nurses in the theatre against whose names theatre technique has been registered as additional qualification. The number of operation been performed during 1966, 2795. Additional theatres have been opened, with the result that the number of operations has increased considerably this year. This hospital can comply with the prescribed requirements for the operating technique course. I recommend the application be granted. Intensive nursing: the new unit for intensive nursing care is exceedingly well equipped. There is one sister against whose name intensive nursing care has been registered as an additional qualification. There is no heart and lung machine. It is
hoped to obtain permission to take the students to Wentworth hospital to see this
machine in operation and to take them to Addington Hospital to humo???? Dialysis.
Apart from these two items, the hospital can comply with the prescribed
requirements for the intensive nursing care. I recommend the application granted.
14 July 1967. I believe that you are aware that between three and five student nurses
spend periods of three months paediatric training at Addington Hospital coloured
children’s ward which we are given to understand is soon to be transferred to
Wentworth Hospital bluff???. This adds considerably to the daily mileage we would
have to transport our students to and throw. I there for seek approval to train our
students at our sister hospital in Pieter Maritzburg, St. Anne’s Hospital. Pieter
Maritzburg has been approved by the Nursing Council to train auxiliary nurses, and in
many administrative respects are closely affiliated. St. Anne’s Hospital, taken over a
twelve month period, during ’66, till May ’67, records a daily average of 20.5 children
in their children’s ward block. Of these were 8.2 medical, 12.3 surgical, 7.4 female,
13.1 males. The following information is given: St. Anne’s Hospital has 130 acute
beds. Students are now in residence at the side of the hospital, formally known as the
Convent. There is single room accommodation, well furnished, with the use of private
and visitor’s lounges, and their welfare would be in the hands of the matron and her
staff, which includes the resident housekeeper. Lectures will be arrange as at present
and our senior sister tutor will visit Pieter Maritzburg to give her lectures. In addition
the continuity of training would be maintained by the matron and matron assistant
and the local sister tutor. Doctor’s lectures will be arranged with local specialists. I
would be grateful if this letter of application may be placed before your council for
consideration at an early date.
Response. 1 August 1967. As a training school for white nurses for the certificate in
operating theatre technique, with effect from the 1st August, and as a training school
for the intensive nursing care from 1st August. Provided the students visit the
Wentworth Hospital to see the heart and lung machine in operation and the
Addington Hospital to see ????? dialysis.
3 November 1967. In response to the letter, 14 July. The advisability of training
student nurses and student auxiliary nurses in the same ward is questionable. To date
the council has approved of such an arrangement only during transition periods.
Shouldn’t you rather consider terminating the training of auxiliaries at St. Anne’s and
asking for recognition???? as a part of the St. Augustine Training School? It would
appear a difficulty is in many cases experienced in recruitment of auxiliaries and this
will off cause result in very few persons actually qualify as auxiliary nurses. I would like
to hear from you in this connection as soon as possible.
Reply to letter on 4 December 1967. Thank you for your letter dated 3 November
1967, which has now received our careful attention. The Hospital council, St.
Augustine’s Hospital, Durban and St. Anne Hospital, Pieter Maritzburg, are of opinion
that it would be retrograte??? to withdraw the training of auxiliaries at St. Anne’s
Hospital, mainly of the increased interest shown in your auxiliary nursing. In order to
clarify the situation, I called for the report from the Matron, Miss J. Smith, St. Anne’s
Hospital, Pieter Maritzburg, and enclosing it for your information. Naturally we have
no option, but to withdraw application for student nurses to receive paediatric
training at St. Anne’s Hospital, so my letter dated 14 July, is withdrawn. Within the
last three months there have been a renewed interest from outside sources, trying to
obtain trained nurses, auxiliary nurses, and while this trend continues, it seems
sensible to keep the training school for auxiliary nurses alive, especially as it is the
only one in Natal. On ;the other hand, off cause, it is difficult to know what the future
recommendations regard the auxiliary training is going to be, following the publication of the enquiry into nursing. Any guidance you can give us in this respect, would be much appreciated. I might add that Doctor Botha, Director of Medical Services, Natal, has asked me to contact him mid January to discuss the training of auxiliary nurses. I will not matron. Self explanatory. Signed, F.E. Balcon.

Report, 6 pages. Lang stilte.

Response, 11 February 1970. Training of white auxiliary nurses. Then approval is granted with effect from 1 March 1970. The following are enclosed: the regulation regarding roles for students, regulation for the course for the certificate for enrolment as an auxiliary nurse, guide on qualifications on lectures and demonstrations and minimum numbers of teaching periods, circular 1 of 62, and 4 of 69. Following forms application for enrolment and re-enrolment as a student, notification of training. Forms of completion of training with record of training and examination entry form should be asked at a later date, but not before May 1970. There’s a letter 16 February 1970. Dear Sir, In view of the changed circumstances concerning the syllaby of training student nurses, and to meet the necessity of present day approach to attract students, both St. Augustine’s and Hospital authorities, are agreed to combine and apply here with to the SANC for the status of a College of Nursing, incorporating the facilities of both hospital training centres. Thus we jointly apply to the SANC to inspect the facilities of our training schools at the earliest convenience, submitting that should they approve, we might be granted the title of “Durban Private Hospitals College of Training”. We are presently two sister tutors, Sister McCaine, and Sister Heinen. If two sisters cannot be jointly registered in charge, then we submit the name of the senior sister, sister McCaine. The combined bed strength of the hospitals in St. Augustine, 258 plus Entabene? Hospital 243, total of 501. For the purpose of a reply, please use 107 Chomsford road, Durban. Response from council, 26-03-1970. Your letter of 16 February 1970, refers. From the enclosed copy of Government notice of regulation 3901 of 12 December 1969, you will notice that the council may approved the college and that they approved school may apply for recognition in association with an approved college. It would there for be appear that it is desire to apply for recognition of a college, one person must be in charge. Before the application can be considered an inspection will be necessary. Your attention is directed to Government notice 933 of 28 June 1963, copy enclosed. It is impossible to say when the inspection will be carried out, but if and when the college is recognized, to apply for the recognition of Entabene Hospital and for the recognition of St. Augustine Hospital as training schools in association with the college.


20 July 1970. Letter to the hospital, Miss Freeman and the registrar of the council will visit St. Augustine’s and Entabene on 19 August, for the accreditation visit.

Letter 26 August 1970. With regards to transfer student nurses to Hospital, Pieter Maritzburg, training. According to regulation 5 a 2 and they asking to the circulation. Then on 28-08 there is permission given in the light of the transfer to the Gray’s Hospital. As far as the council is concerned, the matron of that hospital can at their discretion recognized the training undergone at your hospital. Certificate of termination of the training should be submitted in due cause. (Opname is baie onduidelik hier.)

11 December 1970. It has now been decided by the directors of this company after discussion with matron, sister tutor and subsequent discussions with the director of Medical services, Provincial Hospitals, Natal, to once more assume parallel training of
student nurses for auxiliary enrolled course and for the diploma course training. This letter is an application to have Parklands Private Hospital affiliated to St. Augustine’s, which would give us a total of 429 beds, as the two hospitals are owned by the same holding company. The particulars of the St. Augustine’s Hospital are already known to you, and for your information Parklands Hospital has a bed strength of 178 beds, which includes 8 recovery beds and a total number of wards is 104, which consist of private, semi private, deluxe, executive and four bedded wards, comprises of 80% surgical and 20% medical. Signed Balcon.

29-12-70. It is noted that it has been decided to continue with the training of the general nurses and the auxiliary nurses. Please state whether the person in charge of the training school, the matron of St. Augustine’s will be in full and direct control of the training of students at the Parklands Hospital.

Response. Confirm that the matron of St. Augustine’s Hospital, Mrs. M. Collenbrander?? Will be in direct charge of the training of the students at both hospitals.

The inclusion of Parklands Hospital in the training school is in order. 29-01-71.

Kennisgewing van inspeksie. 06-12-1972.

Recognition as a school for nursing assistants, 10-01-73. Recognition as a school for white and non white nursing assistants, females and males, is granted with effect from 1 January 1973. Following documents are enclosed: regulations, the directive, roles, regulation distinguishing devices, application forms, termination, completion of training, enrolment to be submitted on completion of training.

Inspeksie verslag.

Letter 26 March 1973. Intensive Nursing care course. I wish to run this course, starting in April 1973, and have three or four experienced intensive care sisters who would like to register for the course. One of these sisters holds a coronary care certificate, registered in England. Sister Inman, who is a member of the staff, holds the intensive nursing care certificate, will there for be in charge of the course. She informs me that she may have to go to England later this year. I have frequently advertised for a sister holding this certificate, but to no avail. If sister Inman has to leave, would you allow me to continue with the course, even if I have ??? to replace her? Collenbrander.

18-04-73. Exemption can not be granted.

9 December 1974. I refer to the above mentioned letter and my telephonic conversation with Mr. Visser. I hereby make formal application for St. Augustine’s Hospital to be registered as a training school for general nurses males, retrospectively to 1 January 1974, in order that Petrus Jacobus Daniël du Plessis, may have the training which he has undergone, recognized. My apologies for any error on my part in this matter.

I have to inform you that ??? been recognized as a training school for general nurses, males, from 1 January 1974.

I would like to inform you that matron Collenbrander has resigned from our hospital. The new matron at St. Augustine’s Hospital is now Mrs. L. N. Burckenstock. We have appointed senior tutor, Mrs. Jane Gwendolene Mary Raw, as administrator of our training school and students. Her qualifications: general Nursing certificate 1940, SA Medical council registration certificate 1943, SANC registration as a midwife 1965, diploma nursing education Natal University, seconded from King Edward Hospital, from 67 – 68. Could all future correspondence regarding the training and administration of our students be forwarded to Mrs. Raw. Mrs. Raw also wishes to do the DHA course by correspondence if and when possible. Please confirm if the above appointments are in order. Dated 18-08-75.
Approved 28-08-75.

Letter 21 March 1977, from Mrs. Raw, informing the council that she will be retiring, and that Miss K. Howes, will be replacing her on the 1st May 1977.

Letter 27 April 1977. I understand from tutors at the other training school in Durban, that they have been notified in response to ????? that enrolled nurses may continue to qualify for student nurse training until May 1980. As we do not have this notification in writing, may we please have communication in this effect for our records. Signed, J. Raw.

Reference to your letter, 27 April. It has been decided to amend regulation 2,3 of the regulations for the course for the diploma for registration as a general nurse, to course the period of two and a half years to be extended. The amended Government notice has not yet been published. Training schools have not yet been informed of what the amendment will entail.

Informing the council that Miss K. Howes is now in charge of the nursing training and then the council ????? administration ????? registered against your name. A special application that you must be permitted to be designated as the person in charge. Then there is the letter doing that application. It was confirmed. Approved.

Another inspection report.

Copy of circular 37 of 1976. For further attention.

Dan weer ’n inspeksie. Parklands Private Hospital. During the recent inspection of this training ????? the registrar ???? Parkland’s Hospital no longer form part of the training school. You will be able to delete this arrangement from my records with ???? written conformation. Parkland’s Hospital wishes to confirm our verbal discussion with Mr. van Schalkwyk, Registrar at Parkland’s Private Hospital no longer forms part of the training school. Signed, Burckenstock. 1 October 1979.

Training of Indian nurses. Enclosed is a photostate copy of a letter from the Department of Hospital services, Natal Provincial Administration, whereby permission is given for nurses of all race groups to be trained at St. Augustine’s. we there for requesting permission from the SANC to train nurses of all race groups. Your early reply will be appreciated. Dated 2 April 1981.

Letter, 31-03-1981. Training of Indian nurses. With reference to your letter, dated 21 October 1980, I advise you that the matter was submitted to the Administrator and executive committee, which has resolved the following: That the Administration has no objection to student nurses of all race groups being trained at the St. Augustine’s Hospital and that paragraph b of executive committee to resolution number 135, dated 8 January 1974, which reads as follows: “Be recinded that the executive committee will not permit the training of any non white nurse categories on white patients.” In order that resolution a above may be implemented, it is necessary for you to apply to the SANC for permission to implement this procedure. Further it must be mentioned that the following conditions previously approved by the executive committee will continue to apply and it is preferred that each race group should be nurses by members of the same race group, that in the event of qualified white nursing personnel not being obtainable, the executive committee will agree to permit the employment of state registered non white nurses, provided that the number of state registered non white nurses employed, does not exceed 50% of the nursing staff employed, and that the institution and its nursing personnel, under direct white supervision, for 24 hours of the day. Kindly keep me informed of any progress made in this regard. Signed by the Director of Hospital Services.

18-06-1981. your letter of 2 April 1981, the matter was discussed with the executive committee of the council and it is confirmed that there is no provision in connection
with this matter in the Nursing Act no 50 of 78. It is there for not for the council to approve or not to approve. As far as the council is concerned, it is a matter entirely for the school.

February 1982, there is another inspection.

10 March 1983. Regulations concerning the minimum requirements for the degree or diploma for registration as a nurse general psychiatric community and midwife. I refer to our directives, no. 227 M83, and 228M83, in the above connection. Please let us have the above directives in English, as we are an English speaking training school.


To finalize the conditions of the sponsoring of private students are excepted without comment. Goldman Hospital, Administrator. Natal College of Nursing. This is from the Natal Provincial Administration. Title ????. 22-07-86. Natal College of Nursing.

Enrolment of students by private hospitals to undertake the diploma in nursing, general psychiatric and community, and midwifery. I hereby wish to advise you that three private hospitals namely, Enteweni, St. Aidens and St. Augustine’s have enrolled students with the Natal College of Nursing to undertake the diploma in Nursing and Midwifery. For clinical experience, their students will be in the main, be allocated to their respective mother hospitals, which have previously been approved by your council. Each institution has confirmed that they agreed to the conditions of enrolment, and copies of the letters are attached for your information. It is hoped that these arrangements will meet with the SANC approval. Signed, E.A. Anderson.

Then the letter, director, letter, 14-08-1986. Natal College of Nursing. With reference to your letter, dated 22 July. Wish to advise that the contents there off have been noted. Point out that any correspondence in regard to such students must be submitted by the person in charge of the training of the Natal College of Nursing, as they will be students of the afore mentioned college.

St. Augustine’s Hospital on a Clinic Holdings letter head. Laste brief was in 1986. 5 November 1986. It was on St. Augustine’s letter head. Now it changes to the Clinic Holdings letter head. Application to commence the bridging course, St. Augustine’s Hospital. Here with the additional information pertaining to our application as requested by you. Page of information on the bridging course. 17 July 1989.

Application for permission to commence the bridging course. The philosophy, broad outline of the curriculum proposed, intakes, number of students per intake, for your approval. There is the hospital’s philosophy, college curriculum, and the whole outlay of the curriculum. Intake twice a year, April and August. Proposed number of students per intake 30 per academic year. Objectives for individual subjects available for inspection at training school. Person in charge, R.E. Goosen.

16 August 1989. To the council. St. Augustine’s Hospital. Application for commenced in clinical practica. Enclosed please find one example of the procedure radiation ???. rating scale for above, one example of ?????? check list, process of radiation for clinical areas????????? This is been in use for the four year course but we also use it for the bridging course. (Maak Seker, opname dof.)

Nursing school inspection. Application for approval as a nursing school for the bridging course, all races, female and male, approval of the proposed curriculum for
the course, letter dated 28 November 1989. Letter received from the matron, dated ???? respectively. The above mentioned been approved by the executive committee.

30 January 1990. St. Augustine’s Hospital. Application to commence the course for certificate for enrolment as a nursing assistant, to commence 1 August 1990. Curriculum enclosed, under regulation 1571 of July 21. There is the whole curriculum attached.

????/February, June, August. Maximum 10 pupil assistant nurses per intake. Then there’s the report and it is approved without condition. J.N. Slabbert.

1990-09-14. Application for approval as a nursing school for enrolled nursing assistant. The enclosed application for admission must be completed and return to council. I request you to submit a revised curriculum that is the teaching program according to the regulation 1571, the directive for the course, as well as the guideline. Application for the recognition as a training school for enrolled nursing assistants at St. Augustine’s Hospital. ???? PO Box 301015, Mayville, 4058. Four lecture rooms, one demonstration room, blackboard all classrooms and demonstration room, equipment and diagrams for demonstrations, two adult beds, two full size models, ????? run-about, linen dressings, gauze swaps, ????????? urine analysis, ??? portable oxygen, ext. Rosalind Goosen is the person in charge of the school. This was submitted 20 ???? 1990 and the application was approved retrospectively as from 1 June 1990. Letter send 4 July 1990.

Letter 3 July 1990. To the council. Dear Miss Minni, Here with our application for St. Augustine’s bridging course students to participate directly in the South African Nursing Council examinations, as per regulation 683, as supposed to be marking on behalf of the council???

Letter from St. Augustine’s. 17 July 1990. After discussion with Mr. Anderson of the Natal College of Nursing, it was decided that on June 18, 1990, the principle of St. Augustine’s College of Nursing will visit St. Mary’s Hospital to discuss with matron and staff the feasibility of preparing St. Augustine’s midwives at their training school. The reason for choosing St. Mary’s Hospital are the following: the prescribed midwifery training centre, Prof. L.A. Joost????, the facility to prepare a nurses???? In the Baccularia program???????? Chief Matron and sister Christa Mary are willing to allow ongoing evaluation of the students by St. Augustine’s teaching personnel during their training. Principle, accompany by tutors from St. Augustine’s Hospital, conducted the observation visit. The facilities at St. Mary’s were found adequate to meet the students needs. Should you require more information, please contact M.A. McDonald. 20 July 1990. To the Principle, St. Augustine’s Hospital, St. Mary’s Hospital. Natal College of Nursing is the approved training school for the diploma in general nursing and midwifery. The request for approval of this facility should there for come from their approved college.

Situational analysis it seems, or an inspection report. Four year diploma course. Inspection report. 16 August 1990. Diploma in intensive nursing, regulation 85, as amended, St. Augustine’s was maintaining its registration with SANC has not undertaken the training of students for the above diploma for a number of years. We wish to re-commence the intensive nursing course in October 1990, in keeping with the regulation 85 of 16-10-1970, as amended. This is to notify the council of St. Augustine’s intention of the above mentioned course.

Permission is requested from the council for us to conduct a theoretical component of the course over a period of 10 weeks in the first and second year and to allow us flexibility in this period of this time over the year. Thus allowing for any unplanned circumstances which may occur. Intakes 1990. In our original application to council to commence the bridging course, we stated that we would have two intakes per year, in April and August, following the SANC inspection earlier this year. St. Augustine’s Hospital staff appreciated the fact that we had many short comings regarding the realization of the scientific nursing care. An intensive and on going in service training program has been instituted to correct these disfisioncies????? Due to our concern to get our house in order, as well as our appreciation of the fact that the methodology and the documentation of scientific nursing care is a valuable teaching and learning tool, no intake of students took place in August. We trust that this meets the council’s approval. Agreement has been reached between Addington College and St. Augustine’s that our students joined those of Addington for the SANC examinations, both first and second year.

27 February 1991. Permission is requested from council to admit 18 students to our April 1991 intake, instead of 15, as originally stated in our application to commence the course.

There’s a list of abbreviation submitted. Then the council’s response. 3 June 1993. Council is not in favour of the use of abbreviations other than those which appear in authoritative dictionary, and cannot comment on the list which accompanied your letter. It is important to take in account that a patient’s records must be required as evidence in legal proceedings or disciplinary hearings. In such a case abbreviations may be open to misinterpretations, which could led to unfortunate consequences. 23 June 1994. Here with is confirmed that St. Augustine’s sub campus of the Natal College of Nursing and Hospital as an approved school, will be inspected on 2 September 1994.

24 August 1994. To the council. We wish to apologize for delay in forwarding our amended curriculum for the pupil auxiliary nurses and enrolled nurse course. Please find enclosed our proposed curriculum for the pupil auxiliary nurses for your information. The enrolled nurse curriculum will follow soon. Signed, R. Goosen.

FILE NUMBER THREE.


27 September 1994. Enclosed additional information needed for approval of the curricula.

October 1994. To St. Augustine’s Hospital. Course leading to enrolment as a nursing auxiliary, 2176 of 19 November 1993. Curriculum has been approved as from 20 October 1994. Your attention is drawn to the regulation requiring admission. A candidate shall be admitted to an examination only if you have completed the prescribed period of training for the course, not later than the end of the month in which the examination is conducted.

24 January 1995. From the council. Course leading to enrolment as a nurse. Government notice 2175. Curriculum has been approved as from 1 October 1994. First year examination final year examination. The registrar. The bridging course for enrolled nurses, general nursing. Approval by SANC is sought for St. Augustine’s Hospital to change from the block system currently in use, to a one day release system for students in training, if possible from April 1995. This would effect more standardisation of nursing education between ourselves and Clinic Holdings Group of Hospitals. The block system currently in use, summary of day release systems, and year planner for the bridging course. We trust that this will meet your approval. Signed, A.F. Watson, and R. Goosen.

Response, 10 February 1995. Bridging course. St. Augustine’s Hospital may change from the block system of presenting the theoretical aspects of the course to a one day release system, provided that the contents of the approved curriculum remains unchanged and the program objectives can still be met. Signed, J. Butler.

Fax from St. Augustine. 28 August 1995. The registrar. In terms of reference S1407S177, correspondence dated 89-11-28, approval was granted by council to admit bridging course students twice a year, April and August. Due to management decision, no August intake was admitted. Approval is however requested for December intake of 15 students. Signed R. Goosen.

Then there is a confirmation.

11 December 1995. Notification to the council of St. Augustine’s Hospital’s intention to institute training in 1996 according to Government notice 2176, of 19 November 1993, as well as Government notice 2175 of 19 November 1993. Approval was granted by council for 2176, enrolment as a nursing auxiliary on 20 October 1994. Written approval for 2175 was not received. On telephonic enquire, permission was granted to commence the course and written approval will be given in retrospect. Due to the change in management plans, training in 1995 on the new regulations did not take place. As we now wish to institute training, approval as above is sought with urgency. A.F. Watson.


20 December 1995. The re-commencement of the intensive nursing science course at St. Augustine’s Hospital. Intensive Nursing science training took place from 1990 to ’93. Last intake completing on 30 September 1993. Due to the needs of the institution we would like to re-commence the above training with the view of an intake of 10 to 15 students in April’96. Council approval the re-commencement of the above course is still? ?????

12 January 1996. Application for approval of the course in clinical nursing science, leading to registration as an additional qualification in intensive nursing science. The letter refers. A copy of the regulations relating to the course in clinical nursing science, leading to registration of an additional qualification 212. The relevant teaching guide is here with included. Please note that the previous regulations have been withdrawn \. Requirement for approval is submission of curriculum which should include situational analysis. It is also a possibility that the facility will have to be inspected. ???? notice also attached. 9???? Of 28 June 1963.

4 November 1996. Situational analysis is submitted. ???? has been conducted we enclose the results ????????????? ????????? for a period of October 1995 to September 1996. Copy of the fax. Polini of the educational division, Clinical Holdings. St. Augustine wish to commence the course in January if possible. ???? for tutor. 8 January 1997. Miss Heather Bradley Mockler, has been appointed
Principle tutor, St. Augustine’s Hospital. This appointment is effective from 1 January 1997, following the retirement of Miss Goosen.

Response to the nursing council, dated 16 May 1997. Discussion document unified nursing education for assistant for South Africa and the response there. South African St. Augustine’s Hospital institution????? After second year exit point no. Advantage time to gain confidence, can practice without responsibility, may contribute to maintenance of high standards, students must administer quality care to gain qualification. Disadvantage: may be lost to nursing duty extended period. People want immediate responsibility, queries concerning nature of internship,????? Who allocates areas ??? what criteria are use to confirm qualification. After fourth year exit point, yes. Advantage: able to integrate and consolidate training program. Disadvantage: training long. Loose nurses as for two above. People do not gain experience ????? qualification any way, while wait??? People do gain experience post qualification any way why wait????? Hierdie goed is baie dof. Kan skaars hoor.

VYFDE OPNAME.
7 Mei 1997.
26 June 1997. Letter to the school in addition the additional information requested has not been received to dated. Copy of this correspondence is attached for your reference. Kindly inform the council if you wish to continue with the processing of the curriculum for approval. Should no response be received by 21 July 1997, the curriculum will be returned to you.

18 June 1997. We have several enrolled nursing auxiliaries, who have qualified prior to the five year cut off time. Please could you inform us how we enter these nurses for the examination, enabling them to commence the second year of the enrolled course program, and is this examination the first year enrolled examination 2175? 26 June 1997. Enclosed, please find bridging course curriculum as requested. Please note that the contents have been re-structured in order to respond with the format of our curriculum for 2175 and 2176. It is an amended curriculum. We trust this meets with your approval. Signed, Mockler.

Letter from the council. 17 July 1997. Your letter dated 18 June 1997, refers. In order to follow the shortened course to obtain enrolment as a nurse, they will first have to pass the admission examination. Application for admission for such an examination must be submitted via nursing school, which is approved to offer either the course leading to enrolment as a nurse, or the course leading to enrolment as a nursing auxiliary. Once they have passed the admission examination, they may be exempted from the period of one academic year. This matter, however, must be taken up with the person in charge of the training school where they wish to do their training.
Signed, T. Rossouw.

7 July 1997. Application for approval for the course in clinical nursing science, leading to registration as an additional qualification in intensive nursing science. Your letter dated 26 June 1997, refers. We are currently compiling the curriculum with the systems of the University of Natal, and as soon as this is to hand, we will forward it to you. Signed, Mockler.

Inspection report. 10 September 1997. Application for approval for the course in clinical nursing science, leading to registration as an additional qualification in intensive nursing science. Further to our letter dated 7 July 1997, and now enclosed are our curriculum for critical care nursing, genera., which has been overseen by Mrs. A. van der Merwe, Department of Nursing, Natal University, for your approval.
15 September 1997. Application for approval of revised curriculum for a bridging course to enrolled nurses, leading to registration as a general nurse. The application was discussed and approved at the council meeting, 22 August 1997.

Letter, curriculum. Application for approval. Curriculum for the course in clinical nursing science, critical care nursing. The program in association agreement with St. Augustine’s Hospital, was approved, 22 January 1998. Signed, Miss Faure? Fourie?

Situational analysis submitted to Miss Faure, further to our critical care course curriculum application. We wish to apply for extended clinical facilities at our Netcare Hospitals. In Natal, and that is the Parklands, Umshlanga and Kingsway Hospitals. We visit in choosing these hospitals for maximum of three months of the course in order to facilitate exposure to theory and technical situations, as well as promote of students through different facilities and management regimes. Letters of permission from the hospitals, situational analysis of cases admitted, and perspectives of each hospital enclosed.

February 1998. Extension of facilities. Dear Sir, I can find no record of our files of whether or not the SANC has approved the Parklands Hospital or Kingsway Hospital as extensions of St. Augustine’s Hospitals and College of nursing for clinical practise. I believe Mrs. Polini at Clinic Holdings Education Department in Gauteng requested information in this regard in order to present it to the SANC in 1996. I enclose the situational analysis, as well as clinical procedures for both hospitals, and would like to request the SANC’s permission to utilise these venues for 2176, 2175 and the bridging course for enrolled to registered nurse status. Signed, Mrs. Mockler.

23 March 1998. Application for extended clinical facilities, Parklands Hospital. Your correspondence, dated 110 February 1998, refers. May I please inform you that there is no future meetings for the council or executive, after the election of the new council members. As soon as these meetings have been scheduled, your application will be submitted. Signed, ?????

16 April 1998. Clinic Holdings. St. Augustine’s, with regard to the bridging from auxiliary nurse to enrolled nurse with regard to number of clinical hours. Response 19 April 1998. Then it explains the question of 2000 hours clinical training over the two years, which is then divided into 1000 hours per year. Second year 1000 hours and the requirements for entry into the examination.

19 June 1998. Letter to the council. Please be so kind as to change the name of St. Augustine’s college of nursing, to Netcare Training Academy, KwaZulu Natal, with immediate effect. Signed Mrs. Mockler.

This is acknowledged. 30 June 1998. New postal address is notified.

Summary of accreditation visit, 18 October 2001. Accreditation report, St. Augustine’s Hospital, 18 October 2001. St Augustine is one of the largest private hospitals in KwaZulu Natal, member of the Netcare Group, Sout Africa’s largest private hospital and doctors network. Bed capacity 418, bed occupancy 87.8%, registered nurses 236, enrolled nurses 135, enrolled nursing auxiliaries 152, care givers 5, doctors 100, pharmacists 9, assistant pharmacists 17, clinical facility for University of Natal, bridging course two?? B Cur. First and second year four. University of Zululand, bridging course two. Bed care training academy, enrolment as a nursing auxiliary one year, enrolment as a nurse two years, bridging course two years, diploma in intensive nursing care one year, diploma in trauma and emergency nursing one year, certificate in anaesthetic and recovery room nursing science 6 months, certificate in infection control 6 months. Achievements: cleanliness of the hospital, principles of infection; control, health and safety observed, colourful stimulating therapeutic environment
displayed in paediatric ward, evidence of staff development available, professional nurses allocated according to the expertise and specialities, offers a full range of medical facilities, including ??? hour poison information centre, biggest level trauma facility, kidney, heart and lung transplant centre, introduktional blood conservation program, to minimize risks associated with blood transfusion, offers SAA travel clinic, community outreach program, diabetic week, osteoporosis week, nutrition week. During accreditation visit, there was evidence to that effect. Ambulance 911 Netcare, evidence of structured clinical guidance and accompaniment, evidence of clinical learning , objective structure according to specific units,. Concerns: Perseption of the council delegation was very unprofessional, poor record keeping observe, poor documentation of protocol, policies and procedure manuals, scientific approach not well applied and implemented. Recommendations: to continue as clinical facility for mentioned nursing institution, principles of good record keeping to be observed at all times, scientific approach to be consistently applied and implemented. Professional advisors were: S.J. Nkoklotzi and M.D. Ledwaba.

Letter dated 4 February 2002. Comments on examination paper, final examination for enrolment as a nurse, general nursing care, January 2002. While the new format is user friendly, would it be possible to audit??? Order??? sub questions of the main question on the same box, followed by the Afrikaans questions, e.g. question 2 has two sub questions, followed by the Afrikaans questions and the second question of question 2 followed by the Afrikaans question, referred to question 5. the alternative is to state each question in English, followed on with the Afrikaans question as in question 7. Hope this is of assistance. Signed ?????.

Examination paper, receipt of your letter dated is acknowledged. Thank you for making such constructive comments. This was the first council made with the new format. It is obvious that there would be ????. Problems should be addressed by James ??? 5 March 2002.

Letter to council 25 March 2002. Application for permission to use Nu-Shifa Hospital as a clinical facility. Here with application is main obtain to utilise Nu-Shifa Hospital as a clinical facility for training of basic nursing courses. Netcare Training Academy KZN has been approached by the management of Nu-Shifa Hospital to train hospital and patient needs. They have informed us they wish to send 5 candidates for the enrolled nurse auxiliary course, 2 - 3 candidates for enrolled nurse, and 2 - 3 candidates for the bridging course for enrolled nurses leading to registration as a general nurse. Signed Mrs. Vijera?????

Application from the council. 25 April 2002. Application for approval to utilise Nu-Shifa Hospital bridging course. Your letter acknowledged.

13 September 2002. Then there is a request for additional information. The names and qualifications of personnel responsible for accompaniment of the students. Other nursing education institutions that are used in Nu-Shifa Hospital as a clinical facility, program, number of student pupils they are placing at a time, situational analysis, where lead pencils are not used. Signed, Maghotsi.

17 September 2002 still on Nu-Shifa. St. Aidens, University of Natal and Zululand, or training of Nu-Shifa staff, Protea Nursing school, Michaelmus Nursing school, for placement of private students. The clinical facilitator appointed at Nu-Shifa, to do clinical accompaniment of students, sister Fuare/Fourie, she is a registered nurse, registered midwife, psychiatry nursing education, nursing administration. The number and categories of students Nu-Shifa wish to send to Netcare: enrolled nurse - 4, enrolled nurse auxiliary – 4, bridging course – 4.

30 September 2002. Letter to the council. Extension of training of bridging course for
two students, because they have not achieved the desired results. Extension of training pupil enrolled nursing auxiliaries. November 2002. Because they have not achieved the desired results, did not meet the minimum practica requirements, 28 March 2003. Letter from the council to Mrs. Vijera. Failure to notify the council of extension of training for the following candidates. This will candidates write their March exams. This will in future not be allowed. Completed exam forms and examination fees immediately sent. Completion of training records. Lots of correspondence in regard to students. 12 August 2005. HOVH counseling course accreditation. Kindly provide me with guidelines regarding the above. Your assistance is greatly appreciated. N. Naranji. 16 September 2005. Letter to the council. Application for accreditation for clinical facilities for the infection control short course, KwaZulu Natal. 80 Learners. Your letter dated 7 September 2005, delivered to the council on 13 September, is acknowledged. Accompanying lever-arched files with documents also noted. It is noted that the application is for clinical facilities meant to be utilised for learners who has commenced the course. The urgency of this matter was acknowledged. It is regrettable that the accreditation and education committees were on 13 and 14 September, respectively, and the agendas of these committees close several weeks prior to the meetings. The document also need to be evaluated before being presented. The matter was never the less presented by both committees. The committees note submission and resolved that these being processed in due cause that the index for the items A to X was not attached. Please fax it to the council as this will assist with the analysis. Signed, 21 June. Late submission of registration forms for enrolment for pupil nursing auxiliaries. Application for registration and payment of the 57 candidates were received on 23 May 2005. Although the candidates commence training on 17 January 2005, it is noted with concern that the submission is late according to the provision of regulation 2735. Date of the students certificate will read as 23 March 2005. Kindly re-submit new applications. Include the following attachments: copies of identity documents, certified copies of standard 8 certificates, before 5 July. Response, 29 June 2005. Late submission of registration forms for enrolment of pupil nursing auxiliaries. Thank you for your letter, dated 21 June 2005. As with my original letter, it was with great concern that our original cheque and requirements appear to have been mislaid in the mail. This was discovered when I did a follow up as to ascertain as to whether the students have been registered. It was advised that we re-submit a cheque, as well as registration forms, which I have done. The letter states that students can only be registered off 23 March. This would impact on the exam in November. I am submitting proof of the original cheque and dispatched date and have also spoken to Mrs. Van Rooyen to ask her if she perhaps has any records of the arrival of the cheque, number 1399, in amount of R2599.20. I earnestly urge you to re-consider your decision. We acknowledge that responsibility lies with us. We do accept that there are regulations in place, but this is the first offence and is negatively impact on our students. I would implore you please to re-consider. H. Bruwer. 5 September 2005. Response to the previous letter. We can only write in March 2006, so it can not be proved. 30 September 2005. Again on the late registration. The matter was discussed with the registrar, senior manager education and training, manager and Mrs. James, professional officer. Express concern about such an omission re-iteration that registration of students is the responsibility of the principle. You are requested to
urgently submit proof that the learners referred to, commence training on 17 January 2005. Record indicating that teaching and learning have occurred. Record of clinical allocation and placement, declaration from person in charge of the clinical facility that the students underwent clinical learning in the particular facilities, record of any assessments done for each learner. This must be in on 17 October 2005.

Response 13 October 2005. Thank you for your letter dated 30 September. Your comments have been noted. I am very grateful your committee has considered our request. Here with the requirements as per your letter. Y. Silva.

22 November 2005. The late registration of the 42 learners, that they will be entered for the 25 November 2005 examination. Council was satisfied that they have met all the requirements.

13 February 2006. Accreditation of KZN Hospitals for infection control course. Thank you for your letter we received in September 2005. We acknowledge receipt of your application. In your letter you stated that the decision was to be taken further to the education committee in November 2005. I have a phone discussion. Mrs. Bea December???. She was unable to give me the outcome of the committee decision. To date we have not heard anything further. KZN department of health are very anxious to commence students on our course in March 2006. To address the situation, they are currently phased in with KZN. I would greatly appreciate any feedback, as to in turn give feedback to KZN department of health. Thank you for your time and consideration here with. De Silva.

27 March 2006. Re-submission of application for approval of infection control short course for the listing. Receipt of the correspondence 13 February, and second submission of documents dated 8 March is acknowledge. Council is currently discussing the position of the short course, within the current legislation, the new accreditation policy. There for the officer of the council presently is not processing the application for short courses. You will be informed of the outcome. Signed, ???????.

Netcare Training Academy in KwaZulu Natal. 29 May 2006. Will now be operating from the following physical address: Netcare training Academy, 95 Umshlanga Rocks Drive, Durban North. The new postal address.

6 July 2006. Mrs. Y. Stembridge, Netcare Training Academy KwaZulu Natal. Guidelines on the re-location of physical structure of the school. Your letter dated 29June 2006. In our telephonic conversation 4 July, refers. For the office of the council to process and prepare the submission to the accreditation committee of the council the following comparative study of the old and new school to be provided, reflecting the information stated below. The physical address, the postal address, the distance between the old and new school, the total number of human resources, the tutorial and supportive staff, currently approved programs and intakes, including the number of learners per program currently registered at the school. The number and size of the classrooms and the hall, the number and size of the library and simulation laboratory, offices for tutorial and supportive personnel, kitchen, canteen and toilets for both learners and any other personnel, any other facilities e.g. boardroom, restroom. Organogram with roles lines of function and credentials of personnel. Approved facilities per program. Kindly provide a motivation with the submission, as with the reason why you moved to the new premises without the SANC approval. It is advisable that phase two that is incomplete should not be included as part of the completed phase one. Rather a separate template be attached that reflex the total structure of the new school in totality. Your immediate response will be appreciated, so that the preparation is ready for October 2006 accreditation committee of the council. Signed, Mrs. ?????
Letter 29 June 2006. South African Nursing council accreditation. As per our previous correspondence, could you please assist us with the document outlining the correct process for re-accreditation of our new training premisis, 95 Umshlanga Rock Drive, Durban North. Mrs. Y. Stembridge.

Letter 1 June. Please advice us of the detailed process that we need to follow the re-locating to a new premises.

Letter 1 June 2006. Urgent application for re-location of KZN campus. Sincerely apologize for the over sight, as we have not submitted special application to move premises as per the SANC requirements. I was advise to notify SANC in writing of our intention to move and our new address, which we have done. Mrs. ???

Thank you for advising us that there is a process of application in place. It is greatly appreciated. Would it be possible for special consideration to be given for temporary authorization for re-location of KZN campus until SANC is officially able to come and inspect our new premises. Our current building has posed a safety effect to our students, firstly as a fire hazard, as the current electrical wire is operated on a single phase and we have been advised that we should be operating on a three phase. However, as it is an old building structure, we are unable to install the three phase at this present moment, and we had a fire breakout in our electrical box a few weeks ago.

The second matter of concern is the security of our students. We have had a number of intruders breaking in into the campus, and on a recent occasion stormed into a classroom while students were occupying the room. The intruder managed to bypass the security system we have currently in place. Unfortunately the area that the current sub-campus is situated in, has been classified as a high security zone risk. Current lease of the premises which we occupied at present, has lapsed, and we are reluctant to renew the lease, given the conditions of the current building. Our new premises is newly built and has all the electrical and fire compliance requirements. We have also ensured that we have astringent ??? security measure in place for the protection of the students. The new premises is also an upgrade with regard to environment facilities for our students is more conducive to learning.

Then there is an explanation of lecture room, etc.

Notification from the council. 4 December 2005. Audit of approved providers of nursing education and training for compliance with accreditation requirements. The letter that was send to all the schools.

23 August 2006. Thank you for your letter dated 8 August 2006 in which you referred to application for approval of a curricula for short course in the infection control program. We would like to bring the following to your attention: the application submitted on 16 September 2006, was not for approval of the curricula for short courses. The approved application was for the clinical facilities in which students on our infection control program, which is already an approved program with SANC, can do their practica. The urgency was the outbreak of ??????? within KwaZulu Natal, and the department of health requested one staff member of every ??? provincial hospital be trained in infection control. Application was to have the provincial hospitals accredited for the infection control practica, so that their staff could do the majority of hours within their own hospitals. Regarding point three in your letter, I would ask clarification states that institutions will provide short courses on condition that the short course fall within scope of practise of the practitioner. This addresses the theoretical aspect of the training with regard to the clinical aspect. Will the students be allowed to do their practicals within their own hospital, in which they are currently employed, or only clinical institutions kindly accredited with the training provider. Thank you for taking the time to address my queries???
Y. Stembridge.
Re-location of Netcare Training Academy. 9 September 2006. Thank you for your phone call in response to the correspondence we forwarded to you, regarding our re-location to the new premises on 3 June 2006. As per our discussion you very kindly advised us that we are not nearly to send that certification/application through to you, however we are also require to make a special application three months prior to intending to move. I apologize as I was unaware of this requirement and we have already re-located our premises from 364 Clark Road, Berea, Durban, to 95 Umshlanga Rocks Drive, Durban North. In review of this, we have requested a detailed report on our infrastructure, current and a future. Please find the details as per your request.

Re-location summary. Submitted to the accreditation committee. The new nursing school organogram reflects progressive growth of the institution since 1999 to date. There is clear evidence of sufficient resources, physical human resources improvement, environment that promotes learning recommendation. Physical head of the school be informed strongly to comply with the requirements for re-location of the school. Physical facility to be visited. The head of school to be advised to consider the tutor/learner ratio with regards to the basic qualifications and post basic qualifications. Currently the basic qualifications tutor/learner ratio is 1 to 46. Clarity on number of lectures for the post basic qualifications in short courses. The unavailability of course co-ordinator, human resources officer, versus the number of programs offered by the school. Signed, 6 October 2006. Letter to Miss we have moved to phase one of our new premises as of 2 June 2006. Intent to move to phase two in March 2007. Details of the student statistics of 2004/5 and 6 to date. Potential numbers of our new facilities can accommodate for training and details proof to conduct.

15 November 2006. Your letter dated 23 August is here with acknowledged. Your letter dated 8 August relates that the council resolves to phase out the short courses, there for it will no more be acceptable to support any applications related or linked to provisioning of any short courses. The phase includes application for clinical facilities and listing of new application. Council has no plan to prescribe to employees of health workers how they should plan and execute the skills plan. There are various approaches which can be applied by top management to ensure that there is a continuous culture of learning in the workplace. Signed, Miss.

2225 November 2006. Application for approval of new premises. Programs: enrolment as a nursing auxiliary, enrolled nurse bridging course, post basic courses in medical surgical nursing, operating theatre, anaesthetics and recovery room, trauma and emergency nursing, short courses orthopaedic nursing, anaesthetic nursing, infection control, anaesthetic and recovery room nursing, paediatric, congenital cardiac disorder, must presented to the committee of the council, 24 October 2006. Site visit be conducted just after March 2007, when phase two of the construction process has been completed. Using school not to exceed number of learners taken during 2006 academic year, until the accredited visit report has been by the council. Number of learners taken in 2006 will provided from your office and are as follows: course leading to enrolment as a nurse – 120, first and second year. Bridging course for enrolled nurses leading to registration as a general nurse – 125, first and second year. Post basic medical and surgical programs – 26. Netcare Training Academy should note that the executive financial and staff committees of the council held on 21/22 February resolved to phase out approval of listing of short courses, there for no applications for curriculum for clinical facilities listing of short courses will
be processed. ????? are to consider the tutor/learner ratio of 1 to 46. Accepted ratio is 1 to 50. Clinical accompaniment of three times a week and the 1 to 20 of the theoretical contact. You are requested to communicate the exact date of completion of the outstanding phase two building, so that the accreditation visit date can be planned, for early 2007, before the end of December 2006. Signed,?????

7 November 2006. Guidelines for accreditation of clinical facilities. Receipt of your fax 29 September is here with acknowledged. Criteria for the approval, and then is given. Letter, 2 November 2005. Newlands institute students. We have been ??????? with the Newlands community worker, Mrs. Freda Bunting. We have requested on numerous occasions that the names of the students and contact details be forwarded to us. We received them three weeks ago. It has been brought to my attention that Mrs. Bunting charges each student R500 for the ????? classes. She hired the venue for two months and employed tutors. Mrs. Bunting also communicated to the students that Netcare will definitely enrol them for SANC exams for November. The expectation has been created, and we now have students, expecting to write in November. Attached, please find a list of students that we have receive to date. The files we have received from Mrs. Zondi????? Do not have records of any clinical or theoretical hours. Netcare Training Academy is very happy to assist the nursing students, how ever I would like to know if you would be happy to, for us to register them as students. I can arrange a pre final theoretical examination and ???? for them if they are successful , enrol them for the March SANC examinations. Please could you advise us in how would you like us to proceed, giving to where we have not any records of these students.??????? Y. Syla.

Response 25 November 2005. Newlands Institute Training. In 2004 the council assessed the students, which the former Newlands Institute claimed were ready for examinations, subsequinted that assessment exercise. The council resolve that only those who met the minimum requirements for the course and successful passed the council practical assessment, be registered for the council examinations. This there for meant that the former Newlands Institute who failed the council assessment, would need to undergo proper education and training in a nursing education institution approved by the council. According to our records there is no approved school ??? the principleship or directorship of Mrs. Freda Bunting. The education and training undergone in Mrs. Freda Bunting’s school, is there for illegal and cannot be recognized by the council. Your assistant towards completion of training of these students is pre-shaded ??? expected of any nursing education that takes over the training of these students is to obtain records of training from former Newlands Institute for the students, conduct a thorough assessment of the competency of these students , theoretical and practical, in order to recognize what they have done, and are competent in, determine at what level of the program should they commence additional. Education and training registered the students who are admitted ??? LPL?? If they do have some of the competancies . Ignore any training done in Mrs. Bunting’s illegal school. Ensure that they are registered as students first and that they meet the minimum requirements for the program before consider them for registration for council examination.signed, Dr. Ramali.

2 August 2006. Application for registration of ex-Newlands institute of nursing. Receipt of your correspondence dated 20 July 2006 is here with acknowledged. Office of the council notice and appreciate the assistance offered by Netcare for these learners. Kindly note the learners have never registered with the council,. Clinical hours that the learners covered cannot be recognized because they were not learners. Total number of learners – 202, according to the list. Cannot be accommodated all at
once by Netcare because your clinical placement will not be adequate. The academy is advised to group these learners into small groups, and register them with the council. For each group submit evidence of where each learner was placed by Newlands for clinical experience. Application forms for registration accompanied by the relevant documents and fees. Council that will divide how to handle the recognition of the learning with Newlands Institute. Netcare is reminded that not only clinical hours that count but also the required 44 academic ??? of continues learning and performance in theory. Based on the above argument the learners cannot write in November 2006. Signed, Mrs. James.

21 July 2006. Registration for learners of previous Newlands Institute. Receipt of your letter, dated 25 April 2006 acknowledged. It is difficult to advice about this group because there are no names. Kindly submit the names and ID Numbers. This is to establish the status of these learners. Whether they have registered with the council or not. Signed Mrs. James.

Letter 15 January 2007. It is still continuing on the Newlands Institute. In April 2005 Netcare Training Academy responded to the reply of the learners of the former Newlands Institute school of nursing. These students are never registered with council as learners. They underwent and met the stipulated practical and theoretical requirements and this was verified by the clinical and theoretical records given to us by dr. Ramadi, which was confiscated from the school. We then appointed contractual staff to assist us to correlate and facilitate in the project. We had received the records given to us by dr. Ramadi, which verified that these learners have underwent the stipulated practical and theoretical requirements, and we alledged to be enrolled for the final examination of the enrolled nursing assistant program 2176. We then submitted these records to council. was then informed that we could not registered the students all at once as our clinical facilities would not accommodate them. These learners did not need to be placed in a clinical setting as they have already met this requirement. To ensure that these learners were competent and were enrolled into the final examination the Netcare Training Academy would conduct the final theoretical examination and the practical examination. The learners first needed to be registered with the council in order for us to conduct these assessments. Netcare Academy was given the permission by council to assist these disadvantage learners, and that these learners numbers would not impact on our current accredited numbers. I would like to request on behalf of these learners who have been contacting us frequently, that council allowed all these learners to be registered to write the final examinations. Thank you for your consideration.????????
Sing.
Thank you.
APPENDIX M

THE SOUTH AFRICAN NURSING COUNCIL

PARTICULARS IN REGARD TO TRAINING SCHOOLS FOR PUPIL NURSES

1. Name of Institution: Convent Sanatorium
2. Where situated: 167, Claremont Rd, Muizenberg, Cape Town
3. When established: 1910
4. How is the Institution supported financially? No support from any source - income from fees for nursing students
5. If under Board of Management, state name of medical practitioner on such Board: No
6. No. of beds: (a) European 94 (b) Non-European total 95
7. Average daily number of occupied beds nursed by the female staff for the past year: (a) European 88% (b) Non-European 82%
8. No. of Medical Cases treated during the past year: 770
9. No. of operations performed at the hospital during the past year: (a) Major 260 (b) Minor 262 (c) Total 2222
10. Percentage of (a) Paying (b) part-paying (c) free cases during the past year. Total = 100.
11. Do patients include males, females and children? Yes
12. Has the Institution an out-patient department? A small one
13. Has the Institution a department for the nursing of children? Yes
14. What facilities are available for training in infectious diseases? Application could be made with the superintendent of the Infectious Hospital, Muizenberg, Cape Town.
15. How many pupil nurses do you propose to train at a time? To commence with 10-12 later 10
16. Is a resident medical officer employed? If so, state his name: *No-Doctor, visit of about 60 doctors

17. Names of Matron, Sisters and Staff Nurses: (If space is insufficient attach a schedule of names in alphabetical order)
   Matron: Mrs. Mary Jones
   Assistant Matron: Mrs. A. Durbant
   Nurse: Miss K. McHale
   Nurse: Miss K. Null
   Nurse: Miss M. van Brink
   Nurse: Miss A. van Zyl
   Nurse: Miss E. van der Merwe
   Nurse: Miss B. van der Merwe
   Nurse: Miss J. van der Merwe
   Nurse: Miss E. McHale
   Nurse: Miss J. van der Merwe
   Nurse: Miss E. McHale
   Nurse: Miss E. McHale
   Nurse: Miss E. McHale
   Nurse: Miss E. McHale
   Nurse: Miss E. McHale
   Nurse: Miss E. McHale

10/12/2023
Names of Medical Practitioners who give lectures on wards:
Dr. H. de la Mare
Dr. M. A. McLeod
Dr. R. B. Biedenharn
Dr. R. H. Biedenharn
Dr. H. H. Biedenharn

17. Have you a Sister Tutor or a registered nurse qualified to teach probationers? Yes

18. Have you an adequate class-room for lectures, demonstrations and study? Yes

19. Have you the following equipment in the lecture room?
   - Attendance Register
   - Blackboard
   - Skeleton
   - Anatomical Diagrams
   - Models of all parts of the body
   - Reference books for use of pupil nurses

20. Have you the following equipment for the demonstrations in the lecture room?
   - Bed
   - Complete set of bed linen
   - Bandages, dressings, lotions
   - Medicines and Drugs with measure glasses
   - Syringes of all types
   - Preparation trays (for operation or examination)
   - First-aid appliances
   - Set of dressing instruments
   - Set of utensils
   - Urinalysis Set

Give Names in Full:

[Names of Medical Practitioners]

Dated at (location) this 17th day of December, 1962

(Signature) [Signature]

[Handwritten note: 'L. E.']
Transcription of unstructured interview with Medi Clinic (Cape Town Learning Centre)

Theuns Wepener and Anne van Zyl

Date: 20 July 2010 @ 09h00

Theuns: Ek is Theuns Wepener en Ann van Zyl, Ann van Zyl is die bestuurder van Verpleegopleiding en ek is n opelidings bestuurder hier by Medi Clinic. Medi Clinic het aanvanklik begin met hulle opleiding in 1997,

Fasiliteerder: ... ekskuus, as jy Engels wil praat is jy welkom...

Theuns: Nee, nee o nee.

Fasiliteerder: Ok goed dan...

Theuns: ... in 1997. Hulle het natuurlik hierdie uh, uh, behoefte gesien vir opleiding en dat die moontlikeheid daar is en dat ook die kliniese fasilitete voldone aan die, jy weet, opleiding situasies en ons het begin met... jy weet, Sandton kliniek, Sandton Medi Clinic het aanvanklik begin metverpleegopleiding die heel eerste assistant verpleeg opleiding. En toe’t ons nou hier in die Kaap begin met verpleeg opleiding. Daar was natuurlik niks nie, daar was nie n skool of niks nie, so ons moes alles van die grond af bou. Uh soos ek vir jou gese het, ek is gegee n stukkende ou hout liniaal en n pen en papier en n tafel en stoel en gese, skryf die kurrikulum, en die goed moet geodgkeur word, etcetera. Hulle het toe n huis gekoop, die maatskappy, wat hulle toe n bietjie opgradeer het vir n klaskamer en jy weet, daai klas van goeters, en uh ons het met ons eerste groep student, dit was 14 studente, het ons begin in 1997, November, en uhm, hulle het, hulle het bestaan almal uit reeds Medi Clinic personeel wat of portiere was of uh, uh uh skoonmakers soos ek gese het en nou natuurlik jou SSD mense wat nou nie verpleeg het nie.

Ons eerste klassie het begin November ’97 en uhm, so het ons toe nou aangegaan en ons het toe besluit ons gaan nie net een inname he nie want ons sien toe daar is meer n behoefte en ons kry toe la hoe meer aansoeke. En toe’t ons twee innames begin inneem...ons het toe n April inname gehad en ons het n Augustus inname gehad en uhm as ek reg nou onthou van die groupie wat November begin het, in 97 het daai groep het almal met lof geslaag...

Fasiliteerder: Uhm.. dis fantasties...

Ann: hulle het...

Theuns, Ja hulle het.

Fasiliteerder: Dis baie lekker ne om op so n hoe not te begin.

Theuns. Ja. Ons het toe nou die uhm, die Raad het toe nou ons kurrikulum goed gekeur aan die einde van die dag, ons het n inspeksie gehad, ook toe nou en hulle het die Louis Leipoldt
Hospitaal as n kliniese fasiltiteit het hulle toe nou goed gekeur. So uit al die ander hospitale waar ons toe nou ons student getrek het, die portiere en daai klas van mense, moes almal hulle prakties by dei Louis Leipoldt kom doen. En toe’t ons nou later aanseok gedoen dat al ons ander hospitale, en hier is 12 hospitale, hulle was 11 hospitale op daardie stadium, uh het ons toe laat goedkeur as kliniese fasiliteite vir die verpleeghulp kursus. Toe’t ons later besluit maar ons gaan nou verder beweeg en ons gaan toe nou, ons ook nou die um, die die die ingeskrewe verpleegkundige kursus wil ons ook aanbied. Dan vat ons hierdie outjie, want jou eerste jaar van n assistant verpleegster is dieselfde as die eerste jaar van die Ingresewe verpleegster. Toe’t ons nou kurrikulum geskryf en ons het roe nou dit goedgekeur gekry en daarmee begin. Intussen het ons...ons het begin met dit in 1999...en umh... terselfdertyd het ons in 1999 begin met die oorbruggingskursus deur Technikon SA. Al die Mediclinic hospitale was nou goedgekeur as kliniese fasiliteite en TSA is dan nou natuurlik die skool. Hulle het dan nou oorbeweeg na UNISA toe, en so’t ons aangegaan van daai tyd tot nou ...uh... ons laaste inname was nou Januarie gewees omdat hulle dit nou nie meer gaan aanbied nie.

Fasiliteerder: Ja dis reg. O, so julle het nooit vir Mediclinic self die oorbruggingskursus aangebied nie?

Theuns: Nee, nee...behalwe ons doen nou, ons het twee skole... Intussen het ons toe nog skole oopgemaak. Ons het toe mos nog die Santon Skool en ons toe nou die umh Kaapse Leersentrum, hierdie ene...

Theuns: eksuus was Sandton die eerste een?

Fasiliteerder: en in watter jaar het hy begin?

Theuns: hy't in dieselfde jaar begin

Fasiliteerder: dieslefde jaar...o ok.

T: hy’t April begin met sy eerste inname en die Kaap in November.

F: o...ok.

T: en toe...dan het ons nou n skool oopgemaak in PTA, die Curamed leersentrum en dan het ons in Bleo ook n leersntrumen ons het n leersentrum in Limpopo, en...

Ann: Nelspruit

T: ...Nelspruit. En nelspruit en Curamed, daai twee leersentrum, is goed gekuer vir die oBK maar die anderis nie goedgeleer nie. Hoekom daai twee leersentrum goedgekeur was, omdat hulle... die maatskappy het ... hulel het aan n nader maatskappy gebehoort en hulle het dit oorgekoop en hulle was klaar goedgekeur vir die OBK. En dis hoekom hulle goedgekey=ur si vir die OBK. Dis net die tweeskole van Mediclinic.

F: o ok, goed.

T: so toe’t ons nou ekstra skole oopgemaak en natuurlik het ons nou alhoe meer en meer
student, ons kry, as ons kyk na ons aansoek, in die omgewing van 3 tot 4000 aansoeke, wat ons kry per jaar en uh, dit is nou landwyd wat ons kry vir die ses skole... en ons proses van keuring is natuurlik, hulle moet matriek he, hulle moet, uh... wiskunde he,

A: of wiskunde geltterhied

T: of wiskunde geltterhied, en hulle moet natuurlik of biologie of skeinat he, een van die twee. Uhm

A en dan n gemideld van 950

T n aggregate of 950

A met die ou sertifikaat, die nuwe een se mos jy het toelating vir daardie tipe kursus

F ja met die endossement

T: Ja, ja. Ja. En wat ons doen met al ons aansoeke, as hulle voldoen aan al ons vereistes, gaan hulle, doen hulle psigometriese toetsing op al daardie candidate en van daardie toetsing se uitslae gaan ons dan en ons kyk ... hulle laat weet vir ons wie is nie geskik nie en wir si geskik en daaruit doen ons dan nou die onderhoude.

F: kom hierdie aansoeke na n sentrale punt toe en word dit daar gekeur en uitgeplaas nadie ander skole toe?

T: ja dit gaan na ons hoofkantoor toe

A: Hulle groep die CVs en reeli die psigometriese toetses by verskillende sentrums en die uitslae gaan terug hoofkaantoor toe. Hulle laat weet dand ie verskillende skole en die skole nooi dan die candidate vir die onderhoude.

F; en en, wel as julle so baie aansoek kry dant julle seker nie n probleem om genoeg te kry om julle kwota

T: jy sal jou verbaas, jy sl jou verbaas! Wat ons student natuurlik, wat nou veskil van die ander instansies, kyk ons hospitale is goedgekeur, vir student, n sekere aantal... Panorama kan 20 studente neem, bv, ne? So al daai hospitale is goedgekeur vir n skere aantal studente, jy kan nie daardie getalle oorskry nie... so jy prober nou die room keur, ne aan die einde van die dag. So, uhm...wat wou ek nou vir jou gese het...uhm...

A; van die aansoeke...die hoeveelheid...

T: ja.

A: ons het gewoonlik genoeg aansoek om al die poste te vul. Want ons kan ook net keur na aanleiding van die hoeveelheid psote wat hoofkantoor geod gekeur het om student int e neem.

F; Ok...goed..ok

A: volgens hulel begroting.
F: Julle totale, of miskien per skool of per inname, of instansie... hoeveel is julle akkrediatsie per inname... volgens die Raad se...

A; Ek sal moet gaan optel...ek is nie doodseker nie...

F; Ok, as ek miskien, jy weet as ek miskien daardie inligting kan kry...so per instansies, want dit gee vir n mens n beeld van wat is julle, kom ons noem dit maar kwota, n dank an mens kyk na wat is die inname of dit die hoeveelheid...of julle ide hoeveelheid neem waarvoor julle geakkrediteer is en dan ook weer met jou throughput, jy wee twat is julle persentasie van die mesne wat dan voltooi ensovoorts.

T: Ons neem gewoonlik so bietjie meer vir die uitvalle...

F; want dit gebeur..

T: dit gebur maar...Altyd. Die verskil, wat ek net nou net wou gese het, is by ons, by Mediclinic, in vergelyking met Life en NEtcare, al ons student word werknemers van die maatskappy.

F: ek sien ja...

T: hulle kry ook n salaries en hulle si ook n pos gewaarborg, binne die maatskappy wanneer hulle klaar is

A: nie noodwendig by dieselfde hospital nie, maar by, in die groep...

T: die maatskappy, ja

F: en dis n groot voordeel ne?

A: en hulle kry salaries, of nie salaries nie, van dag 1 af

T: hulle kana and ie mediese fonds en die pensioen behoort alles behoort.

F: so hulle het al daai basiese voordele wat personeel geniet

A: en hulle kry Uniform ook of uniform pakkie, dit ook

F: ja dank an ek dink dat julle baie gewild sal wees

A: en ons betaal hulle boeke ook vir hulle, ons koop al die boeke vir hulle aan en hulle kan oor 12 maande tydperk terugbetaal...alles onmiddelik of hulle het die keuse om te se ons gaan oor 12 maande terugbetaal.

F; Ok, goed dis baie goed.

A: maar die studiemateriaal, hulle studiegisde kry hulle...

F: ja en is daar n fooie wat hulle betaal ten opsigte van hulle klas bywoning, hulle regsitrasie?

AAlles deur die maatskappy. Hulle betaal hulle SANC regsitrasie self.
T: hulle betaal net hulle SANC registrasie, die maatskappy betaal dit en ons verhaal dit van hulle, uhm, dis basies al, en hulle eksamengelde, betaal hulle ook. Weereens, die maatskappy betaal dit en verhaal dit van hulle.

A: Hulle betaal geen ander fooi nie, behalwe hulle moet n tydperk terugwerk vir die maatskappy. Sou hulle loop voor die tyd is dit kontrakbreek en dan moet hulle n globale bedrag terugbetaal.

F: ja en daar is min van die privaat instansies wat dit regtig nog so doen, jy weet, want dis maar n duur storie, dis n groot uitgawe om hierdie mense op telei, ne?

T: en dan natuurlik is ons ook gerigstreer by die HWSETA so al ons student word geregistreer as learnerships, en dan is gewoonlik so paartjies wat befonds word. .. van die SEAT af. Uh, maar daai befondsing, natuurlik, die student sien nie daai befondsing nie. Dis net wanneer die student die maatskappyverlaat in die mandatory period, die terugwerk tydperk, ne, of verpligte tydperk, wat daardie ding in werking kom. As die SETA betaal het, bv R10000.00 dan word dit van hulle kontrak geld afgetrek

F: dis reg ja...ok. so as ons teruggaan na waar dit begin het, soos jy gese het 19995, 1996, 1997, min of meer, wie was nou eintlik die person of persone wat dit ge insiese het? Want jy se, jy weet die maatskappy as n geheel sal ons maar se, maar daar moes tog iemand gewees het ...

T: dit was Mej Tollie Lambrecht, sy was dei direkteur van verpleging daai tyd, sys nou al afgtrie... sys die een wat die...die...die motivering agetr die hele stori was.

F: Ok. En uhm...

A: Jy ken haar beter...

T: dink jy ek ken haar beter? Ha ha . Juf Tollie Lambrecht is, jy weet sy's n “go-getter” gewees en sy , uhm, jong sys n drywer. Uhm in haar bestuurstyl ook, jy weet. Sy t regtig, syt dinge laat gebeur, jy weet... en vat nie nee vir n antwoord nie, jy weet daai tipe van ding. Sy was regtig ...en sys pro opeliding gewees, jy weet vir die maatskappy. Regtig waar.

F: wat was haar posisie daai tyd gewees? Jy gese sy was direktuer

T: ja, sy was direkteur. Van verpleging, nie noodwendig net opeliding nie maar ook...

F: Dienste, pasient sorg...

T: ja, ja maar sy was baie vir opeliding gewees en het baie vir ons ook gehelp wat dit aanbetref, uh, so...

F: en uhm, was miskien ook ander persone wat haar ondersteun het?

T: daar was n juffrou ??? ek weet nie of vir haar ken nie? Wnt sy ws ook baie bekend...sys
ook al afgetree en uhm...sy het haar ondersteun en sy het aan die einde van die dag het sy
toe gekyk na die, sy was toe die, die die pos wat Ann nou het die bestuurder van
verpleegopvoedkunde.

F: was daar sover julle weet, het die Raad of die Direksie, het hulle dit van die begin af
ondersteun... was daar teenkanting?

T: nee, nee, nee weet jy soever ek weet was hulle baie pro opleidng gewees, daar was nooit
regtig dat hulle teenkanting...

A: en dis nog steeds ...

T: nog steeds so. Vit opleiding, ja nee hulle druk om voort tegaan met die opleiding. En dan
moet e kook net se, ons het ons, mens wil nie g=brag nie, maar ons het , ons slaagsyfer is
baie goed. Ons het n drui sysfer ja, maar is minimal. Pesentasie gewys baie min.

F: ok, so wat sal jy se, waarop sal jy julle slaagsyfer stel?

T: ek sal se ons het n 90% slaagsyfer,

F: wat baie geod is, ne?

T: ja, ja

F: ek moet se dit lyk asof die, jy weet soos ek nou gese het, die groepe wat aand ie
hositaalgroepie verbonde is oor die algemeen n baie goeie slaagsyfer het. Uhm, want van
die ander waarmee ek nou gepraat het, meer as 80% slaagsyfer. En waaraan sou julel die
sukses dan toeskryf?

A: Ek sal se eerstens die keuringsproses. Dat ons regtig gaan kyk, is dit n geskikte kandidat,
will hulle regtig verpleging kom doen, en dan s dit ook ons personeel. Die dosente sis regtig
baoie f=goed opegelie en toegerus ...

T: die ondersteuning wat hulle kry...

F: begeleiding, ne?

A: ja en dan in die klas, die ekstra hulp wat hulle die student gee. Daar is n program waar
sty=udente Vrydae by kan inskekel vir ekstra onderrig...

T: ja ons het so n akadenmiese support program vir die student.

F: ja, ok... goied. En uhm...ekskuus nou het dit my vir n oomblik ntgaan wat ek wou gevra
het...

T: jy’s soos ek netnou...

F: ja...uhm, ok ja vertel vir my hoe werk julle? Werk julle op n blokstelseL wat is die moedel
waarop julle wek?

T; ons werk op n blokstelseL die ingeskrewe skursusse werk op n bloksisteem. Hulle kom in,
wat ons doen is hulle begin met aanvang van die kursus, dan uhm, begin hulle met n 4 weke
teoretiese blok, en net na daardie blok is daar n 4 weke praktiese blok. Maar wat hulle nou doen is, hulle integreer die twee bloke met mekaar. As hulle nou bv, se nou maar bv die kardiovaskulere stelsel gedoen het, dan gaan hulle nou daardie praktika rondom dit doen. Uhm...sodat hulle aan die einde van die dag, hulle ekry ook n KPR kursus wat hulle deurloop, hulle moet vaardig wees in KPR voor hulle uit die skool uitgaan...

G: Dis reg.

T: voor hulle praktyk toe gaan...uhm...en dan word huulle nou uitgeplaas by die verskillende mediclinic hospitale, uhm, hulle word toegewys aan n mentor en elke mediclinic hospitaal het een of meer uhm, uhm,

A: Kliniese faciliteerders of training consultants, opelidings konsultante, en uhm wat huuldaan ook doen by baie van die hospitale, een keer n maande het hulle n praktiese dag, as hulle in die praktyk is. en dan sal die student weet hulle het n kontrak, hulle kontrak sal se hulle bv, Julie maand, dit is die procedures wat bv Juliemaand, dis wat afgehandel moet word j=Juliemaand, so in daardie praktiese dag, bv, word daai procedures weer gedemo, en hulle kry tyd om in te oefen.

F: in te oefen, goed...

T: en, uhm, voor hulle finaal geassesseer word dan nou. Aan die einde van die dag.

F: goed.en hoeveel bloke het hulle nou so duer die loop van die akademiese jaar?

T: die, uhm, uhm eerstejaars, het... wag nou, dis A, B,C, D,E, F, so dis 6, dis 7 blokke.

F: Goed.

T: Hulle kom in vir die eertste vier weke, plus daai 4 weke praktiese bblok en dan is dit week bloke, so elke tweede maand kom hulle in vir n week blok. En dan skryf hulle ook, nou het ons dit verander, hulle skryf nou net 2 groot toeste duer daai akademiese jar, maar hulle kry werksoopdragte om te doen waarvoor hulle nou punte kry. Hukle doen nou vandag, bv hulle eerste, waars ons nou? Dois Julie...eerstejaars, so julle is besig met hulle OSCE op die oomblik, praktiese eksamen. En dan die tweedejaars, hulle ...natuurlik, hulle kry ook n praktiese blok, hulle procedures is n bietjie minder. Hulle kry aan die einde van die eerteaar kry hulle n 2 weke praktiese blok om hulle voor te berei vir die tweede jaar. En, want hulle kom nie noodwendig, as hulle nou klaar Julie klaarmaak emt hulle eerteaar kom hulle eers September in vir jhulle eerste blok. So ons moet maar, hulle probeures wat hulle moet doen in Augustus, moet hulle, so ons berei hulle voor vir daai procedures in daai 2 weke. En dan kom hulle in September in nou vir n blok, hulle het ook, hulle het A, B, C, D, hulle het 4 blokke, maar hulle bloke is twee weke. Dis bietjie langer.

F: o, o, OK. En uhm, cope die student goed met hierdie model...onderrig model?

T: Hulle...op hierdie stadium, ja. Soos ek se, ons slaagsyfer is goed, hulle cope goed. Hulle het natuurlik ook soos ek se, by die hospitale is die opleidingskonsultante en die kliniese faciliteerders wat hulle help begelei, asook die uhm, die nurse educators van die skool gaan gereeld hospitale toe.
F: gaan hulle ook?

A: Hulle gaan weekliks na die hospitale toe...

T: ja. En in die hospital, in elke saal, word die student aan n mentor toegewys.

F: wat baie help dan, dat jy weet daai student kry spesifiek die aandag wat hulle nodig het. Uhm ek wil net uitklaar... het julle die kursus vir die Auxiliary nurse apart geakkrediteer en die ingeskrewe verpleegster...

T: Ja, ja

F: So die tweede hardloop parallel ook ne?

T: ja ons het hom geregistreer, Enrolled nurses, R2176 en ons het ook 2175 geregidtreer.

F: ja. Nee ek wou net uitklaar of dit...want kyk op n stadium kon n mens moss sort van die eerste jaar aanbied en hulle dan laat exit en hulle registreer...

T: ja Jy kan dit nou nog doen hoor.

A: die ou kwalifikasie kan jy dit nou nog doen, maar nie met die nuwe nie.

T: as hulle bv in hulle tweedejaar uitval, hulle driuip en ons staak hulle in hulle tweedejaar, dan doen ons aansoek dat hulle iskryf as n ENA, as hulle die eerste jaar geslaag het.


T: nee di twee is apart.

F: en die OBK? By dei 2 plekke wat jy uitgewys het, is hulle nog aan die gang?

T: Curamed en... ja hulle is nog aan die gang.

F: Hoe werk hulle blokke dan? Hulle akademise program?

T: Hulle het ook bloke...

A: dieslefde...

T: hulle werk ook op n blok sisteem soos wat die kleintjies werk, werk hulle ook op n blok isiteem.

A: Hulle inname is net APRil en Aug, waar ons sn is nou Februarie en Aug. Vir die kleintjies...

T: vir die straatkinders...

F: ons praat ook van die straatkindertjies maar dit word nie altyd postitief ...

T: ervaar nie...

F: opgeneem nie. So jy weet, mens ...

T: maar jy wee twat ons bedoel is maar mense van buite, wat nou uti die skool uit kom.
F: ja jys reg...

T: wat van buite kom, wat nie in die maatskappy is nie. Wat ons natuurlik doen is...ons ... wat ons aanvanklik geodon het aan die begin het on sons ou ENA’s het ons vir n opgraderings kursus, ne, ons het die opgraderingskursus gedoen met hulle en dan het hulle die toelatingseksamen geskryf van die RAad,. Maar wat ons gevind het met hulle is dat ... hulle het nie so goed gecope met die opgraderings kursus nie. En uhm, toe tons dit heeltmal gestop. En wat ons doen met al ons ENA wat voor 1993 ingeskryf het, as hulel nou aansoek doe nom bv die tweede jaar te doen van die kursus, dan se ons nee, ons vat jou van die begin af, van jaar een af jy skryf in vir die 2 jaar kursus, en jy hardloop saam met die groep.

F: kry julle nie teenkanting van die Raad nie?

T: nee nogal nie

A; Nee glad nie. En ons hulle vir hulle op hulle basies op dieselfde salaries as wat hulleis. Hulle val nie terug na n student se salaris nie...

T: ons het op n stadium n navraag gehad van die Raad, en ek onthou ek het dit vir hulle so verduidelik, dit is vir ons beter om hulle saam met die nuwes te vat tot hulle op daai vlak kom. Hulle sukkel met die opgradering.

F: ja uhm. Nee ek vra want ons n paar gevalle ook gehad, wat die student eintlik self gese het ek sal graag die eerstejaar wil oordoen omdat dit n lang tyd... en dan het die Raad dit bevaagteken. En op een stadium het hulle sommer net die student gaan regsitreer vir die toelatings eksamen. En toe die registrasie daar by ons uitkom is net eenvoudig verander en die kant toe en daai kant toe en hoe ook al jy weet het hulle net eenvoudig vir ons gese julle wil net geld maak uit hierdie mense uit. En dit was nou nogla vir my...maar in die lig van julle unieke situasie is dit dall vir hulle meer aanvaarbaar, omdat daar nie ksotes vir die student regtig is nie.

T: sy bly ook op haar salaries

A; Ja, ja

T; ...skaal wat sy is, dit word nie verlaag nie.

F: want een van die gevalle wat ek nou spesifiek aan dink was n person wat uit die Departemtn van Gsondheid werk, wat tog ook nie haar voordele verloor het nie, jy weet. Maar... nou ja.

T: nee ons het nou nog nie... die outjies wat natuurlik na 1993 klaar gemaak het, hulle gaan duer n pre studie, doen n pre studei en as hulle die pre studie duerkom, dan kom hulle oatomaties op die tweedejaar in.

F: ja, goed. Ok

T; want jy weet daardie outjies wat...soos ek vir dei Raad ook verduidelik het, hoekom suukel ons so met die opgradeing...uh... is daai pre 93’s...hulle het hierdie 100 dag kursusse gedoen, en dit is nie voldione nie, hulle is so agtermet die teorie en daai klas van goed... en
hulleis vir jare in n proses wile k nou amper se wat nie altyd op standard is nie en om hulle daar uit te kry...

So jy weet, nou begin ons van voor af en se vergeet wat jy gedoen het al die jare, jy gaan nou leer hoe om die regte ding te doen.

F: en dit opsigslef is baie moeilik.

T: ja dit si moeilik

F: want kyk hulleis ervare en party van hulle is uitstekend, maar ongelukkig en ek dink ons val almal sort van in daai strik, is jy vat maar jou krot paaie...

T: jy vat jou krot paaie, ja...

F: en om dn regtig soos ky se, om dan op standard en volgens jou praktyk standard te kan praktiseer en ook wanneer jy kom by assessering wanneer jy dit op n sekere standard moet doen dan is dit nie vir hulle so maklik nie.

T: ja dit is so...dit is so.

F: ok goed. so ons het nou gepraat oor die hoeveelheid leerder. Ek wonder of nie net so gou weer terug gaan na die verskillende sentrums toe nie... die datums waarop elkeen van hulle hulle begin het, hulle het seker ni alamal op dieselfde tyd begin met opleiding en akkreditasie en so aan nie?

A; Dit kan ek nie onthou nie...

F: is dit moontlik om die ...

T: ek kan nie vir jou daai antwoord gee nie...

F: OK.

T: dit is nou bietjie moilik...uhm...

A; wie sal weet?

T: sal dit ni op daai leer wees nie? Daarbo? By elke skool nie?

A: die bested al wees om die hoofed van elke skool te skakel en vir hulle te vra.

T: ja. Ek dink dit kan ons doen. Ons kan die skool hoofed vra.

F: goed, Uhm...en,en id hirdir verskillende sentrums, is hulle as onfahnaklike of subkampusse...

T: onafhanklik...

A; Onafhanklik...

F: so elkeen van hulle het basies hulel eie akkreditasie nommer by die Raad?

T: ja hulle het elkeen hulle eie nommer... ja... ek wil net hier kryf...wanneer het die skool
begin...

F: ek hoop om by dei Raad ook uhm inligting te kry...

T: ek hoop vir jou part ook so...

A; Hulle is so besig, jy sukkel om n vergdering te kry...

T: ek was nou daarbo vir n week en uhm, ek het, wan ek is een van die moderators daar...

F: o ja,

T: en uh ek wou vir Dudu Sibiya net gaan dag se het, ek mean...it was just not possible... sys of in n werkswinkel of in n vergadering, so ek weet nie wanneer sy haar werk gedoen kry nie...

F: Ja mens wonder nogal ne. Het julle gehoor dat daar nou n nuwe registratuer aangestel is? Julle ken hom seker? Hy kom mo s uit julle omgewing?

T: ja, uit die Kaap uit...mr mabuda...

A; o, uhhum.

TMr Mabuda is die nuwe registrateur.

A: regstig? Mr Mabuda wat in die Kaap was?

T; nee, nee nee, Dudley Govender, mr Mabuda was by hoofkantoor.

A; o ek wou se dit klink bekend, my aarde!

F: Ja so ek kan nogal vir myself voorstel dt hulle redelik besig is... maar nou ja...ek wil maar net n bietjie daar in die argief gaan rondkrap. Ja jy weet want n mens moet die inligting wat jy kry kan substansieer emt die dokumente wat daaris, en ek hoop regtig dat hulle sal instem. Maar ander sale k vir julle vra vir afskrifte van die oorspronlike akkreditasie sertifikate wat die Raad uitgereik het om te verifier dat dit wel die datum is en skrywes tov die kurrikulum akkreditasie, goedkeuring en al daai tipe van dokumente wat ek nodig sal he, asseblief. Uhm...ok...goed. ok en ja ek praat nou van, baie van wat hier in die Kaap gebeur, maar as jy miskien ook kan dink aan die ander sentrums ook, die areas waarvandaan julle student kom? Soos wat ekverstaan. Klink vir my hulle kom van regoor die land?

T: ja regoor die land. Die KAap, natuurlik hoofsaaklik die Kaap, die Kaap se area sover as George,. George mediclinic is natuurlik ook een van ons ge akkrediteerde fasilitete, uhm, hulle is daar vir hulle prakties maar hullekom hiernatoe vir hulle bloke. Ja en uhm, ja. Verder die Kaap se mense is mar verspreid oor die Kaap. Wat Interestant is, ons het altyd n groot aantal student wat uit die Paarl-wellington area kom. Wat interessant is... en ons het nogal van hierdie kant het ons ... nie so veel van die suide nie, ek wil amper se daai kant van die Liesbeek is minder as die kant van die Liesbeek. Wat interesant is. die’t ek nou nogal opgelet in die aansoeke, meeste is van dei noordelike kant, jy weet. So, ja...

F: en wanneer julle dan die keuring doen, en die plasing dan prober julle seker omd ie
student so naby as moontlik aan hulle tuisdoep te allokeer?

T: ja ons probeer dit doen...dis nie altyd so maklik nie...want jy moet nou kyk ... daardie hospital is goedgekeur vir soveel studente en hoeveel het hy nou alreeds en hoeveel k an hy nou nog neem, en, en so aan. Dis nie maklik nie. Maar ek verduidelik ook vir hulle.

F: dis hoe n mens hulle maar prober tegermoet kom.


F: ok Goed. en dan neem ek aan dat in die ander areas dit soortvan ook maar is, maar jullw is nie regtig provinsie gebonde om te se... ek weet op n stadium het die Raad gese jy mag nie buite jou provinsie se grense ...

T: nee die provinsies bly basies binne hulle grense, so, ja, ja

A: dit gebeur selde dat n student geplaas word uit n ander provinsie uit.

T: as ons student uit n ander provinsie kry, dan is die student in die KAap vir die tydperk van opleiding. Ja, natuurlik, soos jy natuurlik ook weet, as n student bv by Sandton leersentrum wil oorpaaas, dis mos nou twee verskillende skole, dan hy gestaak word by dei een en hervat word by die ander.

F: maar loop julle akademiese program so dat dit ...

T: dit is gestandardiseer en hulle loop almal dieselfde.

F: so dieselfde program... word

A: Dieselfde program word by almal gevolg. Dieselfde studeigidse alles...blok program, dis hy...

F; So dit maklik dit vir julle maklik om student oor te plaas van een sentrum na n ander, of kom ons relatief maklik?

A; ons moedig dit nie aan nie. Dei student moe n baie baie goeie motivering he...voor ons dit toelaat.

F: so as mens kyk na die toekoms sal dit dalk vir julle wees om hierdie, soos hulle se, seamless articulation...

T: met die nuwe kwalifikasies?

F: ja, ja. Goed. uhm. Ok. Het julle enige idée wat tot op hierdie stadium, of kom ons se 2006 want dit is waaroor die studie gaan, hoeveel stduente julle jaarliks deursit?

T; ons is in die omgewing van, as ek nou rereig dink, n gemidelde van so 300 studente landwyd.

F: Goed

A; Ja...
T: Landwyd, by al ses die skole. Dit kan meer wees maar dit is n gemidele. As ek dink aan die student, ne Ann?

A: Ja vir n jaar...

T: in die omgewing van 300

A: dit hang af van hoeveel poste daar ook in dei hospitale beskikbaar isop daai stadium.

F: Het dit al ooit gebeur dat julle van die student moes laat gaan omdat julle nie poste beskikbaar het nie?

Ann: nee, nee. Ons bepaal voor dei tyd, voor hulle onderhoude doen, bepaal ons hoeveel poste is daar, hoeveel student kan ons akkommodeer.

F: so julle doen n projeksie en ...

A: ja voor ons hulle nooi vir n onderhoud, weet osn hoeveel kan ons keur.

F: so julle neem nie noodwendig elke jaar dieslefde hoeveelheid student nie?

A: nee, nee

F: en ook nie noodwendig as ons se julle kwota is 250 per jaar, neem julle nie elke k=jaar 250 studente nie?

A: ja ja

F: absoluut gebasseer op die maatskappy se behoeftes

T: en poste beskikbaar, want hulle moet werknemers word.

F: Ok. Het julle al daaraan gednik om dit bv te doen en mense wat oorbodig inse beskikbaar te stel vir die ope mark... sale k dit maat noem?

A: ons het self n behoeftes, ons het nooit oorbodig nie. Wat ons wel doen, daar is buite maatskappye wat ons gekontak het wat ons bereid is om hulle student in te neem, wat hulle by ons opeliding doen en in ons hospitale erk en dan gaan hulle terug na hulle toe.

F: so, jy weet ek vra dit omdat daar altyd beweer word dat die privaat sector van die staat steel en dat hulle nie n bydare maak tot enige van, jy weet die staat se behoeftes wat opleiding aan betref nie.

A; Ons direktuer is baie, hoe sale k se, tengusnte daarvan om met die staat saam te werk.

T: uhm, baie ,baie

A: om met hulle in so n partnership in te gaan.

F: ja want dis een va n die vrae wat ek het: wie is jou strategiese partners?

A; ek weet hulle is nou besig om te kyk na n projek en om uhm, voorstelle opte stel, ja. Hulle kyk na met wie kan ons saamwerk en hoe kan ons saam met die staat werk.
F: en ek dink ook tenopsigter meer van die na basiese kursusse, waar jy van die staat se mesne kry wat spesialiteite kom doen.

A; op die stadium bied ons nagraadse programme aan, maar ons doen dit via n universiteit. So ons al ons student kies, kyk wat se behoefte, se iemand wilt eater doen, en dan skryf ons hulle in by die universiteit en ons betaal die fooie, en ons dosente volg daai student op in ons hospitale.

F: en hulle doen prakties in julle hospitale

A; Ons hospitale, by die goedgekeurde fasilitetie natuurlik vir daai universiteit.

F; Ja, ja. So...

A:

F: maar julle is dan nie ge akkrediteer om enige van die nabasiese kursusse self aan te bied nie?

A; nee.

F: goed.

A: Uhm ons het no prober om van die... uhm intensief en teater aansoek te doen, maar die Raad het n moratorium... hulle se dis gelig maar jy kan nie nou n nuwe program, n ou nuwe program akkrediteer nie. So ons poging daar het paltgeval.

F; Ja, ja

A: So ons sal nou maar wag vir die nuwe kwalifikasies om uit te kom

F; en enige ander... jy se daar is van die ander maatskappye, privaat maatskappy wat na julle toe stuur?

A: Ja ons het so twee belangstellendes gehad maar dis heeltemal onafhanklike verpleegskole wat nie hulle kursus geodekeur kon kry nie, wat vir ons gevra het of ons nie hulle student deur ons kan oplei nie. Ons het wel n program, n Diploma in operating room practice, is geod gekeur by die Departemtn van Onderwys en Department van Gesondheid het ons nou gekontak om hulle stidente deur ons te laat oplei. Klas by on loop, maar hulé werk by Groote Schuur en Tyger berg... doen hulle prakties. So daai is ook alles besig in die akkreditasie process. Ons kyk na mootlike inname volgende jaar.

F; Ok. Is daar dan, kom ons vat dan n onafhanklike privaat hospital wat dalk mense na julle toe stuur vir opleiding?

A; Nie op hierdie stadium nie

T: nee, nee

F: Nie.. so dis maar hoofssaklik binne die maatskappy en konsentreer op julle eie personeel vir loopbaanontwikkeling
T: Ja en ook, ons natuurlik van buite skoliere in.

F: Dis reg ja

T: Hulle het natuurlik ook ope dae, van die hospitale het ope dae, uhm wat hulle natuurlik ook die opleiding bemerk. En dan het, meeste van die hospitale neem ook skoolkinders in vir shadow nursing, om te kyk is hulle belangstelling in veroleging, om te kyk is dit wat hulle wil doen. Dan gaan werk hulle nou in 'n hospital vir 'n paar dae...wat hulle nou net shadow doen, jy weet om te kyk, is dit wat ek wil doen of nie

F: Ja, ja. En wat is julle opvolg op dit? Is daar baie van die skoliere wat dit kom doen en op die ou end aansoek doen?

T: Ja

A: Dit ook natuurlik af hoe lyk hulle matrieksertifikate,

F: Ja wel, alles in ag geneem, die toelatingsvereistes en so aan in aggeneem...

Goed. Wat sal julle beskryf as julle grootste mylpaal?

A: Sal ons se die basiese programme? Die goeie slaagsyfer in al ons kursusse en al die student wat die kursus suksesvol geslaag het?

T: Ja ek sou dink, as ons dink in terme van die basiese kursusse sou ek dink... ons hoe slaagsyfer, ek sou dink ons kwaliteit van opleiding si regtig van 'n hoe standard uhm...

A: Wat ons ook kan se is dat baie van ons dosente bied van die kursusse by die Universiteit aan... Hulle faciliteer en koordineer daai nagraadse kursus vir die universiteit.

F: Reg, so as ons terug gaan na jou strategic partners, Universiteite wat julle dan samewerkings ooreenkoms mee het?

A: Ek sou se ons help hulle, ons het nie regtig samewerkings ooreenkomste nie. Ons bied die klasse vir hulle aan maar ons betaal dieselfde tarief vir ons studente.

F: Ok is dit...

A: Ek is byvoorbeeld n dosent vir Stellenbosch Universiteit... ek hanteer die teater kursus vir hulle en ek volg my student in die praktyk op.

F: Ja, ja... maar ek dink ons kan dit uitwys, want dis n spesifieke verhouding... dis miskien nie n formele verhouding nie, maar daar is tog n tiep verhouding tussen Mediclinic en daardie universiteit.

A: Ja dis Stellenbosch se Universiteit en dan ook UP, Universiteit Pretoria en Universiteit Johannesburg, was e kook hulle dosetn vir baie jare... an uit die Kaap uit.

F: O, van hier af soontoë?

A: Ja van hieraf het ek die kursus aangebied, Hulle het iemand daarbo gekry om op Saterdae die kals daar aantebied maar ek het al die kalsse hier aangebied vir hierdie student, die hele
Kursus hanteer. Vraestelle en al daai goed. en dan het ek net mentors gekry om die student bo te begelei.

F: En dan Unisa het julle ook b=genome vir die oorbruggings kursus

T: ja ons is nou nog bseig met hulle maar ons laaste inname was nou hierdie jaar vir die eerste jars.

A; Ja ons dosente bied al die klasse aan...al wat hulel eintlik doen is , hulle gee die vraestelle en doen die admin om die kusus en skryf student by die Raad in. Maar ons dosente bied alles aan en ons sit ... dit was ons studiegidse ook wat ons gehelp opstel het.

F: Hoeveel dosente het julle?

A: 54

F: in total...in die groep?

T; Dis landwyd.

A; maar dan is dit...dis basiese dosente en dan nagraads...

F: Ok...

A: ek sink 54, daar’t nou bygekom, ek wil net doodseker maak.

F; en, uhm as ons kyk na die basiese kursusse, ons gaan nou bietjie heen en weer, uhm, is is dit een dosent per inname of het julle ...of gaan hulle oor die hele spectrum van die kursusse wat julle aanbied?

T: Hulle gaan oor die hele spectrum, maar wat hulle doen, hulle het byvoorbeeld...hulle deel die dosentes nou so in dat jy het nou jou dosentes vir jou eerstjaargroep en dosentes vir jou tweedeaargroep. En die eerstjaargroep, hulle konsentreer net op die eerstjaars en bied al hulel klasse aan en doen al hulel opvolg werk. En die tweedeaars doen nou dieselfde, net vir die tweedeaars. Uh die meeste skole werk nou so, dat hulel so maak...uhm maar as die se nou maar byvoorbeeld, hulle los mekaar ook af aan die einde van die...volgende jaar dan sal hulle nou weer omswaai, jy weet ...

A: sodat j=hulle nie net altyd op een kursus teogespits is nie. Mar die wat die oorbruggings student hanteer, hulle bly by die oorbrugging. En dan die nagraadse student kry hulle spesialiteit soos teatre of intensief of neonatologie, maar n=hulle help ook met klasse aanbied vir die oorbruggings of die basiese kursusse. Soos die teater dosent sal die teater module hanteer...

F: dis reg, vir die ander basiese kursusse ne? Ok. Goed. is daar enigiets anders wat julle wil uitwys as n hoogtepunt of mylpaal wat julle bereik het?

T: weet jy, mens wil nie brag nie, maar ek...

F: nee maar jy moet!

T: ek uh as ek nou dink byvoorbeeld, ek het op n stadium het ek ons, ek het dit nou weg... ek
doen dit nou nie meer nie, maar ek het ons student in die gemeenskap geplaas vir n week of twee ne? Sodat hulle daai blootstelling kry. Ons sukkel natuurlik om hulle te akkomodeer by die gemeenskapafasiliteite, maar die terugvoer wat ons elke keer kry is dat, hulle vat ons studente met ope arms aan want hierdie mense werk, hulle stel belang, weet, hulle wil die ding doen, waar jou staatstudente is net daar vir die ure...

A: om die ure in tekry...

T: waar hierdie mense is so gretig om te leer dat hulle wens hulle kan net ons studente neem...

F: ek moet se, wat nogal n algemen=e tendens is van jou privaat instansies se student is... die terugvoer wat n mens kry is oor die lagemeen baie meer postief. Uhm, ek wou nou net iets genome het wat ek nou, wat my nou weer ontgaan het. Uhm...

A: Miskine moet ek net ook noem, ons bied ook 12 kort kursusse aan duer die Universiteit Pretoria...

F: O ja?

A: verskillende spesialiteitsvelde endie dosent ...natuurlik ook daai kursusse

F: ok, nou lys hulle

A: O nee, ek dink ek moet daai leer gaan haal met al die kursusse, dis dalk makliker. Maar dis soos pediatrie, neonatologie, Intensief, teatre, kardio toraks, narkose het ons twee kursusse, een vir verpleegsters een vir susters, ortopedie, wat is daar nog?

T: Onkologie

A: ek gaan daai leer haal dan sale k sommer die getale van die hospital ook saambring

F: dit sal baie gaaf wees. Kyk want kyk dit het tog alles te doen met die ontwikkleing van dei verpleegkundige...

A: en dan moet on Sons fundamentele programme ook byvoeg. Daars ook n klomp. Ek gaan nou jok as ek se hoeveel maar daar is ten minste dertig programme, kursusse

F: is dit?

T: weet jy het ons nie daai, daai ek dink daai poster ding wat al die kursusse op het?

A: Ek het nie een nie

T: ei gaan kyk of hier in die skool nie een is nie

A: jaw at wys waar al die kursusse aangebied word...

F: as daar inligting is wat julle nie nou onmiddellik kan bekom nie is julle welkom om dit vir my aante stuur...

T: laat ek gou hoor by Michelle
A; van hierdie kursusse help om ons kry baie keer student wat meer op die platteland is, hulle kan nie hulle gesinne alles los om n formele kursus byetewoon nie dan doen hulle die kort program deur UP of ons laat hulle die drie maande tot vier maande fundamentals doen. En ond gee hulle die keuse, hulle kan die fundamentals prgm doen of hulle kan dit pre study uhm progam doen...paket doen vir toelating tot die diploma od die kort program.

F: ja, wat alles vir die personeel vir ontwikkeling is en wat dit meer toeganklik maak, wat ek dink wat baie belangrik is, want mense voel dikwels, jy weet veral die wat in die kleiner sentrums is, dat dit nie vir hulle so maklik is en dat hulle nie soveel geleenthede kry nie

A; Ja jy weet, mesne met n gesin kan nie alees net los en net vir j=n jaar oorplaas nie

F: ja nee dis waar. Dis baie interessant uhm... ek peobeer net dink wt is dit wat my nou ontgaan...

T: ons kyk net gou. Daar het n pak gele ie wers maar dit is nou weg . A hier is een, daars hy, binne in die kas

F: baie dankie

T: ja, daars die leersentrums ook vir jou en die hospitale

F: eks sien ja, nee dit is nou baie oulik hierdie, ek sal baie inligting van hieraf en jy weet ander navrae wat mens dalk sal wil doen uhm van hier af kan kry...

T: die enigste ding wat nie hier op is nie is die... kursus wat nie hier op is nie want hierdie is voor daai gedoen

A; Ok hier is 50 dosente met ons drie by is 53 dant ons nou nog iemand aangestel wat nou i September gaan begin...en dan elke leersentrum het n administratiewe beampte. Hier is die getalle wat goedgekeur is vir die uhm, enrolled course, is dit 444 en vir die bridging is 334.

F: die erste getal is 444 en bridging ?

A; 683 is dit 334

F: 334 ja, so dis nogal n redelik groot getalle ne?

A: dan wile k nou kyk die programme ne?

F: ja

A: uhm, dis nou alles basiese programme...hierso, hierdie sl jy sien is die diploma programme wat ons nou...ons bied dit namens die universiteit aan, ons doen al die klasse, ons dosente bied dit aan. So daar is een, twee, drie, vier, vyf, ses, sewe diploma kursusse en dan is daar, dis al die kort programme. Operating room, critical care, oncology, uhm recovery room for EN and then advanced oncology. Dit is die wat MAart begin en hierdie ses begin Junieaand. So dis cardiothoracic, neonatology, peaditry, anaesthesia for RN end an orthopaedics en ook Cathlab. En dan hierdie is al die fundamental programme. En hulle is een, twee, drie, vier, vyf ses, sewe, ag, nege tein elf twaalf, dertien, veertien, vyftien, settien sewentien agtien...25, 26 27 28 29 30 31 en hyt nou net een klaar geskryf vir HAematology
so dis 32.

T; Rehabilitasie

A; Rehabilitasie...ag sorry man, rehabilitaïse. Dis nog nie op hierdie lys dnie. Hier is ook n program wat nou net gesktyf is hy gaan 1 feb begin, hierdie drie het nou net begin.

F: goed. kan ek n afkrif van hierdie kry asb?

A; ja seker. Die meeste van die s 3 to t 4 mande daai is ses maande kursus, hierdie ene vir operating room for EN is n jaar kursus. Van hulle ht self stude en ander het ...kom in vir kontak sessies. Ahng af van die kursus en die moeilikheids graad...

F: Kan ek hierdie vat?

T: Ek maak gou n afskrif

F: anne hoe lank werk jy al vir mediclinic

A; Twintig jaar

F: so jy was ook deel van toe dit begin het?

A: ja, ek het begin in 1991by Panorama, teater skrop suster, en 95 as die T&D vir teater en toe van 96 as die teater dosent. En n jaar en n half terug...eers het ek die nagraadse goed hanteer, was ek training manager vir nagraads en toe n jaar tuerg die bestuurder van opleiding.

F: so die eerste diploma plegtigheid wat julle gehad het, vertel my bietjie van dit?

A; weet jy, ek gaan vir jou jok as ek moet se, ek dink dit was in die 1980, ek si nie ddoseker nie. Ek het in 1989... wanneer het hy...ek het 91 daar begin en ek dink ek het 94 my teater kursus deur mediclinic begin. Ek dink hulle het 88 begin met die eerste groep. Maar ons het dit gedoen deur Otto DuPlessis college, ons het klas daar geloop, ond het prakties gedoen by panorama en dan die raads eksametn geskryf, en toet instesief begin. Dis daai twee kursusse. En toe so van 2006 af het ond so gegroei met die fundamentals en al hierdie.

F: ok want volgens die datum hier was dit 1997

A; ja maar dit was vir die basies...voor dit...

F: het julle nie, ek noem dit nou n diploma plegtigheid maar n...

A: ja kyk voor dit eh tons die teater, kyk ons het voordit begin... mediclinic was net n uitgereide kliniese faciliteit vir Otto en osn moes Raadseksamen skryf. So ons het klas daar geloop, so dit is net daai een program wat osn in die 80’s begin eht met Juf Elize Wiegou, na basies maar ons was nie n opleiding sentrum nie op daai stsium nie.

F: so doen julle n jaarlikse seremonie of iets waar die sertifikate oorhandig word en ...vertel my so bietjie van dit?

T: ons het natuurlik vir aldie kursusse, vir al die formele kursusse behalwe die fundamentals,
het ons n jaarlikse seremonie, hierie jaar is dit in oktober, en uhm...dan kry hulke natuurlik n sertifikaat van erkenning van n kwalifikasie en uhm... natuurlik het ons ook bekers wat ons uitgee vir die beste prakties, beste teorie, daai tipe van goeters. Ons is op die oomblik nou besig om te reel vir hierdie jaar se funksie. Ja elke jaar...

A: elke sentrum het hulle ie funksie

F: o?

A: Ons drie vleig maar op na alaml s’n maar elke streek het sy eie. Die student...dis te duur om hulle almal aft e bring...

F: Ja nee, ek kan dit glo. Dis sekerlik meer prakties om dit by die sentrums te hou en ek dink eldke sentrum het mos maar sy eie kultuur en

T: Belville hou syne hier in die Kaap, Bloemfontein hou syne op sy eie, en dan Tswane, Curamed, nelspriut en sandton, hulle hou hulle s’n gesamentlik.

F: so wanner was die eerste een wat julle gehou het?

T: 1990 uh...98. toe die eerste groep klaar gemaak het.

F: en kan jy onthou heoveel student e het toe ...

T: veertien in die kaap... ek kan nou nie onthou in Santon nie. Hulle het iets soos 6 of 7 gehad, was n klein klassie.

F: het julle enige fotos of ...aandenkings van daardie geskiedkundige oomblik?

A: ons het nie daai tyd gednik dis geskiedkundig nie

T: ek is mos glad nie een vir sulke... die funksie moet ek reel em ek meot klaar kry. Ek wil nie nog suckle met ... snaaks ja weet jy ek het nie fotos nie

F: het jy van later e funksies? So...

T: jy kan kom kyk hier is nou op die bord van verlede jaar s’n wat jy kan sien

F: het julle dalk n program gehad met die name op?

T: ja, die name van die menses al ek graag wil kry. Want ek sal dit graag wil kry om dit bietjie meer lewendig te maak. Ander is dit net so n geskri wat mens verveel. Ek moet so bitjie iets insit om dit bietjie lewendig te maak.en werklik. So dis hoekom ek vra...

A; ek wil net vir jou wyd. Ons het omtent met elke inname on=trent so n duidend fundamental student. Byvoorbeeld hierdie is die Junie inname se klop, landwyd en dan hieride is weer die wat begin met die pre packet Augustus, vir volgende jaar se diploma en kort programme. Em dan elke dosent of elke kursus het n koordineerder en elke streek eht n fasiliterder vir die verskillende kursusse. So hierdie person sal bv , sy stel die vaestelle op en werksopdrage kom na my toe en eks tuur dit UP toe vir modering en dan stuur ek dit uit op die dae wat hulle skryf. Uhm almal, hulle kry n program en aldie fundamentals skryf op dieselfde dag toets, dis v=gewoonlik op n vrydag, vir die fasiliterders in die hospitale net
makliker om et fasilitéer

F; dis reg ja, en om seker te maak dat die standard regduer dieselfde is

A; en daar is daar natuurlik ons hospitale in Dibai ook, hiedie programme word daar ook aangebied, die kort en die fundamesntals. Ons kan nie die diploma daar aanbied nie maar die fundametnalss en kort programme bied ons ook daar aan. Hulle innames is bitjie andrster. Ek dink hulle is, waar ons Augustus begin net ons fundamentals, is hulle s’n Septemebr.

F: ek sien ja. Wanneer het julle in dubai begin met die...

A; dis maklik twee jaar terug...dit kan dalk langer wees, die tyd gaan so vinnig verby

F: ja dit is nogla verbasend ne...voor n mens jouslef kom kry dan het saar n paar jaar verby gegaan wat jy nie besef nie. Nee, dis baie interessant. Miskien, as ek vir julle vra om terug te gaan en miskien elke jaar te vat, vandat ons nou hier praat van 1997 af, en s jy miskien terug dink aan hoogtepunte wat in daardie jaar gebuer het, of miskine iets...

A; ek was nie so betrokke by dit nie. Miskien kan Theuns jou help. Ek het nou maar meer gefokus op nagraads ook, maar hy was nou betrokke van die begin af.

F: want ek sal graag wil, jy weet, ek sal graag wil uhm, he, as mens kyk na n kronologiese ontsikkleing, dat n mens kyk na n kronologiese ontsikkleing, dat n mens kyk na wat het gebuer in daardie jaar wat noemesn waardig is, want ek dink tog, jy weet mens dink nie altyd onmiddelik daaraan nie, maar ek dink tog daar was skeere geodjie wat mens spesifiek sal kan uitwys.

A; ja wat nou uitstaan. Dis so

F: ok. En as ons kyk na die toekoms...wt sou jy se is julle grootste uitdaging?

A; ons wil uhm, natuurlik ons nuwe programme nou ge akkrdeiteer kry en dan natuurlik by SAQA ook, want ons kyk daarna om die diploma aan  te bied en moontlik ook die graadkursus en dan die sertifikaat ook en dan van die nagraadse kursusse.

F: Dit laat my nou die vraag vra van Hoer ondrrrig>...uhm ...

A; ons is n goedgekeurde..klaar goed gekeur by Departemetn van ondrwys as n Hoer onderrig instelling  en dan vir Fe took

F: ja dit was nou een van die hoogtepunte wat ek nou aan gedink het

A: ons was in 2008 en 2009 was ons goedgekeur

F: so dit val nou buite die tydperk

A; Ja, maar die proses is natuurlik vroeer begin

F: so ons kan die proses insluit...

A; dit vat mos maar n tydjie om afte handel
F: ja dit is mos maar n pynlike proses.

T: daar is n blokpram emt die blokke van die Ingeskrewe kursusse

F: Dankie. Ok ek het nou vir Anne gevra wat dien sy as die grootste uitdagings vir die toekoms.. en uhm sy het gese...

A: nuwe programme wat goedgekeur moet word,

T: dan tree ek gelukkig af

A: en dan si daar natuurlik die studie gidse en al daai...

F: ja dis nogal n groot werk om dit te doen, al die ontwikkeling

A: kyk ons het gekurrikuleer vir die nuwe kwalifikasies voor die nuwe NQF wet uitgelkom het, en is by SAQA gelys as aanbiders vir die Auxiliary kursus en vir die Diploma en die graad en die nagraadse kursusse, maar is dit natuurlik nie in lyn met die nuwe ... so nou wag on seers vir die Raad om dit in lyn te trek soda tons weer kan ons s’n in lyn kan trek

F: ja, dit was nogal n frustrasie hierdie laaste paar jaar wat n mens nie kon regtig vordering maak nie, ne? En dan die fiet dat geod uitfaseer en dan nie uitfaseer nie, ja...

T: en die raad ka nook nie tot n besluit komnie... ja jy weet mos hoe gan dit daar. Is jy nie op een van daai kommittees nie?

F: weet jy ongelukkig nie. Ek wet ook nie of dit gelukkig of ongelukkig is nie, maar nee. Die week wat hulle nou daardie werksessie gehou het met die ontwikkeling moes ek n ander kursus bywoon wat al ses maande terug bespreek was. Want dit was baie kort kennisweerging.

A: praat jy van die een nou in Junie maand?

F: ja

A: Ja, ek het gehoor se maar die Dinsdag ek moet die volgende Donderdag vleid, so iets

F: Ja dis reg, dit was baie krot kennisweerging

A: dit was nieers n week kennisweerging nie

F: dit was nie, en hulle het gese j=hulle gaan nou weer n opvolg hou

A: maar ons het nog niks gehoor nie. Die paln was hulle gaan eers, hoe sale k se, hulle voorstel op die tafel gesit om te hoor of almal saamstem, nou gaan hulle die kwalifikasies in lyn trek. En dan gaan hulle, hulle beoog om in Oktober n raadshow te hou, na die verskillende provinsies te gaan

T: want ek dink daar was mense wat nou gesit het

A: ja hulle het gese hulle wil twee sessies in Junie hou en twee sessie in Julie ghou het, vir die groep eat dit in lyn trek. Want hulle het 4 groepe gehad
F: maar miskien is dit goed dat ek nie nou deel van daardie proses los nie. Baie dankie vir dit. Is dar enigiets anders wat julle oor wil uitbrei...enige spesifieke...selfs n biej=tjie humor=ristiese vooralle wat julle algehad het...uhm jy weet. Soos ek se om dit bietjie meer lewendig te maak?

T: ons het... ek weet nie of dit humoristies is nie, maar dit het al gebeur... ok...daar het al goed gebeur en aan het onaangename goed gebeur. As ek nou dink in terme van, in daai eerste klas teo ons begin het, het ons n man gehad. Hy was n portier gewees en uhm, die saal suster bel en se: jong jy sal met hierdie ou moet praat, want hierdie ou ruik verskriklik na sweet en hy kan nie so met pasiente werk nie. En ek is toe oor saal toe, die skool was toe mos in n huis oorkant die hospital. En ek kom toe by hom en ek se: kom Boeta, jy gaan nou saam met my terug skool toe. Nee wat is dit dan nou meneer. Nee ons gesels by dei skool, ons gaan nie nou hoier gesels nie. En on skom teo by die skool en eks e Luister Broer, jy ruik nou nie baie lekker nie. Jy ruik verskriklik nasweet en jy kan die so met pasiente werk nie. Hier is nou vir seep en n waslap en handdoek, jy gaan nou stort, want daar was n stort in die skool. En hy het toe nou gaan was en alles, en toe se ek en nous org jy dat jy vir jou onderarm geod koop, antiperspirant, dat jy nopu nie weer so ruik nie. Foeitog, maar nou kan ek verstaan. Hy klim nou soggens by die trein af en dan hardloop hy van Bellville stasie af, nou moed hy hardloop Louis Leiporlde toe, wat omtrent seker twee kilos is...

A: as dit nie meer is nie

T; ja as dit nie meer is nie. So, om betyds vir werk. So mens kan dit verstaan ne? Maar nooit weer khet ek n probleem met hom gehad nie. Nooit weer nie. Dit was die eerste en die laaste. Dan het ons n baie sad incident gehad... van ns tudent wat hier van SARon afgekom het. Weet jy die kind het aansoek gedoen en ons het haar die eerste keer nie gekeur nie, en uhm ek het, onthou ek het die onderhoud gedoen en ek... sy was vir my nou net nie reg nie om in die beroep in te kom nie. Syt weer aansoek gedoen en snaaks genoeg, sy beland toe weer by my vir die tweede onderhoud. En uh, ek het haar toe nou gekeur. Sy was negentien jaar oud, pragtige kind. Sarong is mos so n klein sendingdorpie hier op die weskus ieverster. Uhm in elk geval begin en sy is vreeslik opgewonde. Weet, dis nou georienteer en boeke uitgedeel en ag al die klas van geoters. En so is hulle nou die midag daar weg want hulle moet nous org dat hulle penne het en liniale en wharra wharra, en skryf papier en so aan. En uh, die volgende dag daag sy nie op nie. En ons kannie verstaan hoekom daag sy nie op nie. En so elfuur die oggend toe kry ek n oproep van haar Tannie af: sys dood. Wie jy toe's sy nou duer een van die taxis doodgy

F: ag sies tog!

T; Toes sy op slag dood

F: aid is tragies ne?

Uhm...ja dit was, dit was baie hartseer, want sy was toe nou reg, ek kon sien hoe sy gegroei het van die vorige onderhoud tot nou en sys reg. Sy sou n wonderlike nurse gemaak het. So, wat baie sad was.

Humoristiese goeters...kan nou nie sommer s ut die vuis uit dink nie...
F: en dan is daar natuurlik seker ook die mense wat julle nou, soos jy nou kan se wat julle van hier gevat het as n portier en hoe hulle opgegaan het

A: Ja as jy dink aan Peter Sauls, hy was n portier in teater en hy het op die ou end die post basic teater diploma by my gedoen.

F: ja en dis n sukessestorie wat mens graag wil vertel

T: en hy is in Australie op die oomblik

F: is dit? Werk hy vir julle?

T: nee, en n klein stoute ventjie, ek wil hom nt elke keer geknip het maar weet hy is so, op die psigometriese toetsing, hy is hiper intelligent maar lui...lui. jy moet hom druk ens toot en, jy weet dat hy moet vorentoe kom. Want jy weet hy het die potensiaal maar dant hy die goue hart. Die ouma het hy nou versorg en hys die broodwinner tot ouma dood is en, jy weet, daai klas van ding. Ja uhmm, n goeie kind, maar stout!

F: Is daar enige gemeenskaps projekte warby die skool of opleidingsinstansies betrokke is?

A: die trein,

T: dis net die Phelopepa trein, hy kom nou nie hierheen nie maar die ... en Curamed ...hulle neem deel aandaai projek

A; en dan het ons aan die begin van die jaar gehlp by Stellenbosch universiteit met n HIV projek, wat hulle 2 tot 3 dae, lyk my van die public getoets het en counselling, wat ons tudente gegee het om te gaan help met die bloed trek en toetse

F: ek sien

A: ek kan nie dink dat daar ander gemeenskaps projekte is nie

F: Enigeiets anders?

A: niks van my kant af nie

T: ek hoop on shet vir jou darem kon help.

F: ja baie dankie. Baie waardevolle inligting en soos ek se, soos ek dardeur werk en ek moontlik areas waar ek meer inligting nodig het ek weer met julle sal skakel.
APPENDIX O

Transkripsie van argief opname, Medi Clinic 8 Desember 2010

<table>
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<td>Application for recognition of a training school for enrolled nursing assistants. Date 7 March 1974.</td>
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<td>Geagte Mnr. van Schalkwyk</td>
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Hiermee my voltooide aansoek vorm om erkenning te kry as opleiding skool vir verpleeg assistente. Aangeheg vind u n lys van geregistreerde personeel lede van die hospitaal asook n bylae oor die sillabus wat gevolg sal word in die opleiding van die personeel. Soos u sal sien beoog ek om my teoretiese lesings te voltooi in drie maande en vir die res van die periode van 100 dae my toe te spits op die praktiese opleiding in die saal situasie self.

J Van Heerden
Matrone
Skrywe van SANC aan Louis Leipoldt Hospitaal
Datum 11 Maart 1974
Erkenning as 'n skool vir verpleegassistente:
Erkenning as 'n skool vir 'n blanke mans en vroue verpleegassistentes word verleen met ingang 1 Maart 1974.
Die volgende dokumente is ingesluit:
Regulasie vir die opleiding van verpleeg assistente
Die direkrief by die kursus
Regulasie vir die onderskeidende kentekens en uniforms vir verpleeg assistente en leerling verpleegsters
Aansoek vorms om inskrywing as leerling verpleeg assistente
Vorms ter staking van opleiding
Vorms as voltooiing van opleiding
Aansoek vorms om inskrywing as verpleegassistente om in gediend te word by voltooing van opleiding
Regulasies betreffende die gedrag van verpleegassistente wat onbetaamlike skandelike gedrag uit maak
Omsend brief 18 van 73 vrystelling van opleiding vir leerling verpleeg assistente
Omsendbrief 20 van 73.
Let asb. op daarop dat die Raad besluit dat hoogstens twintig dae van die opleidingstydperk van 100 dae aan voltydse teoretiese onderrig gewy mag word.

9 Desember 1977
Opleiding van en praktik van mans
Verwys na skrywe van 31/77
Geagte meneer
Na aanleiding van bogenoemde skrywe berig ons hiermee dat ons nie van plan is om mans tot enige kategorie van verpleging op te lei nie.
Datum stempel 13/12/77

Brief van SANC aan LL
Geagte Mej.
Opleiding van kleurlinge persone vir inskrywing as verpleegassistente
Merchelle Beerwinkel
Met verwysing na die aansoek van bogenoemde om inskrywing as n leerling verpleegassistent wens ek hiermee mee te deel dat die hospitaal nie goedgekeur is om kleurlinge op te lei nie. Goedkeuring word egter nou verleen vir die hospitaal om nie blankes sowel as blanke persone op te lei vir inskrywing as verpleegassistentte. Die inskrywing sertifikaat as n leerling verpleegassistent van bogenoemde persoon sal eersdaags aan u versend word.
DJ Minnie

12 Mei 1779.
Aansoek om goedkeuring as verpleegskool kursus om inskrywing as verpleeghulp
Hiermee word aansoek gedoen om bogenoemde. Aangeheg voorlegging, voorbeeld van kurrikulum, voorbeeld van toets, voorbeeld van memorandum, jaar program.
Mev. AH Neethling
VDB

26 Mei 1979.
Mev Neethling
Aansoek om goedkeuring van kurrikulum as verpleegskool vir inskrywing as verpleeghulp. Ontvangs van bogenoemde kurrikulum word erken. Ten einde die kurrikulum aan die raad voor te le vir oorweging word die volgende benodig: Skrifelike goedkeuring van u hoofkantoor vir die aanbieding van die kursus N volledige uiteensetting van u beskikbare onderrig hulpmiddels.

MMW FAURIE

6 Junie 1979 vanaf Medi Clinic
Aansoek om Louis Leipoldt Hospitaal Opleidingskool Verpleeghulp

Toestemming word verleen deur die bestuur van Medi Clinic Korporasie vir Louis Leipoldt hospitaal om as opleiding skool te funksioneer vir verpleeghulp opleiding. Louis Leipoldt Hospitaal is sentraal geleë en om hierdie opleiding vir die Wes Kaap streek Medi Clinic hospitale aan te bied. Die Medi Clinic groep van hospitale sal indien goedkeuring verleun word, twee opleiding skole vir verpleegopleiding bestuur, naamlik die Sandton Medi Clinic is reeds geregistreer as n opleidingskool.

Mej. A. Lambrechts

14 Oktober 1997
Application for the approval of the curriculum for the course leading to enrolment as a nursing auxiliary
The above mentioned application was discussed by the executive committee of the council at its meeting held on 21 Aug 1997. The curriculum is approved subject to a positive inspection of your clinical facilities. Wishing you well in future plans
Sincerely
Christine Dioke

11 November 1997
08h30
Reëlings vir akkreditasie besoek aan Louis Leipoldt Hospitaal program van hoe akkreditasie besoek gaan verloop.
11 November 1997
Inspeksie verslag van Louis Leipoldt Hospitaal
Privaat hospitaal Medi Clinic
Number of beds: 227
Bed Occupancy: 60 – 70%
Physical facilities and equipment are adequate for teaching/learning situation
Approved as school for training enrolled nursing auxiliary pupils.

9 December 1998
Application Louis Leipoldt Hospital Upgrade: Nurse auxiliary to enrolled nurse
Permission is granted by the management of Medi Clinic corporation for Louis Leipoldt Hospital training school to present the upgrading of nurse auxiliary to enrolled nurse. The LL is approved as a training school for the nurse auxiliary course.
Ms Lampbrechts

12 February 1999
Curriculum enrolled nurse
We hereby request approval of the curriculum of the above course. For Sandton Medi Clinic, Bloemfontein Hydromed and Louis Leipoldt Hospital to be approved as nursing schools to offer the course for enrolment as a nurse. We enclose the complete documentation as well letters of approval from the Medi Clinic corporation
Ms Lampbrechts

26 February 1999.
Accreditation/reaccreditation of the nursing school
Planned inspection of the hospital 11 June 1999
requirements and preparation for the inspection visit

19 May 1999
Accreditation Louis Leipoldt Nursing School S917
We acknowledge the program for the inspection of the above school on 11 June 1999.
Information attached:
Annexure A: Courses offered
Annexure B: Clinical facilities, name and details of course leaders, situational analysis
Annexure C: copy of a completed student record, test paper and memorandum, the orientation program and staff development program as well as examination policy.
Disciplinary matters will be available at the inspection.
Confirmation of the inspection time
Look forward to your visit.
Ms Lampbrecht.

12 April 1999.
Application Enrolled Nurse
Permission is granted by the management of Medi Clinic Corporation for Sandton Medi Clinic, Bloemfontein Hydromed and Louis Leipoldt hospitals to present the enrolled nurse course. These hospitals are all three approved training schools for the nurse auxiliary course.
22 June 1999 (from SANC)
Research project on distance learning bridging program
Our telephonic discussion refers. I am confirming that the dates 19 and 20 July 1999 were
accepted by you for the purpose of accommodating the implementation of the above
mentioned research design. I thank you in anticipation for availing your assistance by
making the necessary arrangements with the management, facilitators, mentors and
representatives of professional nurses and bridging course students of the Panorama
Clinic, Louis Leipoldt Hospital, Constantia berg Clinic, Paarl and Stellenbosch hospitals.

E Kaye-Peterson

22 June 1999 to SANC
Research Project: Technicon SA
There is arrangement, program and so on. 19 July, Panorama Clinic, Louis Leipoldt
Hospital, Constantia berg Clinic, Paarl and Stellenbosch hospitals.

17 August 1999
Sandton Medi Clinic Training Centre, Sandton Clinic. Morningside Clinic
Technicon SA

6 July 1999 confirmation of receipt of documents

21 July 1999.
Application for approval of the curriculum for enrolment as a nurse to present at the
following nursing schools: Sandton MC, Bloemfontein Hydromed, Louis Leipoldt
Application was discussed and approved by the Council on 13 and 14 July 1999.
E Monama

Inspection report 11 June 1999 LL
Number of beds 227
70% bed occupancy
Increased tutorial staff with one tutor. Both are responsible for theory and clinical
accompaniment. It was a positive inspection.

9 May 2001
Pietermaritzburg MC quality promotion visit
Historical back ground
Private hospital started functioning in 1989.
Financed by a group known as MEDICO. Taken over by MC in 1995. Obtained full
accreditation with Cohsasa (Council for health service accreditation of SA) in 1997. It was
an extended clinical facility for Grey hospital students that was terminated by KZN
department of Health
Bed capacity: 113
Occupancy 70 to 80%
Community served: Pietermaritzburg and neighbouring areas
Staff establishment: RN 75; EN 25; ENA 24; student nurse 1 (Bridging course for enrolled
nurse leading to registration as a general nurse) Doctors: no doctors employed by MC but
utilised by 156 specialist and general practitioners;
Pharmacist: 3
Staff turnover higher because of migration
Positive comments: good interpersonal relations amongst staff noticed. Therapeutic
environment is maintained. Vision and mission statement is in alignment with the outcome; adequate learning opportunities for student education and training. Realistic and attainable objectives in terms of available learning opportunities; orientation program in place in each unit; delegation of tasks documented and signed by various categories of nurses; specimens of nurses signatures attached to the drug book; enough staff to render quality nursing care; learning objectives reflect cognitive, psychomotor and affective domains which indicate professional and personal growth of the student.

Concerns:
No clinical accompaniment by tutors; transcription of medication by PN; Drs signatures on patient charts not legible; nursing care plan to be attended to; files not properly indexed

Recommendations:
To address the above mentioned concerns
To increase the number of students according to approved quota.

2 Augustus 2002
Aansoek naamsverandering van Louis Leipoldt Hospitaal (S917) as verpleegskool.
Hiermee word aansoek gedoen om dat die bogenoemde verpleegskool se naam verander word na Medi Clinic Learning Centre. Ek vertrou dat die SARV nommer van die skool dieselfde sal bly. Die pos adres is as volg:
Posbus 5228.
Tijgervallei. Elective House, Tweede vloer, Oakdale Straat 6, Bellville.
U samewerking in die verband word waardeer.

15 September 2003
Confirmation of South African Nursing Council examination mark results.
We hereby request your independent confirmation to the authenticity of the courses at the specific Medi Clinic Learning centres. Confirmation is requested by the HWSETA in order for Medi Clinic to receive learnership funding.

Final examination for enrolment as nurse: general nursing care R2175
Medi Clinic learning Centre
Nelspruit Medi Clinic Nursing School
Bloemfontein
Sandton Medi Clinic Learning Centre: March 2003 and May 2003.

29 August 2003
Letter SANC.
Louis Leipoldt Medi Clinic: extended clinical facility: RAU
The following medical practitioners admit patients to the above hospital:
General practitioners
General surgeons
Head and neck surgeons
Paediatricians
Paediatric cardio vascular surgeons
Gynaecologists
Physicians
Maxilla facial surgeon
Neuro surgeon
Ear, nose and throat surgeon
Orthopaedic surgeon
Plastic surgeon  
Neurologist  
Cardio thoracic surgeon  
Nuclear medicine.  
Radiologist  
Pathologist  
General practitioner’s emergency unit  
Multi disciplinary team all in private practice  
Bio-kinaesthetist  
Physiotherapist  
Audiologist  
Dietician  
Occupational Therapist  
Breast feeding consultant  
Pharmacist  
The number of students for the diploma operating nursing science to be placed at the hospital will not exceed 2 students. The hospital is also approved as an extended facility of Technicon SA for the certificate in operating nursing science. Number of students 3  
Clinical facilitator is Mrs, A van Zyl. Qualifications: B Cur Nursing; Diploma Operating Nursing Science and Diploma Nursing Education.

Miss Lampbrechts  
Letter dated 7 April 2004  
To SANC  
Re Confirmation of extended clinical facilities of the Medi Clinic nursing schools  
Please find enclosed the updated situational analysis applicable to the listed nursing schools.  
Medi Clinic corporation has acquired a number of hospital groups and in the process the names of the hospitals have changed.

**Medi Clinic Learning Centre S 917**  
Courses: enrolment as nursing auxiliary R2176  
Enrolment as a nurse R2175  
Medi Clinic Hospitals  
Louis Leipoldt  
Constantiaberg  
Cape town Medi Clinic  
Paarl  
Panorama  
Durbanville  
Milnerton  
Stellenbosch  
Hermanus  
George  
Vergelegen  
Worcester  
Pietermaritzburg

**Nursing School Bloemfontein: S1495**  
Courses: enrolment as nursing auxiliary R2176  
Enrolment as a nurse R2175  
Hospitals:  
Bloemfontein Medi Clinic
Kimberley
Welkom
Hoogland (Bethlehem)
Potchefstroom
Pietermaritzburg

**Sandton Learning Centre S995**
Courses: enrolment as nursing auxiliary R2176
Enrolment as a nurse R2175
Medi Clinic Sandton
Morningside Medi Clinic
Highveld (Trichardt)
Vereeniging
Potchefstroom
Brits

**Limpopo learning centre S1149 Pietersburg**
Courses: enrolment as nursing auxiliary R2176
Enrolment as a nurse R2175
Limpopo Medi Clinic

**Nelspruit Nursing school S 15478**
Courses: enrolment as nursing auxiliary R2176
Enrolment as a nurse R2175
Nelspruit Medi Clinic
Highveld Medi Clinic

23 April 2004
NEI update
Your request dated 23 March 2004 refers. Please find enclosed the details that you have
requested. The NEI which resort under the Medi Clinic group of hospitals are submitted to
you as one corporate document.

Medi Clinic Learning Centre S91 7
Nursing School Bloemfontein S 1495
Sandton Learning Centre S995
Limpopo Learning Centre S1449
Nelspruit Nursing School S1478
Curamed Learning Centre S220

May we request that you take note of the following: The person in charge of the formal
training, NV Paverd, has elected to retire. Her replacement is Ms A Stroh. The name of the
Bloemfontein Nursing school is listed at the SANC as the nursing School Bloemfontein.
Please change this to Bloemfontein Learning centre. I have indicated in the document that
our numbers for students for approval are inadequate and that we have sufficient clinical
facilities with the associated bed occupancies to accommodate more students. Please note
that our learners do not pay for training and that they are all employed in permanent
positions.

Attached are copies of the documents already in your possession of the extended clinical
facilities and the updated situational analysis for each.

Ms Lampbrechts

Medi Clinic learning centre S917
Situational analysis for all the clinical facilities
Summary of the EDCO committee July 2004
Medi Clinic limited has 6 learning centres
Each Learning Centre has own Clinical Facilitator
There is a summary of the placements
Approved by EDCO

Letter dated 16 August 2004 to MC learning centre
Application to enrolment of pupils who are training in the enrolled nurses program
You letter dated 19 July 2004 refers for the attached names of pupils. It is noted with concern that your nursing education institution has submitted forms for pupil registration 2 months after the candidates have commenced training for the nursing program leading to registration as an enrolled nurse R2175. This is a contravention of regulations and we
advise that this error be avoided in future. Permission is granted for the pupils to be registered for the R2175, enrolled nurse programs. The date of commencement of training reflected on the application forms will be the date on the Council database.

Kgongwana

13 May 2005
Letter to SANC
The role of the nurse at laparoscopic endoscopic procedures
We would like to use this opportunity to obtain clarity from the council concerning a perplexing issue. Over recent years we have found that several of our nursing staff members have been placed under pressure by surgeons when conducting procedures such as gastroscopies, colonoscopies and certain laparoscopic procedures. In this regard the nursing staff has been requested by the surgeon to either advance or retract the scope. We would be most grateful if the council could provide us with its opinion on the role of the nurse in such procedure and extend and or limits on her scope of practice in this regard. We wish to thank you in advance to you kind attention to this query.
Clara Finley

Response from SANC not dated
The role of the nurse
Referred to your letter dated 13 may 2005
The current scope of practice for the registered nurse is broad and makes allowance for extension under certain conditions the policy with regards to the nurse acting as an assistant during surgical operations states that it does not fall within the scope of practice of the nurse to assist during surgical procedures. If another person is not available to assist the surgeon, the nurse may act as assistant provided that he or she has had the necessary training and is competent to perform such functions, he or she can produce evidence of such training and the necessary infra structure is available at the institution concerned to perform such surgery; he or she may not take simultaneous responsibility for the table as well as for assisting the surgeon. The above policy can be applied to laparoscopic endoscopic procedures.
Trusting that this Council practice policy and guidelines will assist in resolving your problem and clarifying councils viewpoints
Grace Ramadi 35:57

12may 2005
Letter from SANC
Application for registration of students/pupils for the following programs: Enrolment as a Nursing Auxiliary; Enrolment as a nurse/ Bridging course
Receipt of your application dated 15 March 2005 and 22 March 2005 respectively for regulation 2175 first and second year is herewith acknowledged. In order for process the application the council request that the schools submit the list for each facility per program. Council is aware that the school was previously not provided with numbers per intake for all the programs. This is to ensure that the data base is updated and also to ensure that the quality of nurse education and training is not compromised.

Mrs O James.

Letter from MC
Containing information
Panorama Clinic:
First year: 5(see photo)

Letter from MC
2 June 2005
Satellite campuses at Medi Clinic
We have always placed learners at Pietermaritzburg and Welkom Medi Clinic as approved by SANC for the course R2175 to enrol as a nurse. Recently we have appointed additional tutors in these hospitals and established class room facilities fully equipped. Demonstration areas previously existed. We would like confirmation from the council that it is in order to utilise these facilities as satellite campuses of the Bloemfontein Learning Centre registration under the council S1495.

A Stroh

23 June 2005
Utilisation of unapproved satellite campuses as learning centres
Your letter dated 2 June 2005 received on 13 June 2005 refers. According to our records and submitted information on the update form of 2004 your company has got the following learning centres:
Bloemfontein
Curamed
Limpopo
Nelspruit
Sandton

Kindly be informed that any teaching and learning that takes place at an unapproved learning centre is not recognised by the council.
Ms Sibiya

Letter 8 July 2005
To Ms Sibiya
We acknowledge receipt of you letter dated 23 June 2005. Welkom Medi Clinic is an approved extended clinical facility of Bloemfontein learning centre. Pietermaritzburg Medi Clinic is an approved extended clinical facility of Bloemfontein learning centre. We would like these two extended clinical facilities to be accredited as satellite campuses of the Bloemfontein learning centre. Situational analysis attached. The rationale for this request is the vast distances which the students have to travel to attend lectures. Would you be so kind as to inform me of any further information required in this regard to the matter.

16 August 2005
Reply from Council
Of sub campus Program not stated.
Receipt of your letter dated 14 July 2005
The following accompanying situational analysis is herewith acknowledged however the office would like to apologise for the delayed response:
Welkom Medi Clinic and Pietermaritzburg.

Kindly be informed that Council has put a moratorium on approval of all new private NEI, sub campuses and programs. The above mentioned situational analyses are therefore returned to you.
Request from Medi Clinic to Council
Wrt institution’s courses accredited for HWSETA purposes, accreditation number of each institution was requested.
UNISA: for Bridging course
University or Pretoria: Diploma in Critical care/Diploma in Operating Theatre
RAU: Diploma in Critical care/Diploma in Operating Theatre
University of the Free State: Diploma in Critical care/Diploma in Operating Theatre
University of Stellenbosch: Diploma in Critical care

Response from Council
UNISA: S623 (UNISA merged with Technicon SA- S1034)
University or Pretoria: S212
RAU: S956
University of the Free State: S103
University of Stellenbosch: S398

27 October 2005
Bridging for registered nurses
I would like to find out about the possibility of extending the approval of the above course to all the Medi Clinic learning centres. The Curamed learning centre (S220) is approved for the bridging course to registered nurse and we would like to present this course in all our learning centres. The other Medi Clinic learning centres are Bloemfontein, Limpopo, Nelspruit and Sandton. All the Medi Clinic learning centres are approved for the course for enrolment as a nurse. They have full time tutors and assessors. The curriculum is standardised throughout the company. Currently we bridge enrolled nurses to registered nurse by utilising the UNISA bridging to RN course. Unfortunately we have been informed that UNISA will not be offering the course in 2006. This would mean that we have a backlog in our plan for the training of nurses. The following clinical facilities are currently approved for the UNISA bridging to RN: Bloemfontein; Brits; Cape Town; Constantiaberg; Durbanville; George; Hoërveled; Hoogland; Kimberley; Kloof; Limpopo; Louis Leipoldt; Medforum; Medi Clinic Heart Hospital; Milnerton; Morningside; Muelmed; Nelspruit; New castle; Paarl; Panorama; Pietermaritzburg; Potchefstroom; Sandton; Stellenbosch; Vereeniging; Vergelegen; Welkom; Worcester. We are also awaiting confirmation for approval of the Hermanus Medi Clinic. In order to address the nursing shortage crisis which faces us in SA Medi Clinic would like to contribute to training as many nurses as possible as quickly as possible. We have the facilities for theoretical contact as well as clinical experience as per NEI details submitted on 23 April 2004. Each of our hospitals has at least one and in most cases 2 RN in clinical training posts who are able to provide clinical support to the potential learners. If the SANC would agree to us to utilise the curriculum of the Curamed learning centre, in all our learning centres and placing the students in the already approved clinical facilities, throughout the country we would make a major contribution to the training of RNs. Attached please find a letter of approval of the Curamed school for the bridging course to registration as a general nurse.
Thank you for your consideration in this regard to our request. I await your reply.
A Stroh

18 June 2005
To Curamed Nursing school
Accreditation visit regarding the application for the approval of the nursing school.
Program: Enrolled Nursing Auxiliary, Enrolment as a nurse; Bridging Course.
Above-mentioned report was discussed on 27 May 2003.
The nursing school must not commence with the Bridging course leading to registration as a general nurse until the staff shortage has been addressed and evidence submitted to Council. The following programs have been approved:
The course leading to enrolment as a nursing auxiliary; Enrolled nurse: 2 intakes per year of 20 students each. Bridging Course for enrolled nurses leading to registration as a general nurse: 2 intakes of 20 each per year.
B Kgawane

10 February 2006
Letter to Mrs H Subedar
Arrangements for examination in Chennai, India.
Following a discussion on our HASA meeting on 17 August 2005 we are proceeding with a foreign recruitment initiative. We have attained a corporate permit for 60 RN and will be recruiting in Chennai, India, next week. We estimate that there will be approximately 60 candidates sitting the examination on 28 July 2006. Please could we receive clarity on the administrative aspects of this process? We realise that this is a substantial undertaking and would like to make the process run as smoothly for all role players as possible. Please could you provide guidance as to how we can facilitate the writing of the examinations in Chennai, in particular:
What advance plans would be made in terms of invigilation, e.g. venue. I seem to remember that the embassy was mentioned.
What advance plans need to be made in terms of moving the examination papers both pre and post writing?
Would you use an invigilator form India or would we fly and an invigilator from SA across?
How is travel, accommodation and cost for the invigilator organised? As discussed at the HASA meeting, Medi Clinic will pick up the cost.
What other aspects of this initiative would we need to take into consideration?
Thank you for your consideration of this matter
Estelle Jordaan.

20 March 2006
Response form SANC
Examination of foreign nurses out of SA
Receipt of your letter dated 10 February 2006 in respect of the above matter is herewith acknowledged.
THE SANC currently has not taken any decision on this matter. All examinations for foreign nurses are still conducted in identified centres in SA. In the bid support, The NDOH, in its exercise to recruit foreign professionals into the country, this matter can be discussed once the 60 nurses referred to in your letter have undergone the normal process of registration of foreign nurses. Kindly note that the examination is one of the last phases of this process, once an evaluation of the application s has been done and there are support letters of employment from the DoH for each foreign nurse. It is hoped that this explanation is understood.
S Mchunu
2 July 1987
To Registrar
Registrasie aansoek vir goedkeuring as opleiding skool vir die diploma in operasie saal verpleegkunde
Hiermee doen bogenoemde hospitaal aansoek vir goedkeuring vir die as opleiding skool vir die diploma in operasiesaal verpleegkunde. Daar word beoog om operasiesaal verpleegkundiges voor te berei om te voldoen aan die filosofie van die SAVR.
Brieue aan geheg,
Program beskikbaar. Sal op aanvraag voorsien word.
Verpleegdiens bestuur
Personeel administrasie
Indiensopleiding
Griewe prosedure
Dissiplinêre optrede
Professionalontwikkeling
Ons versoek u vriendelik om hierdie aansoek goedgunstiglik te oorweeg.
Die Uwe
A Lampbrechts

Memoranduum insake die instelling
Uiteensetting van kurrikulum en situasie analise

Brief van SANC aan Panorama Hospitaal
Gedateer 21 Julie 1987
Aansoek van Panorama MC om goedkeuring as 'n opleidingskool vir die kursus vir die diploma in operasiesaal verpleegkunde, Blankes en nie blankes.
Met verwysing na u telegram gedateer 23 Junie19 87, moet ek u meedeel dat bogenoemde aansoek te laat ontvang was om op die agenda van die Raad se uitvoerende komitee vergadering wat in Julie gehou word geplaas te word. U aansoek sal op die agenda van die vergadering wat in Oktober 1987 gehou word geplaas word. Die verpleegskool is onderworpe aan n inspeksie voordat goedkeuring as n opleiding skool vir die genoemde kursus verleen sal word. Sodra n datum vir die inspeksie bepaal is sal u daaroor ingelig word.
A Wethagen

31 Julie 1987
Aansoek van Panorama Medi Clinic om goedkeuring as n opleiding skool vir die opleiding van operasiesaal verpleegkundiges, Blankes en nie blankes
Met verwysing na my brief van 21 Julie 1987, moet ek u meedeel dat u inrigting op die oggend van 25 Augustus deur Prof MC van Huyssteen geïnspekteer sal word.
Die datum van die inspeksie in onderhewig aan verandering op kort kennisgewing.
Erken asseblief ontvangs
A Welthagen

Inspeksie verslag: Panorama Medi Clinic
Die voorbereiding van die aanbieding van die kursus in operasiesaal verpleging was uiterlik deeglik. Die hospitaal het Mej Micau n ervare
bestuurder ingekry om die beplanning te doen. Sy sal ook vir 3 dae per week beskikbaar wees vir kliniese onderrig en begeleiding. Die hospitaal het n ooreenkoms met die Kaapse Provinsiale administrasie Hospitaal dienste departement aangegaan om studente vir die teoretiese deel van die kursus by Tygerberg hospitaal in te skakel. N uitstekende in diens opleidings program is reeds by die hospitaal ingestel vir alle operasie saal personeel. Daar word beoog om vir eie behoeftes en ook die behoeftes van ander hospitale in die Medi Clinic groep op te lei, beveel aan dat die opleidings program goed gekeur word.
Die hospitaal is ten volle ingelig oor moontlike veranderinge in na basiese opleidings programme en sien uit daar na om daarby in te val. Die hospitaal wil met opleiding in 1988 begin. En ek beveel so aan asb.
Inspexie verslag aangeheg.

Brief van SARV
17 November 1987
Goedkeuring van Panorama Medi Clinic as n opleidingskool vir die kursus vir die diploma in operasiesaal verpleegkunde: Blankes en nie blankes
Met verwysing na u brief van 2 Julie 1987 moet ek u meedeel dat bovenoemde aansoek deur die Raad goedgekeur is. Herinner daaraan dat die goedkeuring van die beheerliggaam van Tygerberg ingedien moet word om te bevestig dat die studente van Panorama Kliniek van die fasiliteite in Tygerberg gebruik mag maak.

A Welthagen.

Brief van provinsiale administrasie
Datum moeilik leesbaar. 21 12 87
Na basiese opleiding in operasiesaal verpleegkunde
U skrywe van 23 Maart 1987 het die departement met genoë kennis geneem van u beoogde betrokkenheid met betrekking tot die na basiese opleiding van u eie verpleeg personeel. Positiewe gesindheid in hierdie verband is bemoedigend en teen hierdie agtergrond sal hierdie departement u met graagte behulpsaam wees waar moontlik. Gerieflikheidshalwe word u spesifieke vrae hieronder in dieselfde volgorde behandel:

Dekbrief van Panorama

Brief van Panorama
6 Januarie 1988
Aangeheg die skrywe van die departement van hospitaal dienste waarin goedkeuring verleen word om gebruik te maak van die kollege fasiliteite van Groote Schuur Hospitaal vir Engelsprekende studente. Graag wil ek u bedank vir u samewerking en u personeel’n voorspoedige 1988 toewens.

Brief van SARV 18 Januarie 1990
Die verpleegskool sal om 08h30 op 23 Januarie 1990 deur Mej. Bierman, senior professionele beampte van die Raad, geïnspekteer word. U aandag word daarop gevestig dat die datum van die inspeksie onderhewig is aan verandering op krot kennisgewing.
Inspeksie verslag. 18 1990
Panorama Kliniek is een van die Medi Clinic groep hospitale en is in Parow geleë. Die kliniek is goedgekeur vir die kursus diploma in operasieaal verpleegkunde op die aanbeveling van Prof MC van Huyssteen. Wat die vorige inspeksie gedoen het. Die teorie van die kursus word deur Otto du Plessis kollege van verpleging aangebied in samewerking met panorama hospitaal. Die hospitaal lei ook op vir ander Hospitale in die groep, bv. Mitchells Plein. Die program van Otto Du Plessis word later in die jaar geevalueer as deel van die Otto Du Plessis kollege besoek.

Kliniese fasilitiete:
Die persoon in bevel van die kliniese fasilitiete en praktyk is mej. Micau en haar uitstekende program getuig van haar jarelange ondervinding in praktyk en onderrig ervaring.
My bevindinge stem in alle aspekte ooreen met die bevindinge van die verslag van die vorige inspeksie. Die teater word bedryf met dieselfde positiewe houding en die dokters en personeel is nou betrokke by die opleiding. Duidelike riglyne is beskikbaar en getuig van deeglike beplanning. Die aantal student is klein genoeg om individuele aanbidding te kry. Daar is n uitstekende biblioteek en die dokters maak n waardevolle bydrae in die vorm van joernale en boeke en is aktief betrokke by die aanbieding van sekere lesings.

Verpleegsorg:
Alhoewel n wetenskaplike benadering vir verpleegsorg nie heeltemal in di verpleegrekord voorkom nie, word daaraan gewerk en duidelike riglyne word weerspieël in die sale se rekords. Personeel word streng gekeur voor aanstelling en daar is geen vakatures nie.
Beleid: daar is n geskrewe prosedure en beleidshandleidings beskikbaar. Alle aspekte word in detail deur middel van kriteria daargestel en is n uitstekende onderrighulpmedium.

Aanbeveling:
Daar word aanbeveel dat die matrone en die persoon in bevel van die kursus gelukgewens word met die daarstelling en instandhouding van n uitstekende program en kliniese praktyk.

7 Augustus 1990
Aan die Registrateur
Kursus in Operasie saal verpleegkunde: afneem van finale eksamen namens SARV:
Magtiging word gevra dat die eind eksamen in operasie saal verpleegkunde deur die Otto Du Plessis kollege afgeneem kan word. Aangeheg is die skrywe ontvang van Otto Du Plessis verplegings kollege.
Die brief aangeheg;
Kursus in operasiesaal verpleegkunde: afneem van finale eksamen deur die kollege namens die SARV. Datum 20 Julie 1990.
Kennis word hiermee gegee dat toestemming deur die SARV aan die kollege verleen is om al die na basiese kursesse en dus ook kursus in operasiesaal verpleegkunde se finale eksamen namens die SARV af te neem. Aangesien Panorama Kliniek by die SARV as opleidingskool vir operasiesaal verpleegkunde geregistreer is, sal die studente wat daar ingeskryf is steeds n SARV eksamen moet skryf. Indien die instansie sou verkies om by die kollege se eksamen stelsel in te skakel het die kollege geen beswaar indien aansoek
by die SARV ingedien word vir sodanige inskakeling nie.

Brief aan Panorama: 3/10/90
Met verwysing na u skrywe van Augustus 1990 wens ek u mee te deel dat waar hierdie raad toestemming verleen aan n skool om eksamens namens hierdie raad af te neem, is sodanige goedkeuring slegs van toepassing op die studente van die betrokke skool. Aangesien die persone wat die kursus in operasiesaal verpleegkunde volg by die Raad as student van die Panorama Hospitaal geregistreer is en nie as studente van die Otto Du Plessis kollege nie, moet hulle gevolglik die raad se eksamen afneem.

30 April 1992 van die raad
Kommer word uitgespreek met betrekking tot die merkbare verskil tussen die punte wat deur sekere van die kandidate behaal is ten opsigte van die praktiese gedeelte en teoretiese gedeelte van die eksamen.
Die uwe
AC Baird

22 Februarie 1994
Opvolg 11 Augustus 1994
Hiermee word bevestig dat die inspeksie wat beplan is uitgestel is. Maar die inligting wat aangevra is, moet asseblief ingehandig word.

Dokumente 26 September 1994 aan Raad voorsien. Aanhangsels:
Kriteria vir keuring van personeel
Induksie/oriëntering vir onderrig personeel
Jaar program
Dosent se rooster
Filosofie
Evaluerings instrument
Evaluasie van studente
Onderteken deur mej. Lampbrechts

26 Mei 1995
Affiliasie Otto Du Plessis Verplegingskollege en Panorama Medi Clinic:
Diploma operasie saal verpleegkunde
Toestemming word verleen deur die bestuur van Medi Clinic Corporation vir die gebruik van panorama Medi Clinic as kliniese fasiliteit vir die opleiding van na basiese studente en mediese en sjirurgiese verpleegkunde met kursus rigting operasie saal verpleegkunde. Panorama Medi Clinic is tans n goedgekeurde fasiliteit vir bogenoemde kursus en wens hierdie status te kanselleer ter goedkeuring van gemelde aansoek.
U toestemming vir die uitbreiding van die ooreenkoms met Otto Du Plessis Kollege word afgewag.

A Lampbrechts

8 Augustus 1995
Affiliasie met Otto du Plessis Verpleegskollege en Panorama Medi Clinic vir Diploma in operasiesaal verpleegkunde

Die aansoek om die kansellasie van die status van panorama Medi Clinic as verpleegskool asook die aansoek van Otto Du Plessis Verpleegskool vir uitbreiding van kliniese fasiliteite na Panorama Medi Clinic is deur die uitvoerende Komitee van die Raad goedgekeur.

Mej. Faurie
24 Oktober 1994

Affiliasie met die Universiteit Stellenbosch Departement Verpleegkunde en Panorama Medi Clinic: voorgraadse B Cur opleiding

Toestemming word verleen deur die bestuur van Medi Clinic Corporation vir die gebruik van panorama Medi Clinic as kliniese fasiliteit vir die opleiding van voorgraadse B Cur studente. Panorama Medi Clinic is reeds goedgekeur vir die Otto Du Plessis Kollege vir die na basiese kursus in kritieke sorg en operasiesaal verpleegkunde. Die goedkeuring van die uitbreiding van die ooreenkoms met Stellenbosch Universiteit word aangeheg.

Brief van US.

Panorama Hospitaal as fasiliteit vir B Cur Studente
Graag vra ons goedkeuring vir Bogenoemde.

Situasie analise onderneem en Panorama hospitaal is geskik gevind vir B Cur studente vir benutting van praktiese leergeleenthede ten einde praktiese doelstellinge te bereik vir die algemene verpleegkunde.

Die volgende inligting ter motivering van die versoek:
400 bed multi dissiplinêre hospitaal

Kontak persone

4 Desember 1997
Hydromed Bloemfontein
Inspection report 6 August 1997

The inspection report was discussed by the executive committee of the SANC during its meeting. A copy of the report is attached for your information. I wish to thank you for your cooperation as well as the hospitality.

Ms Van Loggerenberg
11 May 1999

Notification of an inspection of Medi City Clinic on 7 June 1999. Two professional advisors of the council will be visiting. Please submit information requested.

Mrs E Kaye-Peterson
Dieselfde brief aan panorama clinic.

Hydromed. 21 July 1999. Application for approval of the curriculum for the enrolment as a nurse to be present at the following nursing schools:
Sandton Medi Clinic
<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
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</table>
| 21 July 1999 | Dear Ms Lampbrechts
Please find copies of letters of approval                                                                                                                                                                 |
|              | From Nehawu shop steward committee: Vergelegen Medi Clinic
Signed by Anita Vickerey
Urgent attention to nursing education committee

Dear sir/madam

We have a copy from SANC for the criteria for the transformation of nursing education and training in SA. Several enrolled nurses with a standard 8 certificate with 20 years of experience applied at our institution for the bridging course. Our employer Medi Clinic Vergelegen does not want to accept these candidates as they require matric certificate. In their opinion they do not have to abide by the criteria that were set down by nursing council and say that they are not going to waste their time and money to train and educate enrolled nurse with St 8. Therefore it is questionable to us how Medi Clinic could be awarded the opportunity to register as a training school if they do not want to change or transform.

Taking into consideration all the new acts that have been legislated, e.g. SAQF Skills Development Act, Employment Equity Act, Sector Education authority Act as well as the minimum requirements laid down by Council, we the union of Nehawu, declare a dispute with our employer with our employer, Medi Clinic Vergelegen. And refer the matter to the CCMA as we feel that they are discriminating against those enrolled nurses who have St8.

Your response would be highly appreciated.

A Vickerey.  

20 January 2002

Receipt of your faxed letter is herewith acknowledged. You letter will be submitted to the education committee.

25 February 2002

Selection Criteria for the bridging course: enrolled nurse to RN

MC in cooperation with Technicon SA and SANC has been involved in a pilot project to establish a distance based bridging course since January 1998. Because this was a pilot project subject to the Nursing Council approval, 26 candidates were selected from enrolled nurses, situated with hospitals with good training infrastructure and who held a Grade 12 qualification. Selection was also subject to the successful completion of a pre study program. The pilot project was approved by SANC in Oct 1999.

Current Selection

Invitations were extended to our hospitals on September who have at least one year experience as enrolled nurse hold a Senior certificate and had at
least one year’s experience in a Medi Clinic Hospital. Applications must be accompanied by a work evaluation by the unit manager; copy of a senior certificate; copy of a receipt of current SANC registration. More than 180 applications were received from enrolled nurses who hold a Grade 12 certificate. Applications from enrolled nurses who hold a Grade 10 certificate were also included for consideration. All the applicants, those with grade 10 and grade 12 qualifications who complete a pre study program, which commences on 1 February 2000. Those candidates who are successful in the pre study program will be selected for the bridging course that commence on 1 June 2000. As the company reserves the position for each student the number of bridging course students that can be accommodated in any academic period will be determined by the company’s manpower needs, its ability to fund training and the availability of training resources. At present the company employs 1060 EN at the 21 hospitals where the training is offered.

The cost of the bridging course on a distance learning basis amounts to R29 000 per student over the two year period. This excludes the cost of infrastructure, learning material and sessions by tutors and mentors. The planned investment on unproductive time alone for 2000/2001 financial year stands at R4.9 million. All costs are borne by the company which mean that the company carries a full risk for the training and development outcome.

Medi Clinic Limited training and development has a responsibility towards itself and the prospective students to ensure as respectable return on training investment and fair and equitable selections practices within regulatory and other guidelines.

We are proud of what we have achieved in the field of formal nursing training over the past 12 years and will continue to meet the manpower needs of the company and the development needs of individuals and teams within the limits of affordability and in the interest of safe patient care. Although EN with a grade 10 qualification were accepted to do the pre study program, we accept that Technicon SA as the training school will still have to apply to the SANC for exemption from the required Grade 12 qualification.

We would appreciate a formal notification by the SANC on the current approach to selection onto the bridging course and the position of selection criteria in general.

S Lampbrechts

14 April 2000

Ingeskrewe verpleegkundiges tafel neem in n helpie
Ek verneem graag wat die standpunt van die raad in geval van n klinies bevoegde IV wat vir jare lank reeds n tafel neem en skrop vir prosedures wat nie binne die bestek van praktyk val nie. Onder watter omstandighede sou sy wel kan voortgaan met hierdie praktyk om dit vir haarself en haar werk gewer wettig en veilig te maak sonder om pasiënt sorg in te boet?

18 April 2000

Bestek van praktyk van IV

Die bestek van praktyk van die IV sluit handelinge en prosedures in wat deel vorm van die verpleegregimne wat deur die geregistreerde verpleegkundige
beplan en geïnisieer word of geregistreerde vroedvrou en uitgevoer word onder haar of sy direkte toesig. Die IV moet geevalueer word om te bepaal of hy/sy bevoeg is om te skrop en die tafel te neem in die operasie saal. Dit moet egter in gedagte gehou word dat die uitvoering van die prosedure nie in isolasie gedoen kan word nie. Die beraming van die pasiënt en die beplanning van die verpleegregimen wat die verantwoordelikheid van die RN is vorm deel van die prosedure. Die IV moet egter ingedagte hou dat wanneer hy n taak aanvaar wat aan hom gedelegeer is hy verantwoordelik vir die taak en aanspreeklik gehou word.

Ek vertrou dat die inligting u navrae beantwoord

M van Loggerrenberg

31 Mei 2000
Ms A Vickerey Nehawu Shop Stewards
Admission requirements to the bridging course
Your faxed letter dated 12 January 2000 and our response dated 20 January refers. Council, at a meeting held on 16 and 17 May 2000 has adopted the following recommendations:
That a letter be sent to the Medi Clinic Nehawu Shop stewards committee to inform them that the councils role is to prescribe minimum education standards to schools. Further to advice the committee to make use of student/staff representatives to address issues of inequality and lack of transparency because issues of that nature do not fall under the jurisdiction of the council.

M van Loggerenberg

Letter to MC
31 May 2000
Ms Lampbrecht
Selection Criteria
Your fax dated 25 February 2000 and our response dated 28 February 2000 refers. At the council meeting of 16 and 17 May 2000 the following recommendations were adopted:
That selection criteria do not discriminate against the Enrolled categories but that mechanism be put in place to permit the admission of a selected number that do not meet your criteria so as to accommodate the principles of inclusivity and accessibility for such candidates.

M van Loggerenberg.

Letter from MC
Submission of qualifications in SAQA format
Please find enclosed hereby the curricula for enrolment as a nurse auxiliary and enrolment as a nurse in required format as requested by SANC in Circular 5 of 2000 dated 11/4/2000

A Lampbrechts

26 February 2000
Letter to SANC
Medi Clinic Limited has SANC approval for 5 NEIS for the course leading to
enrolment as nursing auxiliary and enrolment as a nurse. These courses have been accredited by the SANC. These courses are in the process of being registered as learnerships with SAQA. Our understanding is that NEI at Louis Leipoldt, Pietersburg, Bloemfontein and Sandton and Nelspruit Medi Clinic can act as SANC accredited training providers and can enter into learnership agreements with learners. We would like to clarify the following:
Will SANC as the ETQA issue a certificate of accreditation for each NEI stated above to confirm this?
Must NEI stated above register as training providers with DoE for these courses and will SANC assist us if we have to do so?
If our tutors are trained as assessors and moderators by the HWSETA, will the SANC as ETQA register our tutors as assessors for these learnerships? We would appreciate a reply from you as soon as possible.

A Lampbrechts

4 March 2002
Registration of assessors and training providers for learnerships
Acknowledge the receipt of your letter in this regard. Council is in the process of establishing a memorandum of understanding with HWSETA and these are some of the issues that need to be unpacked. ETQA task team of the education committee will be meeting with the HWSTA on 6 March to look at the issue of learnerships. If this is finalised it will be presented to Council on 12 and 13 March 2002.
Grace Ramadi

9 July 2002
Accreditation/reaccreditation by SANC of the Potchefstroom Medi Clinic
28 August 2002 for the Potchefstroom University for CHE
Specify required Information to be submitted.

22 November 2002
Appointment of moderation committee members for examinations conducted by SANC
You are kindly requested to submit to the office of the council the name of a person to serve on the committee for the final bridging exam.

Ms Pavert
3 April 2004
Brits Medi Clinic and Kloof Hospital
Extended clinical facilities
Course to enrol as a nurse: Curamed Nursing School
We hereby request permission for Brits Medi Clinic and Kloof Hospital to become extended clinical facilities of the Curamed School. We enclose a letter of permission from the Medi Clinic Corporation head office as well as situational analyses of Brits Medi Clinic and Kloof Hospital.

Curamed learning Centre
The SANC Education Committee was notified in 2003 of an amalgamation of Curamed, Afrox and Medi Clinic. Due to this a restructuring process of the area was necessary. This resulted in Brits now becoming part of the
Curamed/Tshwane region. Brits have always been sending their students to Sandton learning Centre. This need changing to Curamed from now on. It is just a paper exercise and no inspection of the facility needs to be done. Mrs James and Ledwaba have done a clinical inspection at Kloof as clinical facility in February 2004. Kloof is not having any basic students at the moment and we wish to start placing PEN I, II and OB students there as soon as possible. These outcomes based curriculums were approved by SANC in 2002. Copies are in our files and can be resend if necessary.

Among the groups currently in training are former Healthnicon and NTA students who can no longer be accommodated in those institutions for reasons beyond their control. Curamed has taken some of those students on in order to assist them to finish their training. The Curamed learning centre has in August 2002 been approved for two intakes of 20 students per intake for R2175, R2176 and R683. These 20 students per intake are being spread between the following hospitals:

- Muelmed: 8
- Medforum: 8
- Pretoria Gynae: 2
- Pretoria Heart: 2

Total: 20

Allocation per intake will now change to the following:

- Kloof: 8
- Brits: 2
- Muelmed: 8
- Medforum: 8
- Pretoria Gynae: 2
- Pretoria Heart: 2

Total: 30

Curamed Learning Centre wishes SANC to approve of the following:

- Extended facilities R2175; R2176; R683 at Kloof and Brits Medi Clinic
- Increase in number from 2 intakes of 20 each to 2 intakes of 30 students each per year.

Attached please find for your urgent attention and approval formal application for the extended clinical facilities for the Curamed Learning Centre, namely Kloof and Brits Hospital.

We are aware of the moratorium on new schools and facilities. In the light of the urgent need of trained nurses in the country we do however request your urgent favourable consideration for this application. Curamed is an accredited and credible nursing Education institution.

Kinna Erasmus
Annelie Meiring

3 April 2004
Affiliation Curamed Nursing School
Permission is granted by the management of Medi Clinic Corporation for Kloof and Brits Medi Clinic as clinical facilities.

Private Nursing Education Institution Details update form: 2004
This form must be completed and returned to the registrar before 30 April
23 March 2004
To Principals of PNEI
Compliance with conditions in term of which approval was granted to your NEI to provide nursing education programs.

The response from Panorama
Your letter to the nursing services manager of Panorama Medi Clinic refers. SANC was informed in writing in 1995 that panorama Medi Clinic is no longer a training institution for the diploma in operating theatre nursing. The documents as requested have not been completed.

A Lampbrechts
Vol 2 Medi Clinic Learning Centre Cape Town
10 March 2006

Medi Clinic Limited Satellite Campuses
We have previously submitted information and a request to have permission to run satellite campuses of Bloemfontein Learning Centre at PMB and Welkom Medi Clinic. I would like to extend the application to Kimberley Medi Clinic as well. All of these hospitals are approved clinical facilities for the courses offered. The rationale for the request is the vast distances that learners have to travel to attend lectures. We will appoint additional tutors at these centres to provide theoretical instruction if our request is granted. We would be able to increase our productivity in the training of nurses if our request is granted as we could train more of the local population who do not have access to transport and accommodation if they have to travel to the main learner centres
A Stroh
16 Aug 2005
Letter from SANC
Approval of sub campuses
There is a moratorium on the approval of all new PNEI, sub campuses and programs. Situational analyses were returned.

17 March 2006
To registrar
Medi Clinic Limited Nursing Training proposal
I attended the SANC workshop on accreditation in November 2005. There the process of accreditation of existing NEI was explained to us. We were also advised to submit a letter to inform the SANC of any proposed changes. This letter serves to inform the Council of our proposed changes as well as to request permission to continue with our planned changes. The rationale behind these changes is to meet the demand for trained nurses as best as we can; to meet the needs of Medi Clinic limited as well as assist in meeting the needs of the country in the training of nurses and to try and alleviate the shortage of nurses that we all face as quickly as possible. We also need to introduce changes in our current curricula in order to cope with
the new nursing act when it is promulgated. The changed scope of practice will require changed curricula. The proposed framework for qualifications as outlined by SAQA and the nursing SGB will require a change in our current system of delivery.
We have submitted the self assessment tool for each of our learning centres for accreditation, as required. I am confident that we meet the required accreditation standard.
Our proposal for the way forward:

28 April 2006
Letter from MC to Ms Mchunu
Arrangements for SANC examination
I refer back to the letter 24 March 2006 discussion around issue of the recruitment of nurses in India. Not relevant

Response
Application to Dept Further Education and training
Application form
Details of programs, qualification detail, name of site, staff establishment

Confirmation letter from DoE
Date 14 June 2002
Dr Edwin Hertzog
Application for the registration of the Medi Clinic as a private FET institution
Thank you for submitting the application for the registration of MC as a FET institution. The DoE would like to express appreciation for your submission and views it as willingness to work with the department to provide quality education. The application will be screened to determine the completeness of required information. The outcome of the screening process will be communicated to you in due course.

In the mean time Medi Clinic must ensure that it submits the application for accreditation to Umalusi. Should you wish to contact Umalusi, contact details:
Ms E Rabe, Senior Manager Accreditation and Evaluation; Private FET Institutions, Umalusi; Private bag X1, Queenswood. 0121. Telephone: 0123491510; fax 0123491511.
Further information contact us at 0123125878
Ms P Wenjefold

23 June 2006
Application for the registration of Medi Clinic Limited as a Private FET institution.
Attached please receive the confirmation of the submission for registration at the Department of education. We have also submitted the application form to Umalusi in respect of Medi Clinic Learning Centre; Nursing School, Bloemfontein; Sandton Medi Clinic Learning Centre; Nelspruit Medi Clinic Learning Centre; Limpopo Medi Clinic Learning Centre; Curamed Medi Clinic Learning Centre.

30 June 2006
Letter on approval of satellite campuses of the Bloemfontein Learning Centre: PMB and Welkom:
Confirmation of Moratorium placed on sub campuses.

14 July 2006
Ms Subedar
The role of the nurse in terms of point of care testing
We would like to use this opportunity to obtain clarity form the council concerning an issue where we believe a ruling may already have been given. Over the course of the last few years the pathologist have placed in certain of our hospital units HaemoQ point of care instruments which provide accurate quantitative pathology results to assist us particularly with tight glucose monitoring as research has shown that this improves patient outcomes in terms of morbidity and mortality, [particularly in Intensive care and high care units. This decreased morbidity and mortality has also known to be shown to decrease the total cost. A requirement to achieve this goal is that the glucose is monitored regularly and preferably as close to the patient as possible. So that there is no delay in treatment after testing. The HaemoQ instruments are also used for monitoring other parameters like haemoglobin. The pathologists provide the necessary training and evaluation to our staff on the use of the equipment on a regular basis. Certain of the medical aids are declining payments on the basis that this is not within the nurse’s scope of practice however these test require no more skills than that of doing a blood glucose test on the analysers provided in our units. We would be most grateful if the council could provide us with its opinion on the role of the nurse in such procedures as it extends of limits on her conduct and scope of practice in this regard.
We would be happy to provide brochures on the equipment if required.
We wish to thank you in advance
Estelle Jordaan

10 August 2006
Response on requirements and specific education issues
Your letter dated 17 March 2006 refers.
Revision of the curriculum to inline with the registered US
Council is in the process of implementing the procedure to be followed for the new qualifications that have been recently registered. NEI will be informed as soon as the process takes off.
Approval of new campuses/increased numbers
Council has placed a moratorium on approval of new campuses and on the increase of the number of learners.
Approval of extension of offering approved bridging course for enrolled nurse leading to registration as a general nurse of Curamed learning Centre to other Medi Clinic
Submission of clear previous status of R683 of Medi Clinic which will be affected by extension under discussion should be submitted to the Council. Regarding approved programs, approved number of intakes approved clinical facilities and number of clinical placements submission of curriculum to SANC for approval should be according to the relevant regulations. Submission of paediatric certificate course for listing:
Council has phased out approval of short courses. Notices in the form of a
<table>
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<tr>
<th>Date</th>
<th>Author</th>
<th>Message</th>
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<tr>
<td>10 Aug 2006</td>
<td>Dudu Sibiya</td>
<td>Circular will be circulated in the near future, hope your questions were answered</td>
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<td>J Nxumalo</td>
<td>J Nxumalo</td>
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<tr>
<td>4 December 2005</td>
<td>Grace Ramadi</td>
<td>From SANC</td>
</tr>
<tr>
<td>20/9/ 2006</td>
<td>Ms Stroh</td>
<td>Ms Stroh</td>
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registration as a private higher education institution, your submission will qualify for evaluation and the DoE will inform you accordingly. The registrar reserves the right in terms of R 35 to seek further clarity during the evaluation stage. Should you, however fail to submit the outstanding information, or to provide clarity by a specific date, your submission will be regarded as incomplete and therefore not meeting the requirements for application for registration. On this account the registrar will in terms of R34 decline to process it and it will be returned to you.

Nomsa Mataung

Covering letter
For DoE letter to SANC

25 August 2006
E mail HEQC
Accreditation Directorate
Ms Stroh
Your application for the candidacy phase of the HEQC accreditation process for the program bridging to RN has been successfully. Ref number provided. Please quote reference number in all enquiries.

End of 2006.
Aansoek van Hydromed Hospitaal, Bloemfontein  
7/12/95 
Linda Knoetze
Aansoek om goedkeuring as n verpleegskool vir die kursus wat lei tot inskrywing as verpleeghulp.
Motivering

Desember 1995 
Die waarnemende registrateur
Motivering om die hoof van die verpleegskool vry te stel van R 3(2)(e) van Goewerment kennisgewing R2175.
Mev L Knoetze word aangedui as hoof van die verpleegskool het nie n alternatiewe kwalifikasie in of verpleeg onderwys nie. Met hierdie motivering wil Hydromed Hospitaal u versoek om haar wel toe te laat om as hoof van die opleidingskool te funksioneer. Die redes:
Mev Knoetze is die hospitaal se hoof verpleegdiens bestuurder in beheer van alle verpleegpersoneel. Mev Knoetze is reeds betrokke by opleiding deurdat Hydromed Hospitaal deur samewerking met die UOVs en VKOVS studente vir kliniese praktyk akkommodeer. Mev Knoetze het verder betrokkenheid by opleiding deur Hydromed Hospitaal inisiële deur te motiver die instelling van die opleiding van verpleeghulpe. Sy het ook n verpleegdosest aangestel met 6 jaar onderrig ervaring om die aansoek om goedkeuring van di skool sowel as van die kurrikulum te hanteer.
Hydromed Hospitaal het =ook sameworkings ooreenkomste met die UOVs en VKOVS wat ten alle tye bereid is om hulp te verleen tov die beheer van die opleidingskool.
Mev M Bothma, teoretiese en kliniese dosent sal die administrasie betrokke by die opleiding van leerling verpleeghulpe hanteer.
Dankie
L Knoetze
M Bothma

7 Desember 1995
Aansoek vir goedkeuring in ooreenstemming met Goewermentskennisgewing R 2176. Opleidingskool vir ingeskrewe verpleeghulpe van die kurrikulum vir inskrywing van die verpleeghulp.
Aansoek vir die Hydromed hospitaal vir goedkeuring van bogenoemde. Hydromed is reeds deur die raad goedgekeur as kliniese opleidingsfasilititeit vir die verpleegkunde Kollege van die Vrystaat asook die Universiteit van die Vrystaat. Hydromed Hospitaal wil nou verder betrokke raak by opleiding en daarom word aansoek gedoen om ingeskrewe verpleeghulpe opte lei vir sy eie behoeftes wat verseker dat die sodanige kandidate hulle poste behou en deur Hydromed Hospitaal opgeneem sal word.
Ingeskrewe leerling hulpverpleegsters sal individuele aandag kry tydens hul opleiding.
N geregistreerde verpleegkundige wat ook n kwalifikasie in verpleegonderwys beskik word aangewys om leerlinge op n daaglikse basis in die kliniese praktyk te begelei en op te volg. Klein groep leerlinge, maksimum 6 per groep, sal opgelei word. Die implikasie hiervan is dat leerlinge daagliks individueel begelei sal word. Wat lei tot verbeterde verpleegsorg standaarde. En integrasie van teorie en
praktyk. Leerling verpleeghulpe sal volgens hul bestek van praktyk en die kurrikulum wat aand die Raad voorgelê word vir goedkeuring en volgens die instansie se spesifieke behoeftes opgelei word. VKOVS verleen toestemming dat die kurrikulum wat tans deur die provinsiale administrasie van die Vrystaat gebruik word en wat deur VKOVS vir hulle opgestel is deur Hydromed Hospitaal gebruik mag word om eenvormigheid van opleiding in die Vrystaat te verseker. Indien daar enige verdere navrae is sal inligting met graagte voorsien word.

Mev Knoetze

Brief van Hydro holdings
Hiermee gee ek toestemming dat Hydromed hospitaal, Bloemfontein aansoek mag doen om goedkeuring as opleiding skool vir verpleeghulpe. In beginsel word groter betrokkenheid by opleiding deur Hydromed Bloemfontein goedgekeur en aangemoedig.

A Wypkema

16 Februarie 1996
Aansoek om goedkeuring as verpleegskool vir die aanbieding van die kursus wat lei tot inskrywing as n verpleeghulp
Voorlegging van bogenoemde aansoek aan die uitvoerende komitee van die Raad het vergesel wees van n akkreditasie verslag. Dit sal gereël word vir 4 Maart 1996. Voorskrifte van inligting wat verskaf moet word.

13 December 1995
Letter vorm Hospice, giving permission for the placement of nurse auxiliaries at Hospice.
JM Marsdon

Die Stad Bloemfontein
20 Februarie 1996
Praktika vir verpleegassistente
Na aanleiding van u skrywe 9 Desember 1995. Verskoning vir die vertraging. Daar was n registrasie knoop. Praktika aan u studente kan wel by die departement aangebied word. Die aantal studente per jaar is 6 tot 8 en u sal dus 1 student per keer uitplaas vir plus minus twee weke praktika. Studente sal aan primêre gesondheid by die klinieke deel hê. Ons sal u so ver moontlik soos deur u versoek probeer inpas na die beste van ons vermoë. Ons vra ook vriendelik om n naamlys met praktika datums aan ons te verskaf so spoedig moontlik. Die studente moet elk n R2.00 inkomsteseel saambring vir ons vrywaringsvorm. Dit kan by die poskantoor gekoop word. Studente moet self n kospakkie en hulle eie tee saambring.
Ons verneem graag van u wanneer die reëlings gefinaliseer is.
Dr A Hiemstra
Stadsgeneesheer

VKOVS
Rakende die gebruik van die biblioteek
Hiermee bevestig van die mondelinge reëling dat verpleeghulpe van die Hydromed Hospitaal die leer bron sentrum van VKOVS mag gebruik. Die voorwaarde is dat alle reëls rakende lede nagekom moet word.
SJ Fourie
Waarnemende Prinsipaal

Sitasie analise
Kurrikulum

Beknopte oorsig volgens vereistes van die SARV kwalifikasies en oorhoofse verantwoordelikhede
Motivering
Akkreditasie besoek verslag

The application meets with the minimum requirements of the Council
The curriculum to be used will be the approved curriculum of the Orange Free State. Official permission has been granted by the nursing college of the OFS for the usage thereof although the person in charge of nursing education does not have an additional qualification in NE exemption has been requested, the two persons involved in the theoretical and clinical teaching of the pupils both have the qualification in nursing education and accreditation of the nursing school was done on 4 March 1996 and the prospective school more than meets the minimum requirements.

20 januarie 1997
Hoof van opleiding skool
Hiermee wil Hydromed Bloemfontein u in kennis stel dat mev. L Knoetze, huidige prinsipaal van die opleiding skool bevorder is en dus nie meer by Hydromed Bloemfontein is nie, om die rede wil bie bestuur van Hydromed Bloemfontein aansoek doen dat mev. ASHC Bax die nuwe verpleegdiens bestuurder in mev. Knoetze se pos deur u goedgekeur word as hoof van die verpleegskool. Mev ASHC Bax se kwalifikasies is as volg:
Algemene verpleegkunde en verloskunde diploma Otto Du Plessis Kollege 1978
BA Cur Unisa verpleegadministrasie; verpleegonderwys; gemeenskapsgesondheid 1990.
U gunstige oorweging sal waardeer word.
Dr P Human
Hospitaal bestuur

7 Februarie 1997
Kennis geneem van u skrywe en die persoon in beheer van verpleegopleiding.

20 Mei 1997
Aansoek om die persoon in beheer van die program wat lei tot inskrywing van n verpleeghulp om mev. A Hailey te wees in die plek van mev. M Bothma wat tans n ander pos beklee.

10 Junie 1997
Erkenning van bogenoemde brief.

Akkreditasie besoek 6 Augustus 1997
Met die vereistes
24 July 1997
From Medi Clinic
Enclosed the documentation from the school as requested by Ms. Potgieter to
comply with the guidelines for accreditation of Bloemfontein Hydromed nursing school. We also acknowledge receipt of the letter dated July, confirming the program for the 6 August visit.

A Lampbrechts

Accreditation report Hydromed 6 Augustus 1997; Ms Hailey application approved 22 Aug 1997. Inspection report was discussed by the executive committee of SANC during its meeting held on 20 and 21 August 1997. Copy of report attached for your information.

Criteria for the approval of additional clinical facilities
The application for approval should be submitted to the Council by the approved NEI prior to the placement of student in the proposed additional clinical facility. A situational analysis based on set norms and standards of the clinical facility should be carried out by the NEI. Were inadequate or inappropriate learning opportunities exist, arrangements should be made for practica to be completed at an alternative clinical facility. In the event of the alternative clinical facility not being an approved facility the same procedure is followed to obtain approval. A copy of the situational analysis indicating that the facility meet with the predetermined minimum standard of the NEI, must be submitted together with the application to the Council.

A copy of the formal agreement between the NEI and the facility to be used for the placement of student s should accompany the application. An indication must be given of the number of students/pupils to be placed at the facility as well as the duration of such placement. The names and professional qualifications of the persons responsible for the clinical accompaniment as well as the number of students/pupils each preceptor is responsible for should be submitted by the NEI to the Council biannually for as long as the clinical facility is to be used by the NEI. Students pursuing distance learning program are to write Council examination. Proof of clinical accompaniment must be clearly indicated at all levels. The council has the mandate to inspect all facilities where students or pupils are placed for clinical practica at any time. Council may interview students and personnel during such an accreditation visit.

11 November 1998
Hydromed Bloemfontein se versoek dat mej. L H Janse van Rensburg as nuwe hoof van die hospitaal se opleidingskool mag optree. Die vorige hoof, mev ASHC Bax het bedank
Kwalifikasies:

SANC vra datum waarop kwalifikasies verwerf is asook huidige ander verpleegkundige wat oor die verpleegonderwys kwalifikasie beskik en betrokke is by die opleiding van verpleeghulpe.
M van Logerenberg
OpvolgSkrywe

Mej. LH Jansen van Rensburg sal indien eksamen van Oktober 1998 suksesvol
voltooï was, n verpleegonderwys kwalifikasie Januarie 1999 verwerf.
Daar is 3 ander verpleegkundiges betrokke: Sr B Schoeman; Sr A De Villiers en Sr L Zaidy.

12 Februarie 1999
Aansoek vir Enrolled Nurse kursus soos by Louis Leipoldt Hospitaal aangebied.

Hydromed Bloemfontein
Application approved 13 and 14 July for enrolment as a nurse

23 Oktober 2000
Naamsverandering Hydromed na Bloemfontein Medi Clinic
Versoek dat die verpleegskool Hydromed Bloemfontein verander na die verpleegskool Bloemfontein Medi Clinic aangesien die hospitaal se naam verander na Bloemfontein Medi Clinic.

LH J van Rensburg

22 Januarie 2001
Inligting vir die saamstel van n kurrikulum vir n kort kursus in infeksie beheer Bloemfontein Medi Clinic beoog om n kort kursus in infeksiebeheer vir RN te ontwikkel. Graag versoek ons hiermee dat u aan ons voorvereistes waaraan so n kurrikulum voorlegging aan die Raad moet voldoen sal verskaf asook die datums waarop die Raad kursusse sal beoordeel.
LE Zaidy

23 February 2001
Guidelines for short courses
Receipt of your letter dated 22 January acknowledged. A copy of the Council guidelines to which short courses must comply in order to obtain listing with the SANC and credits with SAQA
S Mentoor

23 April 2004
NEI Update
Nursing school Bloemfontein with all the situational analysis that was submitted same as in the file of Louis Leipoldt Hospital

In die lêer ook afskrifte van briewe gerig aan die Raad
2 Julie 2005
Ivm sub kampus registrasie soos al voorheen vermeld PMB en Welkom

4 December 2005
Audit of approved providers of nursing education and training for compliance with accreditation requirements

Application for approval of additional clinical facilities 6 September 2006
Nursing School Bloemfontein Medi Clinic
Apply for the New Castle Medi Clinic
Sandton Medi Clinic apply for Wits Donald Gordon and Secunda
Limpopo Medi Clinic for Tzaneen
Curamed for Legae and Thabazimbe

We would like to utilise the Legae Medi Clinic for the clinical placement of bridging to RN for the Curamed Medi Clinic Learning centre. Where hospital does not have sufficient clinical learning opportunities to meet all the requirements of the course learners will be rotated to either Medi Clinic hospitals. I am aware of the moratorium which is in place but we would like to use these clinical facilities for our learners in the future. Please consider

9 October 2006
Application dated 6 September received on 18 September 2006. The telephonic conversation with Ms Kgongwana on 5 October 2006 refers. The applications were submitted on behalf of the above mentioned learning centres. The office of the Council appreciates the management structure of Medi Clinic however we wish to remind you that according to legislation the head of school as a registered nurse educator and administrator is required to be responsible and accountable for the nursing school. Therefore it would be advisable that the applications be formulated by each head of school according to the relevant guidelines including the new accreditation policy. The submitted documents were analysed and totally do not meet the requirements for submission to the accreditation committee of the Council as follows:
The MoAs are not formulated accordingly, i.e. no signatures of both nursing school head and clinical facility nursing services manager.
Not initialled on every page
Learner matters are not appraised
The nursing school had the responsibility to submit, monitor and accompany learners at the clinical facility
The clinical facility on approval are meant to add value to all learners admitted to Education institution not only learners of a specific hospital. It is of great advantage to the learners to have a maximum exposure to various clinical facilities.
Hospitals that have bed occupancy of less than 70% per unit do not meet requirements to be approved as a clinical facility. This affects the following:
Legae Medi Clinic, Sandton Medi Clinic, Tzaneen Medi Clinic.
Note that Thabazimbe was approved this year as a clinical facility for Curamed learning centre. Check with Mrs. Erasmus for other information was omitted completely on the document.
Herewith receive back the application and comply accordingly. All the learning centre have been informed and guidelines provided. See the attached copies for you to note.
Kgongwana

10 October 2006
Application for approval of an additional clinical facility: New Castle Medi Clinic
Course leading to enrolment as a nurse
The office of the Council has received a group of applications dated 6 September 2006 on 18 September 2006, one of which reflected for your learning centre for the learners following the above mentioned program. The applications were submitted by Mrs. A Stroh, not the head of your school and it were not compiled according to the current guidelines of SANC, in particular the MoA and Clinical facility information. Applications were returned to Mrs. Stroh with a covering letter. The office of the Council advises that each learning centre advises and submit an
application according to the enclosed guidelines and also refer to the self audit tool details.
Ms Kgonwana

3 November 2006
Application for approval of an additional clinical facility: New Castel Medi Clinic
With reference to your letter dated 10 October 2006 I hereby gladly submit our application document for approval of New Castle Medi Clinic as an additional clinical facility for the R2175 course. The documents proof as you requested. Hope you find it in order. Please acknowledge receipt.
JC Lubbe

5 December 2006
Application for approval of an additional clinical facility: New Castle Medi Clinic
Your correspondence dated 3 November 2006 and received. Acknowledge the comprehensive application that included a curriculum is noted. However it is not necessary to include the curriculum details with this application. Analysis done reflects the following concerns:
Distance between learning centre and clinical facility is not explicit however, according to general knowledge of the geographical distance between the two is extensive. Council request clarity on accompaniment by nurse educators and accessibility by all learners at the learning centre to be part of your application. Management including the medical personnel of the facility must be provided. The full name, SANC ref number and Qualifications of the program co-ordinator including the clinical tutor and facilitators are required, not only initials and surnames. The information about other NEI placing learners has to be indicated in full, that is the number of learners per program per unit per NEI
Note on page 4, raises concern it is always the responsibility of nurse educators and preceptors from the learning centres to accompany learners not the registered nurse by New Castle Medi Clinic. The name of the accompanist must be provided in full and this information must be part of the MOA. Staff allocation and patient profile on page 5 and 6 is from Bloemfontein Medi Clinic as where this must be a situational analysis for New Castle Medi Clinic. Page 8 refers to category of equipment for training of general and midwife nurses. This is not the appropriate program your institution is approved for. Clinic, theatre and casualty activities must be provided as total number of person and cases handled monthly, not to be given in percentages. Names of units were omitted and use of abbreviations is not acceptable. Program documents must only be any of the two approved programs for Bloemfontein Medi Clinic Nursing School. Course leading to enrolment as a nursing auxiliary and enrolment as a nurse. The signatories full names must be printed in full, the stamps of the institution must be appearing on the relevant pages. The clinical placement plan for Bloemfontein Medi Clinic learners is appreciated but it would be more practical and relevant if it is complete in full. The New castle Medi Clinic nursing personnel distribution reflects placement of 4 EN in high care and no registered nurses.
You are reminded strongly that En cannot be placed outside supervision of a RN according to the legislation. The MoA was not initialled on every page, no stamp, no printed names of persons in authority according to the guidelines you were provided with.
Herewith return of pack and complete accordingly.
Ms Kgongwana
Letter to MS Kgongwana regarding our conversation last week I would like to thank you for the honest feedback that you gave me on my application for approval of New Castle Medi Clinic as an extended clinical facility. I am obviously disappointed by your ruling that it is not approved but am hopeful never the less that at least I can gain meaningful insight from you. As discussed over the phone I hereby request an appointment for myself and the manager Ms. A Stroh. Would it be possible for us to pay you a visit on Thursday, 15 February 2007? May I please present you with a condensed agenda for our proposed meeting?

- Additional clinical facilities
- Public Private Initiatives
- Venue for training
- Clinical facility vs in learning centre
- Application and requirements for sub campus/satellite campus

Thank you for attending to this
I hope to hear from you soon
I Lubbe
Nelspruit
24 April 1995
Aansoek om goedkeuring as verpleegskool vir die kursus wat lei tot inskrywing as n
verpleeghulp.

WC Potgieter
M M Schoeman

21 April 1995
Opleiding skool en opleidingsfasiliteit
Daar is geweldig ontwikkeling wat plaas vind in Oos Transvaal Streek en daarmee
saam n groot behoeftes om verpleegkundiges op te lei om te voorsien in ons
behoeftes. Ons enigste bron van personeel huidiglik is vanuit die staatshospitale
wat tot groot nadeel van daardie fasiliteite strek. Om hierdie toedrag van sake te
voorkom, sal dit wenslik wees om ons eie fasiliteit vir die doel van opleiding aan te
wend. Ons wil graag met die volgende kategorieë begin:

Ingeskrewe verpleeghulp
Ingeskrewe verpleegkundige

Kgangwane kollege van verpleging begin in Augustus/September 1995 met n
kursus vir die oorbrugging studente en ons sou graag daar wou inskakel indien
moontlik.
Is dit vir u moontlik om ons so spoedig moontlik te akkommodeer ten opsigte van
inspeksie en goedkeuring?
WC Potgieter

Aansoek om goedkeuring van hersiene kurrikulum: ingeskrewe verpleeghulpe
Na aanleiding van R2176 van November 93 ingesluit is die hersiene kurrikulum vir
goedkeuring.

SG Lourens Verpleegkolleges gee toestemming dat Nelspruit Privaat hospitaal die
goedgekeurde kurrikulum vir die kursus wat lei tot inskrywing as verpleeghulp
binne R 2176 en R2175 aan die SARV voor te le vir implementering binne
genomde opleidings instansie.

Akkreditasie verslag
10 Julie 1995
Aansoek om goedkeuring van verpleegskool
Aansoek is goedgekeur vanaf 1 Julie 1995.

6 Julie 1995
Dit is dankbaarheid teenoor die Here en met groot trots dat ons verneem dat ons
goedgekeur is as n opleiding skool en fasiliteit. Dankie vir die positiewe beeld wat u
uitgedra het tydens u besoek hier en ook vir al die opbouende voorstelle, ons
vertrou dat ons n hoe kwaliteit professionele verpleegster sal oplei wat die pasiënt
se veiligheid altyd op die hart sal dra.
W Potgieter

25 April 1995
<table>
<thead>
<tr>
<th>Nelspruit Private Hospital: training facility and extension of Kgangwane College of Nursing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Due to the rapid expansion and development which is taking place in the Eastern Transvaal we have identified a need to train our own nurses to enable us to fulfil this need. The position currently is that our requirements for nursing staff are being met through drawing from the only source available, namely the public hospitals, Rob Ferreira. However, we would like to share in the responsibility as private sector in the training of our own staff. This will alleviate the financial burden on the state and create an opportunity for us to part take in serving our community. We hereby cordially request yourself to please arrange an inspection of our facilities for the approval of the following categories:</td>
</tr>
<tr>
<td>Bridging Course</td>
</tr>
<tr>
<td>Midwifery Course</td>
</tr>
<tr>
<td>Theatre technique</td>
</tr>
<tr>
<td>We believe that the bridging course will be commencing during August/ September 1995 and would appreciate the opportunity to enable our students to be incorporated in this intake if possible. We would appreciate it if you would accommodate us for an inspection and approval as soon as possible</td>
</tr>
</tbody>
</table>

WC Potgieter

Agreement
Nelspruit Hospital and Public hospitals concerning the training of students and exchanging students between Nelspruit Hospital and the Public Hospitals. We recommend the following status quo as regards Bridging, midwifery and theatre course students:
Bridging: Nelspruit Hospital students are selected and screened by the Nelspruit Private Hospital screening committee:
We pay fees as in report 2 paragraph 4 to the eastern Transvaal College of Nursing as well as student salaries
Insufficient practical opportunities: we request that our students use Rob Ferreira or Themba Hospital facilities to enable them to fulfil the SANC requirements.

Midwifes
Nelspruit Hospital students are selected and screened by the Nelspruit Private Hospital screening committee:
We pay fees as in report 2 paragraph 4 to the eastern Transvaal College of Nursing as well as student salaries
Insufficient practical opportunities: we request that our students use Rob Ferreira or Temba Hospital facilities to enable them to fulfil the SANC requirements.
In exchange we suggest that nurses in the public hospital who do not have the opportunity to utilise more modern equipment and experience advanced technology, epidural anaesthesia, cardio-tocography, oximeter, Meco baby resuscitation unit and cardio tocography may in exchange experience modern technology which is an asset in that the midwife has a broader reference base and knowledge ranging from modern technology to primary health care standards. By using Nelspruit Private Hospital facility for a specific amount of clinical hours which can be arranged between the clinical departments. No fees will be attached to this opportunity.

Theatre technique
Nelspruit Private Hospital request that the Eastern Transvaal College will inspect the
| Nelspruit Private Hospital facility for theatre technique training. We suggest that the entire eastern Transvaal Region students be accommodated at said facility. Nelspruit Private Hospital will employ a clinical preceptor in the theatre. We undertake to obtain the SANC approved curriculum form SG Lourens Nursing College according to R 212. We request that the Eastern Transvaal College of Nursing who is affiliated to MEDUNSA will make the necessary arrangements in connection with the selection of a moderator and examination papers. This will be in co operation with the preceptor of Nelspruit Private Hospital and the college. If Eastern Transvaal College has a post for a tutor with theatre technique she then does all the theatre training and no funds change hands between the public hospital and Nelspruit Private Hospital except fees payable to the Eastern Transvaal College of Nursing. But if no post exist, Nelspruit Private Hospital undertake the responsibility to employ a theatre tutor, enumerate her as in report 1 part 4. Contracts We suggest that private hospital and public hospital put students under contract in the event of doing Theatre technique. Students sign a contract for one year to be worked in the hospital which has sponsored the training after completion of the post basic course. If the student should leave before the contract has expired, the fees paid for the course must be reimbursed to that hospital which has sponsored the student. It a student should fail, said student must reimburse the hospital which has sponsored them. We respectfully request that all interested parties would feel free to give input to ensure the satisfaction of all participants. This will ensure that students benefit from arrangements made. This will enable all our students to deliver a high standard of nursing and to enable us as educators to ensure that we all deliver safe, competent practitioners into our communities. WC Potgieter 18 April 1995 Beplande aanbouings en verbeterings Nelspruit Privaat Hospitaal Opdrag is gegee aan die argitekte Theunissen Jankovitz SA ingelyf vir die volgende uitbreidings aan die Nelspruit Privaat Hospitaal: N volledige hart kateterisasie laboratorium en teater 2 addisionele algemene teaters 30 wooneenhede bestaande uit 1 en 2 slaapkamers op die perseel Vergroting van die intensiewe sorg eenheid Die direksie besef dat alle bogenoemde fasiliteite as dringend beskou word en sal sodra alle koste berekening beskikbaar is die nodige goedkeuring verleen. Dr Stegman Application for approval of Nelspruit Private Hospital as a facility for Bridging Course students Eastern Transvaal College of Nursing received a letter of application in March 1995 from the Nelspruit Private Hospital which contains the following: Application for 10 students to attend the Eastern Transvaal College of nursing for the bridging course. Theoretical classes to be given at the satellite campus and clinical practica hours to be done at the Nelspruit Private Hospital facility on approval by SANC. We hereby apply to be approved as a clinical facility for the clinical practical of the bridging course. Selection of the students
There were names. Selection was done by the Eastern Transvaal College and only 6 students were selected. Attached you will find a report of the situational analysis Nelspruit Private hospital. Eastern Transvaal College of Nursing has assured us that they will forward a recommendation and motivation for approval of the Nelspruit Private Hospital as an extension of the college as a clinical practical facility.

WC Potgieter

Eastern Transvaal College of Nursing
Situational Analysis Nelspruit Private Hospital
Commence March 1994 to March 1995

Inspeksie verslag van Hospitaal verpleegskool
Aansoek om goedkeuring as n verpleegskool vir die aanbieding van die oorbruggingskursus
Aansoek is ontvang, goedkeuring as verpleegskool vir die kursus wat lei tot inskrywing as n verpleeghulp. bedrag betaalbaar

15 Augustus 1995
Mev Potgieter
Aansoek om goedkeuring van kliniese faciliteit oorbrugging student
Na aanleiding van u brief gedateer 12 Julie 1995, met betrekking tot bogenoemde wil ek die volgende onder u aandag bring:
Aangesien Kgangwane verplegings kollege die goedgekeurde opleidingskool is, moet hulle n aansoek rig aan die SARV vir die uitbreiding van die kliniese faciliteit of die Nelspruit Privaat hospitaal in tes luit.
Monama

24 Augustus 1995
Goedkeuring van kliniese faciliteit oorbrugging studente
Ons is bewus van die feit dat die Kgangwane verpleeg Kollege die aansoek moet rig. Ons het verskei gesprekke met beide Mev. Themba en Phiri in die verband gevoer en was onder die indruk dat die aansoek reeds ingedien is, aangesien ons verseker is dat hulle reeds aansoek gedoen het.

Bedanking vir die leiding en insette gelewer. Sal die saak opneem.

MM Schoeman

1 September 1995
I hereby wish to inform you that I, WC Potgieter have resigned as form 1 September 1995 as senior nursing manager education and head of Nelspruit Private Hospital School and facility. Termination of services will be discussed if Council wishes to know the reasons. I wish to thank you all for the support and guidance given me on several of the council members on my short term of office.
Sincerely
WC Potgieter

28 March 1996
Working agreement between Hospiplan, Nelspruit Private Hospital and Mpumalanga region: Kgangwane Nursing College.
We hereby apply for a working agreement between the abovementioned parties wrt the training of registered nurses in the post basic course, medical and surgical nursing in the speciality field of operating theatre nursing. RN from the government hospitals will also be trained at this institution with approved study leave from their hospitals. We have already received several applications of nurses in the region who would like to be trained in this discipline. We approved, to approve our facilities the SANC requires the following from the Department of health in our region

- Working agreement between the government and private sector
- Honorary appointment of the program leader of the course and the clinical facilitator of the course with the college. This is only an administrative formality and has no financial implications for the state.

Program leader CJ Buber
Clinical Facilitator JM Barnard

Please find copies of SANC registration of the above mentioned.

As we would like to be approved as soon as possible we request you to please attend to this matter as soon as possible.

Thank you
Jane Buber

27 March 1996

Working agreement withMpumalanga region and Kgangwane Nursing College of Nursing

Hospiplan hereby agrees to enter into a working agreement with the Department of health in the Mpumalanga region and the Kgangwane College of Nursing with the training of RN in medical and surgical nursing: operating theatre nursing

Dr JC van der Walt

Ms Monama

I am waiting for some documents from the department of health of the region. Ms Phiri is very busy and I will send everything outstanding to you the week of 15 April 1996. At the moment you need only the curriculum to assess what still has to be changed. Ms Themba and I worked through it, made the changes that were suggested by you and I will phone you as arranged on the 15th about what is still to be changed.

Thank you for your cooperation
Jane Buber

6 May 1996

To Kgangwane College of Nursing

Curriculum medical surgical nursing: Operating theatre Nursing

The above mentioned curriculum was received from Natalspruit Private Hospital on 3 April 1996. In order to be presented to the executive committee for council approval the following information is requested:

- Application letter from Kgangwane Nursing College to present the program and use of Nelspruit Private hospital as a clinical facility.
- Copy of situational analysis for Nelspruit Private Hospital specific for operating
theatre nursing with the indication by the college that it meets with the minimum requirements for training
An indication of whether the philosophy and the mission in the curriculum presented is compatible with that of the college.
To expedite the process of approval the college is required to handle all correspondence.
All queries in this regard can be directed to the professional officers at the Council.
E Monama

Copy forwarded to Nelspruit Hospital

2 May 1996
Application to be registered as training school: Kgangwane College of Nursing:
Hospiplan: Nelspruit Private Hospital:
Included working agreement between Mpumalanga Provincial government and Hospiplan.
Statistics
Names and qualifications of persons directly involved with the training of theatre students
List with clinical and learning facilities
Clinical placement of students
Theoretical teaching program
I would appreciate if could please contact me if you need more information

Jane Buber

Copy of working agreement attached
Letter from Mpumalanga province

Working agreement with between Departments of health Mpumalanga Region and Hospiplan: Nelspruit Private Hospital
The Government of Mpumalanga has agreed to work with private sector in the training of nurses in the program medical and surgical nursing: operating theatre nursing. Kgangwane College of Nursing will be the school of nursing with ms Mr Themba in charge of the school. The following persons of Hospiplan will be appointed honorary: CJ Buber and JM Barnard. For this course the college will affiliate directly with the SANC. Program leader as ms CJ Buber will be the examiner for the course and Ms. PR Brugman an independent practitioner will be appointed as moderator for the course with the approval of the nursing council
Dr GH Carim

Organogram with regards to the working agreement
Working agreement with details

Attention Ms. K de Witt
The registrar
Approval as nursing school for the bridging course leading to registration as a general nurse.
We hereby wish to apply for approval as a training school for the above mentioned course. Nelspruit Private Hospital is approved as a clinical facility for the course.
We are experiencing problems to get our candidates accommodated. There is not
enough training facilities in the region. To bridge this problem it has become necessary to train our own students. We have the facilities and expertise to do so. Included please find curriculum purchased from BG Alexander Nursing College. And a letter of agreement. It has been adjusted to provide in our own needs; modules and situational analysis,
Thank you
Jane Buber

Letter from BG Alexander College of Nursing
Curriculum for the bridging course leading to registration as a nurse
28 August 1997
Curriculum for the bridging course leading to registration as a nurse
Herewith confirmation of the agreement for you to implement the BG Alexander Nursing College curriculum for the bridging course. Enclosed are the modules integrated nursing science I and II; Ethos and Professional Practice I and II; Social Science I and II. Inclusive of course objectives prescribed and recommended booklist, course maps and evaluations.
Pack of bridging course pratica assessment forms and pratica control sheets formative evaluation instrument; patient care assessment and evaluation instrument, patient care assessment guidelines and example for one OSCE station on CPR. Student instruction sheet, equipment sheet. Memorandum and score sheet. Workbook for students is optional.

Kindly refer to the enclosed annexure for the explanation of the practica assessments.
Van Rooyen.

16 October 1997
To Jane Buber
Approval of the nursing school approval of the curriculum for the bridging course For En leading to registration as a general nurse
Receipt acknowledged

17 October 1997
In order to submit the above mentioned application to the council for consideration information is required:
Name of the qualifications of the person in charge of the program
Persons responsible for theory
Person responsible for clinical accompaniment
Any other persons involved in the program.
Facility for setting and safekeeping of test and exam papers
Clinical learning objectives, opportunities and duration of exposure in each learning area
Program timetables, spread of theoretical and clinical learning opportunities over the total period
Admission requirements to indicate academic qualification standard
Support system for students
Formal agreement for using Rob Ferreira Hospital as your examination centre

Staff establishment
Numbers, qualifications, turn over
<table>
<thead>
<tr>
<th>Date</th>
<th>Event Description</th>
</tr>
</thead>
</table>
| 6 November 1997      | Letter to Ms Dioke  
Approval for nursing school for the bridging course  
Included please finds the documents as requested. Everything.                                                                                   |
| 13 November 1997     | SANC acknowledge receipt of documents                                                                                                                                                                              |
| 30 January 1998      | Application was approved by the executive committee of the council at its meeting held on 22 January 1998.                                                                                                              |
|                       | Change of name of Nursing School  
No on Medi Clinic Letterhead  
Please take note that the name of the institution has changed from Nelspruit Private Hospital to Nelspruit Medi Clinic. Please address future correspondence with regards to training to Head of Training School, Nelspruit Medi Clinic |
| 5 May 2003           | Reaccreditation of the nursing school: Notification  
The school will be visited on 26 July 2003. Guidelines wrt preparation for the accreditation visit, proof of payment  
Report, inspection report  
Inspection report 1 April 2004  
The inspection report was discussed by the executive committee of the council on 4, 5, 6 February 2004. Copy of the report attached fyi. Recommendations made by the inspectorate as indicated in the report.  
Thank you  
Ms Ledwaba  
Achievements  
1 April 2004  
Re confirmation of the extended clinical facilities Medi Clinic Nursing School  
Same information as in other files for Nelspruit nursing school  
Program enrolment as nursing auxiliary; enrolment as a nurse  
Medi Clinic Hospitals extended clinical facilities Nelspruit Medi Clinic and Highveld Medi Clinic. Situational analyses attached. |
Facilitator: I just want to put the thing so that it’s close enough so, to make a…a good recording. Okay, uhm…the interview is not going to be structured, I’ve got a couple of…sorry Leslie do you…
F: I’ve got a couple of questions, uhm, but basically what we’re looking at is to do a narrative report on the history of the development of, uhm, ‘Life College’, nursing college. Uhm, so basically what I want to start of with is to…to ask the question about when the institution was first accredited by the nursing council and what was the motivation for establishing a nursing education institution within the company?
L: Okay, does that start, does that start with ‘The Afrox School of Nursing’?
F: Yes.
L: Ja, no sure, you go ahead Sharon.
S: Well, I will start and then Leslie can add, because actually Leslie was there at the time, so I can just tell you what I found in the papers, that it says that officially we were accredited in 1998 by ‘The South African Nursing Colle..Council’ as ‘The Afrox Nursing College’.
F: As ‘The Afrox School of Nursing’?
S: What? ‘..School of Nursing’.
F: Ja.
S: ...School of Nursing’ and that, but prior to that were a lot of…there was a nursing education being delivered but it ... as uhm., at hospital level, so we had the Flora, had the nursing school, Brenthurst...
L: Sharon, I don’t think Brenthurst
S: Entabeni...
L: Entebeni had a nursing school, now I think I’ve got a book upstairs about the ‘Entebeni Nursing School’, they had their own nursing school and, uhm, Flora did, but Flora didn’t belong to Afrox at that time...
S: Yes, they were an independent group.
L: Ja, I don’t think Brenthurst
S: Not Brenthurst
L: No, no I think it was just Entabeni that had its own college at the time.
S: And Eugene Marais?
L: Eugene Marais did as well.
S: Yes…also had a nursing school.
L: Ja.
S: And then it was in East-London at St Doms was it?
L: I don’t know…I know when I, when I joined ‘Afrox School of Nursing’ it was only Entebeni…
S: Entebeni…okay.
L:…that had, that had, uhm, their own school.
S: Ja, but remember Leslie then came from PresMed.
L: No…
F: Oh.
S: when did your college…?
L: I, I came from Province, I joined Afrox in 1990, ‘The Afrox School of
Nursing' and I think I...it was in 1999 I think that I left, because then
PresMed, which was also private hospital group, they wanted to open a
nursing school...
F: Ja, ja, ja.
L: ...they wanted to open a nursing school and then I went and I
opened their nursing...you know I got their nursing school accredited for
them and I think I was with PresMed 3 months when we were told that
Afrox was going to buy PresMed.
L: And then 'The PresMed Nursing School' became incorporated into
'The Afrox....
S: So you need to put that as part of the history...
F: Ja, ja.
S: ...because...
F: Ja.
S: ...'The Afrox Nursing School' actually was uhm, what's it? an
integration...
F: Ja.
S: ...of 'PresMed Nursing School' and these little hospital based nursing
schools and that's how it evolved.
L: Ja.
S: Isn't it?
L: Yes.
S: So just in terms of, u know, that's where they were and...and I still
remember Marietjie Potgieter leaving the council in '96...97?
L: It was...it was...it was after I left 19...I left in 1999, or as far as I
remember and then Sylvia Lombard came from Eugene Marais...
S: ...to take over...
L: ...and she recruited Marietjie Potgieter...
S: ...Marietjie...
L: from the...from the nursing council.
S: Ja, and then she got this college going, 'The...the what? 'The Afrox
School of Nursing' going by getting an agreement with NMMU
and...and the whole idea...
L: Was it her or was it Jenny Coppins?
S: Well, they say Marietjie actually....
L: Oh...
S: ...drove it...
L: Oh...oh I see.
S: ...you know, because she knew, I think Jenny was the manager like
me...
L: Oh, oh okay.
S: ...and Marietjie knew the information...
L: Oh, okay.
S: ...and they sent out a request to all the local universities and, uhm,
NMMU was the one that responded and said that...they were the first
university who were happy to work with a private hospital group.
F: Good.
S: So it was then the UPE...
F: Ja....UPE.
S: ‘University of PE’ and they signed the agreement in 1998 and the
motivation to form a college from a school was so that we can start
offering post basic programmes, because at school, what, at school
level they were offering the basic programmes …
F: Basic programmes, yes.
S: … and bridging, but we wanted to offer post basic, so that is why they moved into this agreement with the university and all that, I think that’s how it started.
L: I know when I was with ‘Afrox School of Nursing’ we had, uhm, an informal agreement with, uhm, it was then ‘Rand Afrikaans University’ to train post basics, they used our facilities, but the students did their theory at the university.
F: Facilities
S: Ja.
L: And when we started the Afrox, it started mainly to do the bridging courses, because we didn’t do the ENA or EN, or anything like that then.
S: Ja
L: I think I still have a picture of those very first bridging students.
F: Ja, I would love to have a picture because you know it will just liven up the information if we can have some pictures that we can add to the script uhm and you know maybe some documents that we can also reproduce and add as part of the script.
L: I’ve got one somewhere.
S: hmm ja hmm
S: We’ve got a collage of the college of Prof Kotze signing the first agreement and uhm we’ve got those pictures in our yearbooks and all that so maybe we must just see what you can you would like to have a look at
F: Hmm… okay, hmm ja okay
L: I think were you thinking of the Brent the college or the nursing school was you know the Brenthurst had those the block of flats, Phoenix Place and we had a nursing school in one of those flats.
S: Okay (laughs) Okay
F: Ja…
L: It was a funny setup. Oh when I arrived there my first day I thought what have I done to myself. Because I came from Leratong College.
S: (laughs) Okay
F: Ja…
L: It was a funny setup. Oh when I arrived there my first day I thought what have I done to myself. Because I came from Leratong College.
S: Okay
F: Okay
L: Ja
F: So, did you use one room how many rooms did you have to use?
L: It was a it was a flat and we used the lounge cum dining area as the classroom. We only had the one classroom and then we
F: Okay
L: one bedroom was one office and another bedroom was another office and then there was another bedroom that we used as a as a boardroom
L: But it was quite a nice setting because the this lounge had double doors that opened up and we went
L: the students could go out onto the into the gardens there at Phoenix Place and so on. It was quite nice
S: okay
L: and very funny. The day I arrived there I mean I don’t know if this is for the theme the day I arrived there Lois Keen
F: Uhm
L: I don’t know if you remember Lois Keen
S: No
L: but she she actually started the school
S: Okay
L: and then she immigrated and that is when I became the nursing education I think I was called the nursing education coordinator or something like that. Cause I was I was employed as a nurse educator to do the bridging course
F: Uhm
L: and she was the the uhm boss and then she’s I think it was six months later she went overseas and that is when I became the nursing education coordinator. And the day I arrived there she wasn’t there she was on leave I had to use her office because my office did not have a desk or anything. And you think my office is untidy now, you should have seen that office.
F: laughs
L: Her whole desk was piled with there were no desks or anything in that place because they haven’t actually started with the course. It had old beds and stuff from the Brenthurst in it.
S: Hmmm
L: I didn’t know who to contact or what to do
S: Goodness It was really an eye opener that day.
L: But ja
F: Can you uhm maybe just confirm how to spell her name?
L: L O I S
F: Okay
L: She was the first manager.
F: okay uhm were there any other role players that uhm that uhm could maybe give us more information should we need to interview them? Uhm.
L: Uhm She and I well she was the first manager and as I say she was there for about possibly three or four months before she immigrated maybe six months maximum six months and then I was there alone and then finally I convinced them that we needed another nurse educator because this was really too much. Because when they went into their second year there was nobody
L: You know I had to do the first and second year
L: and then we employed somebody called Cheryl Werner and she would be able to you know, to also talk to you about her experiences.
F: okay. I f could just go back to the first question, the motivation, was there any drive from the services part or was the drive mainly from the educators’ part to merge these smaller institutions or was it basically because of the company, the group that was established?
S: I think it was because of, remember the way that Afrox worked, they didn’t build hospitals, they grew, they bought hospitals. So they started off with the first hospital, which was the Florence, was it?
L: Hmm. Yes.
S: In Hillbrow and then they started buying a few more hospitals. Like initially they went from one to three, then they went to about seven, and there is a whole history on how they got these mergers and acquisitions in creating Afrox Health Care. Afrox HC as a group never built a single hospital at the time. All their hospitals, now we have built two hospitals which are Four ways and Beacon Bay. Every other hospital, we inherit....we kind of... buy it. So as the hospitals were coming together,
they felt a need to train their own nurses. And then they got a very big acquisition through PresMed group. And then they acquired a nursing school with that group which kind of reinforced it. But I just must say that from a business point of view, I mean already then they had a vision for wanting to educate their own nurses. I have to say that. If you think of it, they started educating nurses even before we established a nursing function in this company. And for me that show that the business leaders at the time already had a vision for us, you know a vision for education of nurses. They were not going to sit back and say we are going to get nurses from the public sector; they wanted to train their own.

L: And I think, Sharon, You will be able to confirm, I don’t remember, but it was with the advent of the bridging course that they decided to start their nursing school. Because they had a lot of nurses, at the Princess especially that were from the UK.

S: Yes.

L: and they formed quite a large part of that huge first group of ten students. There were 10 students in the first group. They were enrolled with the nursing council and they wanted, they were upgraded. I think they wanted to use that opportunity as well. But the other person who now lives in Knysna, who would also be able to give you management’s thinking at the time, is Brian Davidson.

S: and Josie

L: but Brian especially because he was very instrumental in starting, getting the infrastructure, etc, you know, uhm, uhm...made the infrastructure available for the nursing school. But the lives in Knysna now. But I am sure you could have a telephonic interview with him?

F: ja, ja.

L: he and Dick Williamson.

F: ja, the way that I have planned the sampling is to start with people who are there now and then find out who were the significant influencers and then trace them and get their input also.

S: all right

F: so it’s the snowball kind of sampling and already you have given me a lot of names of people that I can contact and people that I never knew. Because you were not involved and not on that level. So it’s very valuable to have, to get this information from you. Uhm, like you say Sharon, the Afrox and how the company grew, grew and that is that information available somewhere?

S: Yes

F: because I think, if one could read that from somewhere, maybe an annual report or something like that, it will also give you a very good basis or departure point to get a better understanding of especially how the decision was made to get to the Life College of Learning.

L: the Entabeni college was actually started before the Afrox School of Nursing and was in existence for quite some time.

S: Yes. It’s much older because in 2008, when Life College celebrated 10 years of existence, entabeni, and that’s why it is older than even Gold Fields, and I stand to be corrected, 75 years.

L: Really?

F: is that so?

S: they got some old, old people and they’ve got pictures in their college of some very old people.
L: uhm, in their learning centre.
S: but we can get that for you, the, the...they’ve got the history and Rita Williams will be the right person there, because she was actually a student of Entabeni. And now she is already in her fifties, but she will tell you about older students.
L: Ann Williamson was also a student at Entabeni and she is the nursing manager now.
S: So it’s like, it really goes back a long time and you will see when you look at the pictures. I can’t remember if it was 25 or 75, but I remember they were calling these old ladies and the one lady was 92 years.
L: so it must have been 75,
F: yes, and this could also be verified when I go to the councils archives ...
S: yes, yes.
F: to get information from them, because the information that I get from the interviews will be verified by document analysis and finding proof of what we are discussing or what you are giving me.
S: yes, yes.
F: through the Council archives and yea I have submitted an application to SANC to access information in the archives.
L: There is a book called “the place on the hill” and that’s about Entabeni hospital and the Entabeni Nursing School. And I did have it but I am not sure if I have got it any more. But I am sure the Entabeni archive will have it.
F: ok, ja. And then I was going to ask you where the Life College of Learning was first situated if it is not in the same place as it is today and you have already referred to the Brenthurst...
L: It was Phoenix Place, ja, and Phoenix Place.
F: and then from there?
S: it went to Bedfordview. It was situated in that Bedfordview Building.
L: from Brenthurst it went an office block some distance away from Bedfordview, because I was still there when it moved. I can’t remember what the name of the place was... it was about 2 km away from that Bedfordview building.
S: Ok, ok.
L: and then it went to Bedfordview.
F: ok. And it is still there?
S: No. From Bedfordview it moved here. Remember, when it was at Bedfordview, it was Afrox School of Nursing, the Johannesburg Centre, so the management, the central management and the Johannesburg learning centre, they were based in the same building. And then we had in the rest of the company, remember we had acquired PresMed. So maybe you need to talk about when did PresMed came on board, remember PresMed came on board with the hospitals and the school of Nursing. So you need to put that history in first. That will then speak to how all these other learning centres evolved.
F: Ok ja so, we were talking about the location of the school, first at Brenthurst, then to some office block in Bedfordview, then the building in Bedfordview and then, after PresMed joined, did it then came here to the head office?  
S: no, when PresMed joined it was in Bedfordview. Isn’t it Lesley?
L: uhm, yes. But again when I say PresMed, I was PresMed. So you know, when the school joined, I think the actual people that were in the
hospital, because what we did with PresMed, the, it was like
decentralised. The classes were managed at the hospitals.
S: that's what PresMed brought to Afrox: so, like in Bloemfontein, we
had a classroom, we had an educator and all we had at the learning
centre was Lesley as the manager.
L: ja, ja.
S: so they had one in Bloemfontein, they had one in Carstenshof...
L: we had one at Anncron...was Anncron PresMed? Yes, it was.
S: yes, Anncron
L: ja we had Anncron. Where else did we have? We had one in
Pretoria...Wilgers...
S: Wilgers
L: Where else?
S: In PE you had Mercantile...was Mercantile not PresMed?
L: Uhm, Mercantile...it was PresMed...
S: Because Shereen was in the classroom there, in the little
corner...when I found...
L: but we didn't have students, we didn't have PE students, I am sure...
S: She, she was there, because Shereen was there, because she is
with us for more than 10 years...
L: Wasn't she a clinical training specialist or something? Oh and we one
at Jan S Marais in Cape Town.
S: ja...
L: where else did we have? I'll think a bit and write them down.
S: And Kingsbury? Because where did you bring Edna from? I am trying
to see the people that I found when I came in 2001. Because when I
found them they all had like a room in the hospital. And they were
running their classes from that room. So I found Edna, I found Shereen,
uh; we didn't have anyone in east London...
L: Shereen and Edna must have been additions when Sylvia...
remember shortly after Sylvia came, I left. We didn't have Kingsley-
Claremont but we did have Jan S Marais. We did have students at Jan
S Marais.
S: and then we had Entabeni because I remember finding Barbara
and...
L: But Entabeni wasn't a PresMed... Entabeni was Afrox. Ja.
S: Entabeni was Afrox. And then who else? We had Rose park...and
then we Pretoria and we had our locals. Because I found Annetjie and
Christa and Jean-Anne.
L: Now they were from the Flora and they were acquired when Afrox
acquired Flora Clinic. So they were not from PresMed.
S; ok. So you need to combine the history of the acquisitions into Afrox
and the Premeds integration into Afrox and then you’d be able to tell
which was an existing school that came... because I think they all then
contributed to the Afrox School of Nursing.
L: And the person who worked in the Flora one was Eunice
Lambrechts. She worked in that Nursing School. And she is the nursing
manager at Four Ways now.
S: Ok, I didn’t know that.
L: Ja. She was a nurse educator.
S: Really?
L: In those days.
F: And currently, or let’s say up to 2008, and then, no, 2006 because
that's the scope of the study, where were your study centres or your learning centres then?
S: then in 2001 we started a classroom in east London
F: Ja
S: but remember we didn’t have a classroom in east London. And then in 2003, we acquired Wilgers. We said no, you can’t operate like this. Wilgers was a standalone. Afrox owned it, but it wasn’t incorporated fully, the doctors still kept their shares in it. So they decided to sell and then we had Magda and Wanja sitting there in Wilgers. And then we said, no: we have to have to bring them on board and then we created a centre. And then in 2003 we decided to have a proper centre. This classroom act wasn’t going to work for me. (laughs). Because everywhere we went, it was like: O, today we couldn’t have our classes because they needed the space. And I was, like, beside myself as I visited. And I think: how can they do this? And I still remember going to PE, visiting Shereen. And then I found this girl, she is in the meeting room, but every time they want to use the meeting room they just packed her things away. And she had a tiny little office. And then I called the manager and said that we were going to take this seriously now. And of course I had my big ideas of how this should be. And I remember Beau, one of the hospital managers thought that I just wanted too much. He said: What do you want me to do? I said: definitely not operate like this. It is unacceptable to operate like this. I want a proper centre. You say you want nurse: Let’s train. So what we did then from 2003, we started getting our centres more established, moving out of the hospitals. Like at Wilgers, we said no we wanted a venue. And that how we got those offices across Wilgers where they said we can have offices for our staff and classrooms and all that. And Jo’burg was still in Bedfordview with us. And then we had Bloemfontein. Bloemfontein used to share their class room with the admin people. L: they were in a hub,
S: they had patient services and the tutors sharing offices. And you had to walk through all these people and then by chance you’ll find some people sitting behind a desk and you see that’s your students. So I said: Out of here. And then they got us... so really, it was like getting the business to say: Look, you want to train more nurses, and... But we need your support. We want better premises. And I must say, you know the business came to the party. Because, they knew that we were going to increase the numbers and we wanted better... and now when I look in retrospect, I must say: Hey, you know what, they all... Pretoria has got those lovely offices, you know, they set it up for us. And then Jo’burg decided ... we were in Bedfordview but we knew that we were going to move here in 2005. And we knew that we couldn’t bring them with us. So at the time we said; what are we going to do? We said no, we need to find alternative space. Then the Isidemeni ... remember the Isidemeni, they Life Care at that time, had their own college, it was called the Life Care Training Department or something, and so they needed to give up their school because they were integrating with us, as Life Health Care. So their school became available so we moved our Johannesburg campus to Life training centre. And the East Rand People said: No that’s too far for us to go, and they wanted their own centre. So we got and East Rand Centre.
F: where is that?
S: it is situated in Benoni in an office block. Then in Bloemfontein we moved out of that little house, and then we had, it was a day care centre, Medofs they used to call it. And the n the hospital manager at that stage was so; we had a great nurse educator too. She wanted the biggest and the best and she got it. She took over that whole building. We have got such a big building there. The nice part is that everybody came to the party and gave us a building and gave us offices. So all we as the college had to do was get the numbers. So gave us that and they did it up. And then in Durban, they were inside the Entabeni Hospital. They shared, they gave us, we had one floor where we had our class rooms. But it wasn't big enough. It was quite small. And they got next to Entabeni, a place called Nazareth House which is a real old building. But they gave us quite a bit of Nazareth House as our college. And in East London, I tell you, we had a tiny little room that we shared with the linen room. And the linen staff the ladies that, I mean it just became like a resource centre. Because the staff and students were mingling with those people, some sewing was taking place. They were mixing and in exchange they would answer the phone for us. We shared the kitchen, and I am telling you... laughter. I couldn't tolerate it! Because you phone there and somebody answers and I would say: who are you? No I work here, I am on the machines. Then I realised, the ladies form the linen room were answering the phone. We had one class room there. And then they moved us. And we were right there next to the taxi ranks. So in St Dom's right at the back, they gave us our own college there. Proper buildings, class rooms, everything, we had everything there. But they were always very supportive in East London. And then in PE, we also, we moved out of Mercantile. We had a tiny little room there and they also had a day clinic that they closed, XXX, and they gave us an entire floor in XXX with the theatre and everything that we transformed into a college. And in cape Town, we were in the attic. We are still in the attic but what we done, taken the attic and made it offices and they subsequently built class rooms for us in Cape town at Kingsbury Hospital. But it's been quite a journey from what we had and where we came from and where we are now. We also then as we grew, we realised each of these centres, the centres started growing but we still had one manager at Central. And then we said no. I think in 2006 we had learning centre manager positions advertised and then we appointed a learning centre manager at the learning centres. And the y reported to the nursing education manager at Central. But up until then she about up to 23 people reporting to one person which was quite chaotic.

F: especially if you look at the geographical...distances...

L: yes distances.

S: but everything evolved, because if you think of it our nurse educators, when we had a 115 students, we had 13 nurse educators right? And then we got to a point where, with all the students we were getting the one year we had 350 learnerships from the SETA. So that was a major boost to our numbers. So at one time we had 453 students at one time. And then we went onto this whole thing of recruiting students, self funded students, so now we operate with about 1200 students. And then we had about 15 Nurse educators and we started getting learnerships we used to contract nurse educators on an annual basis. So where we went to having about 52 nurse educators in the
entire college but we must have had a core if about 18 and the rest were contractors. And then in 2006 we worked with the nursing function and we said no: they need to have clinical facilitators. And we will have the educators because our educators were both. They were teaching in the class and they were running to the wards. And it was really getting hectic. And we said no. We will have our core group of educators and you’ll have the clinical facilitators to do the clinical accompaniment and the nurse educators will visit to do the assessments. And that’s how we now have permanent staff sitting in the college and we have clinical facilitators sitting in the hospital. And that is how that also evolved and we cleared that out. I am telling you, it was crazy!

F; ja, I can just imagine, especially as we say, with the distance.
S: and people driving and people getting involved in accidents and falling at the hospital and breaking their ankles. I mean, you just didn’t know what you were managing at any one time because that’s how bad it was. But I think with time, I mean I must say now when I look at it they are much more settled. We are very clear on what we deliver and what they deliver. So I think that is how it evolved over the years. So we had quite a journey. But I have only been here since 2001. And during that time, I mean, I just tried to organise it. I made sure it grows and I organised it. That’s the only job I had to do. But you know Erika, even if I think of it, our graduations, we used to have two graduations per year one was over here in Jo’burg and one was in Durban. In Jo’burg everyone from Bloemfontein upwards had to graduate in Jo’burg. So people had to come by bus, get their student to us by bus. It was such a night mare. And then they graduated. Then we go to Durban. We were also in charge of it. Then we had to fly students and staff from Cape Town, PE and East London to come to Durban. And everything was done centrally. So we like the Jo’burg one we used to do everything from flowers, speakers everything. And there were students arriving. And then to Durban, we had to do everything and try to organise flowers from Bedfordview for Durban! I mean it was a ridiculous thing. I think we did it twice and then I decided I had enough because you could never do anything properly. And the business was not really involved in our graduations. They felt this was a college thing, you do your thing. We are not involved. And then we decided each learning centre is funded by our regions and they will manage their grads. So now we, it’s painful, we have 8 graduations.

F: it’s painful for some people ne?
S: yes, it’s painful for us because we sit through 8 were they have 1. But it is so much nicer because the business is involved students are involved, parents are involved, staff…it so much nicer.
F: I think, you know, I can imagine that each has its own atmosphere, the excitement, you know. I think it makes the staff there also feel but this what we worked towards, to have this grand function and it’s our reward for everything that we have put in.
L: that’s right.
S: you are absolutely right. It’s more pride, because it’s about the PE graduation, it’s not about this coastal graduation.
F: that’s right, ja.
S: they had to come and they had no interest. They were going thought he motions. You could see they were so detached from it, not engaged.
And we permanently on their cases and say: look excited, get involved. And they were like, what are you talking about? So it made a big difference. So over the years they have created their own... And now in 2008, Lesley each of those learning centres became individually accredited. So we have a central management that does the high level things, like curriculum assessment and those kinds of things but each learning centre is now individually accredited with the Council. Which was also like a big achievement for them.

F: JA, it gives a little bit more autonomy and that.

S: Whereas before everything came to central then the manager at central had to distribute them. All the marks came to central. It still comes, but they now have an identity with the council a locally. So Council now talk about the Pretoria learning Centre or Bloemfontein, whereas before it was one. And you know if you have 230 students on one program and everything is coming to central, we had a lot of issues with that.

F: and maybe it’s easier to sort problem out if it’s the learning centre, it goes to them and they deal with the queries and so on.

L: uhm

S; ja. Yea and they know there students. It’s hard for someone at central who doesn’t know the student to know there are two Moodleys on that list. It is absolutely correct that they appear there.

F: and sometimes they have the same initials

L: and they may have the same practical marks...

S; and this is not an error from Council or an error from the learning centre, that kind of thing. So I think that it’s come a long way. And I think as a college as well, then you know we decided it is not good enough for us to grow internally, we grew externally where we said: I mean in 2005 the college opened their...the Life College internal workshop to the NEA. And made it the NEA workshop. So it was really a workshop that we designed for ourselves and we decided that well NEA needed some resurrection. Maybe we’ll invite some other people. And that’s how NEA also got resurrected in 2005 and got going and I became the chairperson and then we created these regional chapters. And we had no space for them and once again the learning centres and LC managers mobilised regionally and got the EXCO’s going and to start having regional meetings. So at national level as well, this college has also contributed to nursing education in that way. And also through HASA, that we also then started to make that nursing subcommittee come alive because, of course I took over the chair and I said: you know we need to make this a real nice committee and the we’ve kept... you know the nursing subcommittee is the only committee at HASA that works and has been the same over the years. Ja. At board level they always say this is we’re only committee that works. That meets on a regular basis, we have meetings, we discuss national issues, we make input on national things, national documents, so that also. And I think that the college has played a big role in getting that going as well. And you know, we continue to play a role in the terms qualifications and any
of the debates that continue to happen. We say we are happy to take lead role and get it off the ground. So I think in more ways than one it made a big contribution.

F: so Initially it was training internally only for the company’s and the hospitals within the company needs. And then you said that you got some from learnerships from the HWSETA, was that in 2006 or...?

S: 2002 but they actually started in 2003. And then there after there was no turning back.

F; ja?

S: because we originally had about a 115 students in 2001 and then suddenly our number went up to 400 and then up to 600. And once we hit the 1000 we never came back. (Laughter). And I tell you, I think the learning centre managers realised and the staff, but the grown so much! Because when we first introduced self funded learners the first time, they couldn't understand how a student could pay fees. I am telling you, but now they are the ones that are selling it now, like it’s their own!

F: So when was the first time that you took in the self funded learners?

S: In 2004

F; 2004 and how many did you take?

S: I can’t remember it now...but I can get it from my system because I have some stats on my system. I can get it.

F: that will be interesting to look at, you know, how many students or maybe go back the first accreditation, what were you numbers that you started off with, what was your first intake for instance the number of student that you took in your first intake and how many of them actually graduate and how the numbers increased over the period of time.

L: I know the first intake was 10 and 10 graduated.

F: oh, great!!

L: and I do have a picture of the first graduation group in the dining room at Afrox House in Selby.

F: and was that in the ENA course?

L: No Bridging

F: So you started wither bridging?

L: Yes.

F: and when did you started the ENA and EN course

L: That I don’t know...

S: I think that started with Marietjie...
L: Cause I only did bridging

F: Ok. And then currently, I have got a list of all the programs that you are now presenting. Is the information on the website accurate with regards to the courses? But we can verify that ...and cross check which course you are presenting. And then if we can look at eh stats, you know where you started and how it increased over the period of time up to 2006, what were the numbers? Because if we look at the contribution to nursing education, we need to have the stats to say this is how it has grown. And we can also look at then, how many people were retained in the company and how many were available to go out to ...

S: That will be hard. Initially it was more internal people but to track people post completion is a challenge.

F: I know it is. But more or less, maybe we can have rough gestimate of... I want to say that those that you did not employ, obviously they went somewhere else. Although we cannot say if they went to private of if they went to government. Because one of the things that we want to point out is to say that private is not only training for private. They are also training for, and especially now also training for government.

S: We had lots of PPI’s over the years as well with various departments of health. Like the Limpopo Department of Health. In 2003 they approached us because they were not offering post basic training. And we did post basic training for them for at least 4 years through the college with a lot of pain. Because they were registered nurses, initially they came to us, joining our students, we saw the standards were so different and when we put them in our hospitals there was such a lot of push back from our own staff and doctors. And then try, and eventually it was like a whole capacity building program. We helped to develop their own program for accreditation with SANC; we helped then develop their learning material, their tools. And then they were weaned off us. It was such a tough journey. But that is how they got post basics. Up until then they did not have post basics.

F: And that was such a big contribution and you know the fact that you can say that you weaned them off and they are now functioning independently is such a big success story because it so easily happens that they get so dependent, that they don’t want to let go and do it on their own.

S: it is interesting when they first joined us, they hated it because they just felt that we were too structured and you know everything, there were just checks and balances about everything and they just found it difficult. Especially the tutors. They couldn’t understand that there is a time when you return the scripts. There is no such thing as you keep the scripts and you decide when you give it. No, you give that marks at a certain time. And the hated it. And they always said that they mark in their spare time. And we said that you owe it to the students, you have to give the marks. But now, when they see us they always say: thank you, thank you. We have learnt such a lot from you people. But it was a painful ride. We used to have lots of arguments. Like little things, like promotion into the next year of study into the next course. We used to
say, no, it’s not acceptable. These students cannot write the exams, did not meet the requirements, oh they were up in arms, and they used to write memos and all. But we just said sorry, we can’t do this. And we used to take it to the Senate and everybody used to know. But it has been such a challenge. And that in it showed me the difference between public and private in terms of, you know, I think we felt that we were a lot more firm and stricter in our requirements.

L: Yes, I know I wasn’t in the college at that time but, gee whiz, I remember all the flack that came from the doctors at Flora about those students. 29 min

S: and you see it became a racial thing because they were black students.
F: yes and they can easily turn that into you know an issue like that into well, thinking it is to their own benefit.
S: and we also applied for the 4 year program. And did all our accreditation and had everything done. And we still have the letter from the council where it was said that it was approved pending our CHE approval. And then when we got CHE approval in 2006 or 2007, and we sent that letter to the council, then they just decided they are going to keep quiet about it. After so much pain. So we actually have the council to thank we have CHE accreditation. Because they pushed us into that direction. But we did a lot of work on that. We even took a batch of students, bright students that we were going to fast tract on this 4 year program.
F: and in the end it never...
S: but we made them do ENA, EN and Bridging all in one go. And got into trouble for that too because it was not allowed. Laughter.
F: I am sure there isn’t one school who can say that they never were in trouble with the nursing council for something, you know. I mean sometimes it’s just like we said the other day. It’s been allowed for so long and then all of sudden, here comes this thing that you not allowed to do it anymore. Anyway, the Council always keep us on our toes. With learning centres then all over the country then, Do you also draw your students from all over the country and do you have requirements or can KwaZulu Natal draw from any where or how do you regulate admissions to your learning centres?
L: ja, we get applications from everywhere. And I suppose what would happen is in KwaZulu Natal, if they get an application form Mpumalanga, they would let them know that there is a learning centre in Mpumalanga if they wanted to apply there. And we have our selection criteria.
S: We do have students who are from KZN but want to train in Jo’burg and then want to go back home in the middle of their training and they are allowed to.
F: So the articulation between the different learning centres is an easy process.
S: and they all have similar intakes so it’s not so difficult for a student who’s up here want to go back home or anything thing like that.
L: and all the learning centres follow exactly the same program and the block program is also very similar.
F: so there are, I don’t want to say duplication, but...maybe...
S: replication...
F: replication of processes.
S: yes.
F: do you have one intake per year or more than one intake per year?
S: Many. Because everyone wants to do it when it suits them, you know. And also we are terribly controlled by the nursing council. So, ideally we would like to take all our students in January and finish up in December. Then we can also have a nice holiday. But with the nursing council we have to take some in Jan, some in Feb, Some in March and then it starts again, April, May, June and then we have sometimes in August. And I think that's it. And we have our internal short courses in July and August and we have post basics in March. So it's almost like the whole year round, we are, we have intakes, we have intakes or completions, intakes or finals. So how it's working. But I think with the new qualifications we want streamline it. Just to make it easier for all of us. Because you tend to forget about certain groups and where they are.
L: especially when they extend you tend to get totally confused about where they are.
F: the frequent intakes also, doesn't it make it easier for a student to extend because they can easily slot in with another group so it's also beneficial to the students and give them an opportunity that would not have been there?
S: true.
F: Okay. Then the stats, we can look at the stats and you say you have them available. I would like to have the, you know on the numbers of the intakes and the numbers and then the throughput that you also had.
L: For which dates do you want them, Erika?
F: I would if possible I would like to have it for the full period to end of 2006.
L: Oh till the end of 2006, from when?
F: from when you started. Uhm, I will look at eh information that you gave me, you know the background, if we could maybe just get a very summarised version of what they did before it became Life College and just a small part on what PresMed did on their own and what happened in the individuals but more concentrating on the bigger institution as it is now up to the end of 2006.
L: and I suppose, failing, failing all we can get those stats from SANC. You know your registrations and completions.
F: ja, I am sure (laughter)... I am sure... I will try to get it from SANC, they should have records of that but how easily accessible it will be is another question. Okay. And then one of the questions is what would you describe as your biggest achievement for the life college of learning or the nursing college?
S; I think it is the accreditation of our learning centres as individual units as well as our accreditation with the CHE because remember we have always been accredited by SANC and also our, the fact that, ja and we are registered with Department of education. That was a big achievement for us. Took a lot of work but we got it.
F: and did this happen before 2006?
S: oh no, after.
L: Well maybe the establishment of learning centres as kind of, not as distance learning but the establishment of the learning centres.
S: as units, decentralised. So maybe the establishment of Life Nursing College because Life College of learning is not a nursing college. It is made up of 3 units, it is a school of nursing that has its 8 learning centres, it’s a management and leadership unit and it’s a school of health sciences. So for us that was a big, because that where we started to diversify and was in keeping with all the educational requirements that everybody wanted accreditation and that kind of thing. And then getting our learning centres organised from where they were, as little class rooms to established units.

F: ja, ja. And when we look at your academic results? Any...maybe groups where you performed very well? Maybe a lot of distinctions, other awards that some of your students may have...?

L: well maybe last year. I mean those results were excellent, so we must just get those results out for you, because some of the learning centres had excellent results.

F: and Sharon, the PPI that had with Limpopo, I think that was a big achievement.

L: and we still have an existing one in PE. I mean we trained a lot of students in that PPI.

F: okay. And any community projects where you are involved in?

S: Uhm. We are very big on community projects. Every one of our learning centres has their own CSI. And they get money from central, from our company to support their community social investment projects. So every two years they change their projects. But every centre has a project and all the students go and support the project. And they do j=fund raising and they do a lot of activities. So there is a lot of social responsibility that they do and uhm, then we see the NEA as our social responsibility as well. Because we give up of our time, our efforts. NEA operates out of this building, or for now. All the printing happens from here. Mailing, all the secretarial services, everything happens for NEA. So, that's what we do.

F: ja. And the biggest challenge that you faced?

S: Uh... I think my biggest challenge is being ... the whole thing with the Nursing Council where the regulator doesn’t always understand, and once again it speaks to what we said earlier, the difference between a hospital-based training provider like ourselves and the independent training provider, you know nursing schools. And we often get put together and so something as punitive as having a moratorium on private nursing schools, for me, was really punitive ... to private health... because if you can safely say that a moratorium during a period of nursing crisis is something that can be accepted, I mean in our books were totally unacceptable. And that's what we fought for... well they had to lift it. And it took 5 years, they don’t acknowledge it, but that is the truth of the matter. And we feel that that was a challenge and that was like discriminating. While we feel that within private health care we are making a contribution and which I think we did, we do. Because you know we do so much for the public sector. Any of the universities or public colleges can phone me and I can run a workshop for them. You know we never ever charge them, we make ourselves available, and we share our information. And so we feel at our level we are, you know, we cross boundaries, we go and work with the public sector, we make ourselves available. But in the Councils eyes, I see privates, privates are always, there seems to be, there is a level of discrimination. And it's
always attached to the fact that privates make money and privates train their students and I don’t know what. And I feel that for me, if we can get that mindset to change. I have to tell you I am on that permanent campaign at the Council. I actually punish them now for the publics that are left through. I say no, I am not going to let that through. I am objecting and I want my objections to be stated. Because just now we had a private, say asking for the same thing and we said no. So how can we have double standards? You see? So, so for me, I don’t know Lesley what you think?

L: No I agree with you. That is the biggest challenge.

S: Uhm. I think the Nursing Council needs to change the way they see privates. Because privates are slow... they are making a big contribution and that is not sufficiently acknowledged.

L: Ja. I agree. I want to almost add, I think the systems at Council are also a bit of a challenge when it comes to student records and you end up with problems as a result of very slow systems at council. But I am not sure if that is fair because I understand that they are busy jacking them up. So

S: Ja.

F: and then what is your vision for the future?

S: oh, my! (Laughter) it must be a university. No really we just feel that the new qualifications come with a lot of opportunities for us. We are going to concentrate on the National Diploma to train more staff nurses. And we are still thinking whether we will be participating in the post graduate diplomas. Once again driven by business needs, those are the areas where we have biggest need. And if we, we feel if we just focus on that that’s where we will be able to meet the resourcing needs of our company. So that’s what we’d like to do going forward. That’s our vision for where we want to be in 2012 in terms of our accreditation. So we will be working on that. But obviously that requires planning. It also means that we have to look at our own staff. Because to give a do a post graduate diploma it means that you must have a master in that area and we don’t, we still working on that, whether our staff will all meet that and how will we mitigate that kind of risk where you have a great nurse educator, she is a specialist, but she doesn’t have the higher qualification, so what do you do? And for me, my vision is that some day we in the private sector will join hands and instead of reinventing the wheel in our small little patches, that we will really pull nursing education together and show the other groups how you can do it right. Because I think what we do have to our benefit is that we have great hospitals they are the best environment for students to learn and we in the private sector is not marketing that well enough. Because if you have to compare a public hospital at the Johannesburg Gen and a Flora, and you have a school child and you take them to both those hospitals and you say: which one would you like to work in? The natural choice will be Flora. You know from the layout, the cleanliness, all that.

L: the conducive environment

S: and I feel that we are not using that adequately in private to promote nursing, to get people to respond. We keep falling in with the rest of crowd who keep saying nobody want to come to nursing. No. I am sure if we show case our hospitals more, children would want to come and work in our hospital. I would love to go back to nursing in anyone of the private hospitals. Because I just think I’ll be safe. And I have all the
necessary resources to do my job.
L: yes absolutely.
S: and I feel that is one of the things that we must still do in private. We
don't do enough of that. Don't you think so?
F: I agree with you.
S: we are not marketing that. We are not going to the schools and bring
them round and do a little tour of our hospital and all that. Surely these
young children will feel encouraged and say: It doesn't look so bad. It is
actually quite nice. Quite a jacked up coffee shop here (laughter). I just
think of my daughter: coffee shop! Hey this is where I need to be!
Because that is how they want to be. So they won't get that in the public
hospitals.
F: we went to one of the private hospitals; I can't remember which one it
was. But my son actually said it looks like a mall. It doesn't look like a
hospital.
S: yeah, yeah. If you go to George and PE, if you see how lovely they
have made it! Like you can have an appointment with somebody in the
St George’s coffee shop.
L: ja, exactly.
S: it is really done up so nicely, it is a lovely entrance. It's like the
airport, that's how it looks. For me, we are not using that enough to
attract people into the profession, because I think we are in the pound
seats, and we are just falling in with the rest of the crowds and saying
nobody want to come in to nursing. No I think they will want to come.
L: ja, if we make that effort.
F: so have you got an active recruitment campaign or is it mainly word
of mouth?
S: ja, we don’t... now we are getting a marketing strategy for the college
in terms of getting students. And the reason why we couldn’t market in
the past was our entry level qualification was an ENA. So you can’t go
to school children who are competing with going to university, going to
be doctors, accountants and all and saying my offering is a certificate
as a nursing auxiliary. You don’t stand a chance. Whereas now we
know we can go and offer a national diploma and you have to meet the
requirement of the diploma and you can come and train with us. So we
feel that we may be better positioned to have an active marketing
strategy going forward.
F: Okay. Thank you very much. I really appreciate it. It was really
interesting to hear all this and I must say there are a lot of this that I can
identify with from my previous experience at Gold Fields, especially
when you say you was put in this little back room, you know? We had
this lecture room and the ceiling was actually caving in and they stuck a
pole in there. So her you are with this pole in the middle of the class
room. You know, ja, it is always, you wonder why they think that nursing
can so with the least and the poorest facilities that are available?
So thank you very much for your time Sharon and Lesley.
L: I also learnt a lot about the life college
S: You know and I think because I have been here now for 9 years in
the college, I am so proud of where we were and what we have
achieved. You know we didn’t have basics like a desk to work on and
for students. And over the years you buy 20 at a time. 20 desks and 20
chairs and all. And we have really grown. And that is why I always say,
you know, you mustn’t stay too long because now I get very sensitive
when people say we have got nothing. I am like: what? You don’t know what nothing is.
L: ja. True!!!
S: You know what I mean? This is something! This is what we have achieved over the years by just asking people, working with people. And now you say we have nothing! I want to kill you! Get out of here! You get sensitive about what you won.
F: but that is what you have achieved over the years
S: and we have always focused on our staff development. That has always been something, irrespective of how small or how big we were. I always said that they need to be developed. And there is a crowd who has always been resisting. We used to bring them up once a year and we used to work till 8 o’clock at night. O, they hated it; they hated it with a passion.
L: ja
S: but you know I just say it was to their benefit. Because they have always remained updated. Now, that is also one of the challenges: now that they have decentralised, it’s about them sustaining that learning culture. The learning v=centre manager are saying: hey, we can grow, we can increase our number but we also need to stay on top of our game. You know it is about them pushing their staff. You know when you grow; you have to understand that you can’t have control over everything.
L: that is true!
S: because other people take over, and then they start running it, like you know the learning centre managers especially. So if they don’t focus on their staff, they are not developing their staff, and you can cry and shout here at the central, but it’s their call. So ...
F: are you also then looking at bringing the evidence based practice into the curriculum?
S: oh we like the evidence based practice. It’s the way to go. We belong to this ISO and ISO is about evidence. So we have already had that culture if that...what is that slogan you will use? Do it...
L: Uhm, uhm, do it... don’t...say you do it...or do it, let’s see it...something like that.
S: Does it, write it, and proof it, something like that. They had a slogan when we did the ISO. We said it’s not good enough to say: I did it. You must be able to proof it. Something g like that. But it was really nice. So I say we already have that culture in our business. So evidence based practice is not going to be new to us. It’s going to be a continuation, an extension of what we are already doing in our business. Because our nurses who work in our hospitals have to work like that. But we see in nursing it’s a challenge. Nurses are not used the specifics, saying there is the evidence. And really, if you think of it hey, that’s where the critical analysis comes. This lady who presented the workshop, she said if somebody said something about the evidence, I know this or so, and then she would say: I God I trust, everybody else must bring evidence.
L: I mean it even came up yesterday with that whole debate on midwifery, you know. Where is the evidence?
S: because you have...and that’s how the nurse educators must think and then they can force their students. When the students says, oh no I got that, where is it? You’ve got to... it’s a culture. It’s not...it’s not going to be how we manage the nursing process. You know at one time we
were so nursing process orientated, then for the past few years we are evidence based practice. But it is a culture, because the nursing process was also about did you assess, plan, im... what...do you implementation and evaluate. It was permanently about those four concepts. You know what I mean? So that is where I think we are going with it. But we'll see how it goes. But we would like to have it. We want to different things in the new qualifications around assessment and all. But we must all be ready for it.

F; ok thanks again then. Good bye.
APPENDIX Q

Volume 1.
Dis nou Vrydag, dis die 12 November 2010, en ek begin nou vandag met Afrox School of Nursing se lêers.

Hierdie lêer was voorheen Ammed Medical Systems. Hier is ’n brief gedateer 13 Desember 1985 wat gaan aan Computerised Patient Diagnostic and Treatment Systems, Sasep and Cat. Die verwysingsnommer: S1339.

Kommunikasie rondom hierdie rekenaarprogram vir die primêre gesondheidsorg gaan voort. Ek probeer net uit-figure wanneer is die – of waar die eerste dokumente rondom die skool is.

Miss Woodward
It was very nice meeting you last Thursday and thank you for your time and interest in our projects. Mr Williamson – could be Williamson – has asked me to get the following information and I wonder if you could assist me in obtaining it: a copy of the course curriculum for registered nurses, enrolled nurses, assistant nurses; the number of student nurses nationally who take the registered and enrolled nurses final examination each year, and the pass rate.
And it comes from Matron Elaine Appleyard.
Brief 9 July 1985.
To Miss Appleyard
Thank you for your letter dated 2 July. I enjoyed the opportunity of meeting you and hearing about your most interesting programmes. I have pleasure in enclosing the regulations and directives for the courses for registered, enrolled and nursing assistant courses. You will appreciate that these documents specify only minimum requirements and that each training school develops its own curriculum. The following are the statistics you require in respect of examinations.

Dan volg die statistieke.

You will see that the final examination for general nurses comprises three parts. A student who fails one part reclaims credit for the parts she has passed. It is impossible therefore for me to give you the overall pass rate, but you can judge for yourself that in excess of 70% of candidates must pass the whole examination. I hope that this information will be adequate for your requirements.

You mentioned that you would be interested in attending the next sitting of the disciplinary committee. This will take place on 29-31 July 1985 in the Council Chamber and commences at 09:00. I would advice getting here reasonably early as many of the local training schools and universities send students so that seating accommodation is at a premium.
From Miss Woodward

Brief van Amalgamated Medical Services Limited (Ammed) to the Registrar
The Afrox Group of Hospitals in Johannesburg, that is the Brenthurst Clinic, The Florence, the Princess Nursing Home, the Lady Dudley Hospital and the Glynnwood have received copies of the proposed directives and regulation for the new one year nursing assistant course. I believe from Miss J Berman that current training schools will need to reapply for permission to train for the one year course. I would appreciate it if you could supply me with details of the requirements for the registration as a training school as well as the clinical practical requirements for the new one year course as that aspect does not appear to be covered in the documents I have.

Lois Keen
Nurse Educator, Afrox Health Care Division

So it seems that there were already registered by then but there is no evidence in this file. I’ll have to go back and find another file.

Reply to the letter on 26-10-1988
Your letter dated 27 August 1988 refers. The course which you referred to has not been promulgated in the Government Gazette and therefore no information can be given at this stage.
From HJ Fouche

Dan is hier ’n brief gedateer 8 Desember 1988
Training School approval for new nursing assistant programme
Please find enclosed three documents: the motivation for the approval of the Afrox Health Care Division Hospitals in Johannesburg area as a training school for the new nursing assistant course, including the curriculum outline, the syllabus outline, and an example of a practical file document. It would be appreciated if these documents could be reviewed at the Education Committee Meeting in February 1989 as it is anticipated that we would commence training under the new guidelines on 1 June 1989. We look forward to a positive response.
Miss L Keen
Nurse Educator

Then there is the Nursing Assistant Course with a lot of information, there is a practical file Brenthurst Clinic, there’s a situation on analysis...
Yes, Keen, dit is die persoon wat Lesley Fletcher en Sharon na verwys het in hulle onderhoud - Lois Keen.

Die antwoord op hierdie brief:
18-01-1989
With reference to your letter of 8 December 1988 and the application for approval as a nursing school for enrolled nursing assistants, I regret to inform you that the application can only be considered once the revised regulations for the course have been promulgated.
D Welthagen

16 Maart 1989
| Institutions of in the post-basic courses in the Afrox Health Care Division. Afrox Health Care Division has been granted permission by the Transvaal Provincial Administration to undertake nurse education for the Diploma in Intensive Nursing Science, Diploma in Operating Theatre Technique in conjunction with the BG Alexander College of Nursing once treasury permission for new increased college fees has been determined. Enclosed herewith for your information is a copy of the letter from the TPA, a copy of the motivation submitted to the BG Alexander College of Nursing. We would appreciate a Nursing Counsel inspection of our group hospitals concerned as soon as is appropriate. Again Mrs L Keen

Dan is daar – there is a document from the Transvaal Provincial Administration
13 January 1989.

Institution of post-registration courses in the Afrox Health Care Division
It has been approved that the Afrox Group send students to the BG Alexander Nursing College for the required courses provided that the following conditions are met, namely: a maximum of five students per group shall be allowed of which only one may be of one of the other race groups; that all students must comply with the selection requirements of the college, that the date of commencement of the training should be determined after the amount payable for each student has been agreed upon and approved by the treasury.
Thank you for your interest and cooperation.
Signed by – could it be Jordaan – no it can’t be - looks like someone else...

Then there is a motivation for the approval for Afrox Health Care Division Hospitals as accredited clinical facilities for the diploma in Intensive Nursing Sciences and Operating Theatre Nursing Science in conjunction with BG Alexander College of Nursing, Hoping to commence training in March and April 1989.
Diploma, there’s the Aims and Objectives and everything concerning that.

Dan is hier ’n brief
4 April 1989
The clinical facilities of Afrox Health Care Division Hospitals for the courses for Diploma in Intensive Nursing Science and Operating Theatre Nursing will be inspected by Miss Bierman and Miss De Witt, professional officers of the Council: 13 April at Princess Hospital and Florence Hospital and 14 April Brethurst and Lady Dudley. Please note that the dates of the inspections are subject to change.
Welthagen.

And a copy for the information of Amalgamated Medical Services

Then there is an inspection report.
Na aanleiding van samesprekings met die Clinic Holdings Groep, is aansoek
gedoen om in samewerking met die SG Lourens Verpleegkolkollege, die
nagraadse registrasiekursusse Teater Verpleegkunde en Intensiewe
Verpleegkunde aan te bied. Om kliniese geleenthede te voorsien, sal van
HF Verwoerd en Jakaranda Hospitale gebruik gemaak word.
Die brief kom van SG Lourens aan die Registrateur.

Dan is hier ’n inspeksieverslag.
Approval of Clinic Holding Limited Group of Hospitals as an extended
clinical facility for BG Alexander College for Nursing, Garden City Clinic,
Milpark, Parkrand, Rosebank, Rand Clinic, Union Hospital, SG Lourens
College of Nursing, Netpark Clinic and Jakaranda Hospital. To be inspected
at a later date: Unitas Hospital, Verwoerdburg, Krugersdorp Private
Nursing Home.

*Dan is hier die verslae van hierdie besoeke wat gedoen is. Lyk asof dit ...*

General outcome: the following hospitals/clinics were inspected for the
purpose of the approval as an extension of the clinical facilities of the BG
Alexander College for Nursing for Operating Theatre and Intensive Nursing
Science: Parklane, Garden City, Milpark, Rand Clinic. Present available
learning experience at both the Parklane Clinic and Rand Clinic are
inadequate for the post-basic course in Intensive Nursing Science.
Parklane: the present unit is small. There are only four beds and the
available learning experiences do not warrant the placement of intensive
care candidates. The new unit is in the process of completion and
reapplication should be submitted once the building additions have been
completed and suggested changes with regards to a scientific approach to
nursing, availability of policies and an understanding amongst the nursing
staff of the legal parameters of the practice of nursing.
Rand Clinic: This unit is also small and the type of learning experience
available for the candidates form a very small component of the
curriculum. It is felt that the candidates would benefit more from the
placement at other units where a wider variety of experiences can be
offered. All of the other facilities meet the minimum requirements for
training. The inspectors recommend that these hospitals are approved as
an extension of clinical facilities of the BG Alexander College of Nursing.
The tutors offering the courses ....... That the BG Alexander College of
Nursing have inspected the above hospitals/clinics and are in agreement
with the findings of the inspectors.

The inspection of the Clinic Holding Group as an extension. Date of
inspection:
Jacaranda Hospital: it is recommended that the above hospital be
approved as an extension of the clinical facilities of the SG Lourens Clinic
with the proviso that special attention be given to professional
development and the creation of a suitable infrastructure relevant to the
training of post-basic students.
NetPark Hospital: the geographic outlay of the theatre complex with
regard to clean and dirty areas is in the process of being re-planned and
the person in charge of the theatre complex at present does not have a diploma in operating theatre technique. Only the matron in charge of the clinic and one other person has the additional qualification. These aspects, in addition to the other already mentioned shortcomings with regard to teaching at the NetPark Hospital, indicate that the hospital does not meet the minimum requirements for the training of post-basic students.

SG Lourens, represented Miss Pelser, was present and in agreement with the findings.

Positive aspects: The staff is keen and enthusiastic to be involved in teaching. Adequate learning opportunities are available but must be correctly utilised. There is an excellent body of expertise available. The following aspects, general to all the clinical areas, need urgent attention: clinical support system: the present staff structure does not allow for a student accompaniment. There is no educational awareness, evaluation strategies, teaching objectives, measuring instruments and very little, if any, structured teaching programmes. No written standards are available. There are no written policies. Scientific approach to nursing and record-keeping is not in practice. There is inadequate knowledge with regards to the legal parameters of the practice of nursing, scope of practice, admissions and associated legislation.

Clinics Holdings was represented fully for the inspection by Miss S Hamilton, the director of nursing, and Mrs M Polini, the tutor. The problem areas were discussed and the assurance was given that many of the problem areas would be looked into immediately.

_Dit was nou Clinic Holdings, so hier is bietjie van ’n mixture wat ek glo ook ...

Dan is hier BG Alexander – Bre nthurst Clinic – General comments.
Dit gaan oor Bre nthurst, Lady Dudley, Florence Nursing Home en Princess Nursing Home

The general attitude to the training of post-basic students was very positive and there was great enthusiasm with regard to the involvement of the nursing staff in bringing about the changes necessary to secure an infrastructure conducive to a teaching environment. System of record-keeping: A great deal of time has been spent on the development of nursing/patient record and a pilot study is presently been done at the Florence Nursing Home. It is envisaged that this document will be available at all of the other hospitals in the near future. Professional development is ..........
Hier is nou ’n brief – 10 Julie 1989 van Bre nthurst Clinic Afrox School of Nursing, 3 Phoenix Place, Bre nthurst Clinic. Bridging course. Please find enclosed two documents: curriculum outline for bridging course in Afrox Health Care Division, motivation for the
approval of Afrox Health Care facilities in Johannesburg for training and education for the bridging course.
The Afrox Health Care Division hospitals in Johannesburg wish to gain approval for training in the conversion course for enrolled nurses to gain registered nurse status. The School of Nursing is at the above address. We would appreciate it if you could inform us as soon as possible about approval for the training and education of enrolled nurses on the bridging course.
Lois Keen again - Signed by

Dan is hier ’n curriculum
Afrox Health Care Division
Bridging course – curriculum outline, Johannesburg School of Nursing
Starting with the philosophy of the AF……...

And here of the Johannesburg School of Nursing derive from the Entabeni College of Nursing … en dan gee dit die curriculum inligting met al sy goedjies

2 Augustus 1989
Weer van Ammed
Inspection of Hospitals - Afrox Health Care Division
I would hereby wish to request the inspection of the following Afrox Health Care Division hospitals for involvement in nursing education: Brenthurst, Florence, Princess, Lady Dudley, Glynnwood. Inspection would be for the approval as clinical facilities for the following courses: Bridging Course for Enrolled Nurses; the new one-year Nursing Assistant Course, the Diploma in Intensive Nursing Science and the Diploma in Operating Theatre Technique offered by the BG Alexander College of Nursing. The Glynnwood only for inspection as the other hospitals involved have been inspected. We would appreciate a speedy response to this request as the documents for the bridging course and nursing assistant course are to be submitted to the October meeting of the SA Nursing Council Education Committee.
Lois Keen

Dan is hier nou weer ’n brief
Amalgamated Medical Services Ltd
2 Augustus 1989
Bridging course – Afrox Health Care
Following a discussion with Miss K de Witt on 31-07-1989 on original documents submitted, I would hereby like to submit the following: motivation for approval of clinical facilities and training school, curriculum outline for bridging course. Clinical evaluation instruments are the same as the Entabeni College of Nursing documents which were modified from the Natal College of Nursing documents. Permission has been sought to use these modified documents.

So, hier kom Entabeni nou weereens uit dat dit vroeër bestaan het as
hierdie plek in Johannesburg.

En dan is hier ’n curriculum outline, bridging course:

Hier is dan ’n brief vir die inspeksie
The following institutions will be inspected by Miss K Bierman and De Witt, professional officers of the Council:
Princess Nursing Home – 7 September
Florence Nursing Home – 7 September
Glynnwood Nursing Home – 8 September
Brenthurst Clinic – 11 September
Lady Dudley Nursing Home – 11 September

Hier is ’n brief van Ammed – 21 August 1989 – to the Council
The Diploma in Ophthalmic Nursing Science
Enclosed herewith are three documents: a motivation for the approval of the diploma in Ophthalmic Nursing Science run by the Afrox School of Nursing, Appendix 1 and 2 being examples of the evaluation documents for the course.
We would appreciate it if these documents could be submitted for approval at the October meeting of the Education Committee. All examinations for this course will be conducted with the approval of the Nursing Council.

Dan is hier ’n brief van die Natalse Provinsiale Administrasie
Natal College of Nursing
Your telephonic communication on 31 July 1989 regarding the above refers. It is the evaluation instruments. It will be quite in order for your college to use evaluation instruments adapted from those drawn up by this college. The sharing of knowledge and experience benefits nursing as a whole and can certainly save considerable time.

Hier is nou ’n brief – 5 September 1989
With reference to my letter of 21 August 1989, I must inform you that the cost relating to the inspection of the hospital mentioned in my letter for approval as a nursing school for the bridging course and for the course for enrolment as a nursing assistant amount to R837. This amount is payable by your institution.

Ek het dit nou nog nie by Goldfields enigsins gekry nie. Of ja, daar was tog ’n rekening in Ghandi Mandela

Dan is hier ’n nou ’n follow-up inspection of Glynnwood Nursing Home, Princess Nursing Home, Lady Dudley Nursing Home in Oktober 1989
Inspeksiedokument
For the enrolment as a Nursing Assistant from Afrox Health Care, Afrox School of Nursing, Brenthurst Clinic, Johannesburg. Street address: Phoenix Place, 7 Parklane, Johannesburg
Comments: the central school for the following hospitals: Princess Nursing Home, Florence Nursing Home, Brenthurst Clinic, Lady Dudley Nursing Home, Glynnwood Nursing Home.
The person in charge of the school: Miss L Keen
And the comment is that Miss L Keen, the nurse educator, will be the coordinator of the course; each of the clinical sisters will be involved in the aspect of the theoretical input which will be presented at the school; wish to commence in January 1990. One could not get a clear indication as to the number of candidates or how many intakes it will be according to their needs.

Clinical facilities: It seems as if Mrs Keen was the only tutor then and then the clinical teaching sisters at each hospital, but their names are not mentioned anywhere. There is also the same document for the bridging course and it’s basically the same information as it was there. She is also – Miss L Keen is the nurse educator, has a half-day appointment at Afrox. She is therefore concerned with post-basic courses, theatre and intensive care, as well as the bridging and nursing assistant’s course.

*En dit is alles dieselfde...*

Dan is dit weer die Ophthalmic Nursing Science letter - 17 October 1989
Motivation for the Ophthalmic Nursing to be run by Afrox School - should be a college.

Hier is dan ’n brief weer van 18 Oktober 1989
Afrox Health Care Division
The following discussion with Miss K de Witt on September 1989 on the documentation submitted on 02 August, I am enclosing an elaboration of the theoretical content of the bridging course as well as the clinical allocation for the Johannesburg hospitals of Afrox Health Care Division. A micro curriculum has been developed and is available if required by Council. Clinical objectives for the various clinical areas have also been developed.
We look forward to a positive response.
And is still signed by Lois Keen.

En hier is dan nou die bridging at collection – Senior Certificate
Criteria set same as Entabeni - approved
College attendance: 10 weeks per year – allocation as listed
Evaluation instrument is from Natal College – permission obtained –
examinator ........ professional officer - moderation also assisted by a professional officer.
Facilities: Brenthurst, Florence, Lady Dudley
**Communication:**

**Inspection report – Afrox School of Nursing**

7/8/11 September 1989

General comments: Afrox School of Nursing has requested approval for their curricula and facilities for the following courses: bridging course for enrolled nurses leading to registration as a general nurse; Certificate for enrolment as a nursing assistant.

The Nursing School: Miss Keen is presently the only nurse educator at the nursing school and is appointed into a half-day post. Mrs Keen is also concerned with following up of post-basic theatre and intensive care students. She is the coordinator between the BG Alexander College of Nursing and the Afrox hospitals used as extended facilities for post-basic ... coordinator for the bridging and assistant nurse programmes. There are however plans to appoint another registered nurse to assist with the teaching.

Clinical facilities: The following facilities meet the minimum requirements for the training of students for the bridging course and assistant nurse’s course: Brenthurst Clinic, Florence Clinic.

The following facilities do not meet with the minimum requirements: Princess Nursing Home, Lady Dudley Nursing Home, Glynnwood Nursing Home.

The staff structure was problematic for the following reasons: there was a heavy complement of agency staff in two of the above nursing homes, the agency staff were not involved in the teaching of students, the clinical sister already had a full work commitment without the additional involvement in these programmes, there was not always registered nurse cover in the wards, the ward sister/staff were not adequately prepared for the involvement in student training.

Recommendations: The number of candidate from each clinic or nursing home should be limited, adequate accompaniment for all categories of students be maintained, special attention be given to the orientation of the present staff with regard to the implementation of both the bridging and the assistant nurse’s programmes; placement of students should be organised according to the availability of expertise and learning opportunities at the different hospitals and re-inspection during October to the three facilities that do not meet the minimum requirements.

Follow-up inspection: The Glynnwood and Princess Nursing Homes were re-inspected on 27 October. Additional registered nurses have been appointed and the balance of the vacant posts will be filled once the hospital is functioning fully. One of the matron’s posts has been converted to a clinical post to ensure adequate accompaniment of students. An intensive programme has been conducted with regards to patient documentation and the teaching role of the ward sister.
Princess Nursing Home: certain wards have been identified for student placement. Additional permanent registered nurses have been appointed and an additional registered nurse post is to be converted to a clinical post to ensure adequate accompaniment of students. This hospital however still realise heavily on agency staff for night duty, in that approximately 50% of the night duty staff are agency staff.

The Glynnwood and Princess Nursing Homes meet the minimum requirements for training of students for the bridging programme and assistant nurse’s course.

Dan is hier ’n brief van die Princess – 31 Oktober
This is to certify that we have appointed an additional clinical sister who will be responsible for bed-side teaching on your recommendations. Sister H Craven will be appointed to the post as of 1 January 1990. We hope this meet with your approval.
Kind regards
Mrs Welken

20 November 1989
Bridging course tutor
The person who has been appointed as bridging course tutor for the Afrox School of Nursing in Johannesburg is Mrs Lesley Ann Fletcher. She has the following qualifications: registered nurse, registered midwife, diploma in Nursing Education, BCur Education Admin and Community Health. She obtained her qualifications in 1975, 1977, 1980 and 1982; currently completing her BA Hons in Psychology.
Signed by Lois Keen

Dan is hier ’n brief – 14/12/1989
Application for approval as a nursing school to offer the bridging course for enrolled nurses leading to registration as a general nurse and to conduct the examinations on behalf of the Council in conjunction with Entabeni hospital.

With reference to previous correspondence in this regard, I wish to advice that the application has been approved. I wish to bring the following with regard to the examination being conducted on behalf of the Council, to your attention:
Successful candidates will be awarded a council diploma. Council will appoint a moderator and will inform the hospital accordingly. The names of the internal examiners should be submitted to council. Prior to the examination, the hospital should submit the examination paper and answer guides to the moderator. Once the examination scripts have been marked, all scripts should be forwarded to the moderator. Should the nursing school deviate from the examination format as set out in the regulation and the directive for this course, with regard to the number, duration and content of the examination papers and dates of the examination, Council must be informed of the proposed format and the dates. Details of the practical component of the course should also be
submitted to the council as well as examples of the evaluation instruments used for continuous evaluation for the candidate during the course. The examination fee is payable to council. The moderator will be remunerated by the council.

It has been noted that the name of the nursing school is Afrox School of Nursing and you are requested to please use this title in all correspondence in the council dealing with training.

Signed by DJ Minnie

Letter to the Registrar – from Afrox School of Nursing
Education Certificate Bridging Course, Afrox Health Care Division
Enclosed herewith are photostat copies of the education qualifications of the students who have been motivated for in a letter dated 21 November 1989.

The names of these students are: Betina Cross, Karin Grobler, Lindsay Jeanne Fraser, Annie Gwenda Jones, Theresa Carol, Theresa Merricross, Margaret Renaldi, Dick van Rensburg, Margaret Bulker, Marion Doyle, Pauline Gaskell, Salome Botha. Carol Mockford and Irene Nomveti, I believe, have been dealt with by the Brenthurst.

I do hope this proof satisfactory and that all motivations are successful. Enrolled Miss Catharine Kenly has withdrawn her application due to unforeseen circumstances.

Lois Keen

And then there are a lot of documents. Al hierdie dokumente van die studente wie se name ek gelees het, is nou hier.

Dan die volgende ding is ‘n aansoek vir ‘n kursus.
Listing of a post-basic course in Neuromedical and Neurosurgical Nursing
10 December 1989
On behalf of the Princess Nursing Home, I wish to apply for the above course to be listed with the South African Nursing Council under clause 1(7) of the proposed guidelines for the development of a short course. Enclosed please find all the relevant documents as stated in the proposed guidelines for the development of a short course for listing.

Dan aangesluit is die curriculum for the post-basic course - Neuromedical and Neurosurgical Nursing. The Princess – here is a motivation for the course, situation of analyses, objectives, evaluation instruments, etc. etc.

Dan is hier nou ‘n brief
18 January 1990 - to Afrox Health Care Division
Application for approval of Afrox School of Nursing for the short course in Ophthalmic Nursing. Approval of the proposed curriculum.
Your letter dated 17 October 1989 refers. The abovementioned application was approved at a recent meeting of the executive of the council.

Welthagen

En nou is hier weer ‘n curriculum
Application for approval of Afrox School of Nursing as a nursing school for enrolled nursing assistants and use the clinical facilities of Afrox Health Care Division hospitals in Johannesburg, namely Brenthurst Clinic and Florence Nightingale Nursing Home.

Your letters dated 17 October 1989 and 19 January 1990, and my letters dated 17 October and 18 January refers. The abovementioned application has been approved retrospectively as from 1 December 1989.

Hier is die inspeksieverslag:

Application form, motivation, syllabus outline, practica file clinical assessment II.

Registered nurses taking part:
Janse van Rensburg, Cecilia Martina
Whelan, Maureen Lezanne Agnes
Werner, Sheryl Cecilia
Campbell, Veronica Susan Isabel
Whittall, Macwena Rosemary Patricia Linda

The aims of the course, the objectives of the course, teaching design, entry requirements, teaching/learning systems, so the whole tootie of this was ... met die evaluaringsinstrument aangehe en dis toe nou goedgekeur.

En dan is hier ‘n opvolgbrief – 14 February 1990
Your letter dated 17 February refers. I refer to the telephonic conversation between Mrs Keen and myself on 13 February. Approval to use the clinical facilities of Glynnwood Nursing Home, Princess Nursing Home and the Lady Dudley Nursing Home for the course for the certificate for enrolment as a nursing assistant has also been granted.

Then there is a letter from Afrox to SANC – confirming something about a letter 6 March 1990 concerning the inspection of the Lady Dudley Nursing Home as clinical facility for the bridging course.
Signed by Mrs Lois Keen

Then there is a report of a meeting of the ad hoc committee
Points to consider: Applications from institutions seeking approval for schools’ bridging course; applications for exemption from St 10 or equivalent.

27/28 November 1989
Members: Miss A Knoll, Miss HM Findlay, Miss JN Slabbert. Convenor: Miss K de Witt.
CPA department of Hospital Services, Conradie Hospital.
Application for approval as a school for the bridging course to conduct examinations. Application approved.

Hier is nog een vir CPA for Department of Hospital Services, Woodstock
Hier is Afrox
Application for approval as a school for the bridging course to conduct examinations with Entabeni Hospital on behalf of the council: Approved, conditional to the assistance of a professional officer. S1339.

Then there is a letter to The Director, Hospital Services, Provincial Administration of the Cape of Good Hope – letter 24 January 1990
Letter received from the principal, Frere Nursing College, dated 2 February. Approval has been granted that St Dominique’s Hospital being utilised as an ascending facility for Frere Nursing College for the bridging course for enrolled nurses. St Dominique’s Hospital will be included in the next inspection.

Letter 22 May 1990
Mr Germishuysen – rescinding of National Diploma in Intensive Care
Following our discussions at the Lady Dudley Nursing Home inspection on 26 April 1989, I remain concerned about rescinding of national diplomas in post-basic education, particularly Intensive Nursing Science – this was 1990 – the new post-basic curriculum has not clarified general intensive care education and training as a clearly identified entity. The first part of the B curriculum does not in covering the compromised patient, provide sufficient depth to lend specialised in an aspect of intensive care nursing. The compromised patient, when being taught for orthopaedics, oncology, etc. will introduced registered nurses to the patient requiring advanced care, but will not make any of them capable of functioning in an intensive care environment which seems by implication of what is required of the first part of the B curriculum. The students for intensive nursing science can then specialise in an aspect of intensive care as opposed to gaining an in-depth knowledge of general intensive nursing science. This confusion over the curriculum is the first reason I am concerned about the rescinding of national diplomas. The second is that the crediting a curriculum and a college or school does not guarantee maintaining of standards. Most education research has found that there are often discrepancies between what the curriculum states and the reality of a situation and the standards achieved.

At a time when most countries overseas are moving to centralise standardised examinations, we seem to be moving in the opposite direction. The health care services in this country are in a state of crisis. Rescinding national diplomas at this time is to add to chaos and crisis; not to reduce it.

National diploma examinations will ensure that, no matter how the curriculum is implemented in various colleges or schools that, at the end of the day, standards are maintained in licensing the registered nurses to practice in the area of specialisation. Specialty training in the intensive care field, I feel, remains an addition to the general intensive care training, i.e. an additional 6-month course and not an extension of the B curriculum as proposed. To ensure maintaining of the standards throughout the country,
I feel, needs the maintenance of national examinations in various post-basic courses.
Signed by Lois Keen

Then a letter dated 27-06-1990
Application for approval of Lady Dudley Nursing Home as a clinical facility for the bridging course for enrolled nurses leading to registration as a general nurse.
The abovementioned application was approved retrospectively as from 1 April 1990.
Welthagen.

Undated letter from Council to Afrox School of Nursing
Following the telephonic conversation between Mrs K de Witt and your Mrs T Keen, and Mrs K de Witt and Mrs B Badenoch of the Entabeni Hospital respectively, we take note that Afrox School of Nursing will be doing the council’s examination for the first-year students registered for the bridging course.
This letter also serves to inform the Afrox School of Nursing that in line of the council’s policy regarding examination, the approval granted on 14 December 1989 to do the examinations for the bridging course on behalf of council, is hereby withdrawn. In future, approval for a school to do an examination on behalf of council will only be considered where such a school can be incorporated in the formal examination system of a college of nursing in association with a university.
We would like to emphasise that all correspondence with regard to the bridging course is between Afrox School of Nursing and the council, as Afrox School of Nursing is the approved school.
We trust that this information will assist you in your planning for the future intake of students for the bridging course.
Signed by Welthagen and Bierman

And then it is 14 September 1990
Afrox School of Nursing
Nursing Education Coordinator
Please note that the person in charge of the school is Lesley-Ann Fletcher, who has the following qualifications: Diploma in General Nursing, Diploma in Midwifery, Diploma in Nursing Education, BComm Ed Ed, Admin Majors, Education Administration, Community Health and BA Hons in Psychology.

So dis waar Lesley begin oorvat het.

Application for approval of Orthopaedic Nursing Science
I hereby submit the motivation for the above course with Afrox School, intends to start as from 1 February 1990. Students will be one intake per year of a maximum of 4-6 students.
21 September 1990 – Fletcher, but there is no curriculum attached

Brief aan die Raad – 31 Oktober 1990
Van Afrox – and it is a motivation for the commencement of an orthopaedic course.
The Afrox School of Nursing wishes to offer a short orthopaedic course for listing purposes. The clinical experience for the course will be offered at two of the Afrox clinics: the Brenthurst Clinic and the Glynnwood Hospital.
Situation on analyses at these hospitals revealed the following information:
Orthopaedic doctors: Brenthurst 7; Glynnwood 3
Beds in orthopaedic wards: Brenthurst 34; Glynnwood 30
Number of patients per month: Brenthurst 371; Glynnwood 150
Number of patients per year: Brenthurst 4457; Glynnwood 1800
For several years Sister B Hubert, the sister in charge of the orthopaedic unit at the Brenthurst, has requested that a formal orthopaedic course be offered at the hospital. Her reasons for this are the following: a formal course will incorporate more interest and intelligent insight into the nursing of orthopaedic patients; high level of skills and knowledge concerning orthopaedic conditions will result in the rendering of a higher quality nursing care; doctors will have more confidence in the professional competence of nursing staff; because of the challenges engendered by the course, staff will become more motivated and stimulated and more nurses will be attracted to the orthopaedic ward. It is hoped in the long term to develop a reputation for highly skilled and efficient orthopaedic nursing which will enhance the images of both the Brenthurst and Glynnwood as health care centres. Hoping that this application will receive your favourable consideration.

(Funny, but the letters are not signed)

En dan lyk dit vir my hier is nou weer ’n curriculum
Curriculum Afrox School of Nursing
Curriculum philosophy, programme objectives, council programme objectives, aim of the course, curriculum structure, stage objectives – hierdie goed is alles - en ’n evalueringsinstrument

Letter dated 7 January 1991
Bridging course for enrolled nurses leading to registration as a general nurse/psychiatric nurse
February examinations: appointment of a vigilator
Centre: Afrox School of Nursing
Please note that Miss Maureen Whelan has been appointed as vigilator for the above examination … and then there is her address.

Hier is ’n dokument
Medication Administration Record, and it comes from Afrox, Paula Collishill – Nursing Manager Brenthurst, Entabeni, Florence, Glynnwood, Lady Dudley, Princess, St Georges, St Dominique’s
Afrox Health Care Patient Documentation: Medication Registration Record

A meeting was held with the 6 Rand Nursing Service Managers, Lesley Fletcher and myself to come to an agreement on the above document as the ones currently in use is unsuitable for many reasons and everyone was pulling in different directions.

*Dit gaan oor ’n dokument waarop hulle medikasie transfer – en hier’s ’n afksirf van die ding.*

Transcribing

Dan is daar ’n letter van Miss De Witt

Your correspondence of 21 January 1990 refers. I wish to bring to your attention that on no account can council condone the transcribing of medications or the administration of medication from a transcribed document as it is not a legal prescription.

*en nou is hier weer ’n ding –*

Short course in Anaesthetic Nursing Techniques
Dated 30 January 1991

A need for a short course in Anaesthetic Nursing has been identified by the nursing personnel working in operating theatres in the Afrox Hospitals. For your attention, I am enclosing a motivation for the approval of the course for the Certificate in Anaesthetic Nursing Technique together with a proposed curriculum and evaluation instrument. It would be appreciated if these documents could be submitted for approval by the Education Committee.

Motivation: modern anaesthetic is a process that requires many skills and a wide appreciation of medical and scientific principles. It is the second largest medical speciality in the modern and the anaesthetic team must have a people with many different skills, including medical, surgical, nursing and technical skills.

Standard: *Daar is ’n curriculum aangeheg – hulle het omtrent gewerk aan curriculums hierdie mense.*

Hier is nou die antwoord van die Raad.

Your letter dated 31 October 1990 refers. The abovementioned application was approved by the Executive Committee. Proposed curriculum be amended to read psychosomatic and psychological conditions, guidelines for practical techniques. It is also suggested that the title of the programme be adapted ... oh – this is the orthopaedic nursing course, not the previous one – the nursing of orthopaedic patients. Certificate in Nursing of Orthopaedic Patients.

Welthagen

...*so hy’s toe uiteindelijk goedgekeur*
Short course in Anaesthetic Nursing Technique was not approved due to the fact that the course is not directed towards a nursing function, but falls within the scope of registration controlled by the South African Medical and Dental Council.

Opmerkings oor die evaluering van hierdie kursus was:
Die duur 6 maande, aantal periodes 225 vir spesialiteitsrigting, plus 90 blokperiodes, d.w.s. ’n groot totaal van 315 periodes. Die voorgeskrewe minimum periodes vir die kursus vir die Diploma in Operasiesaal Verpleegkunde is 290.

Kursus is oorlaai met lesingperiodes wat konsentreer op narkose. Kursus is tegnies georiënteerd. Die naam van die kursus word bevraagteken - wat word bedoel Anaesthetic Nursing Technique (direk vertaal is dit Narkose Verpleegtegniek)

Gevolgtrekking en aanbeveling: Narkosetegniek blyk nie ‘n verpleegfusie te wees nie, daarom word aanbeveel dat die kursus nie by Suid-Afrikaanse Raad op Verpleging gelys word nie. Die SA Geneeskundige en Tandheelkundige Raad het ’n register waarop daar op 31 Desember 1998 acht persone as narkotiseerassistent (anaesthetic assistants) geregistreer was.

Al die kennis en vaardigheid waaroor ‘n verpleegkundige moet beskik om binne haar bestek van praktyk die narkotiseur in ’n operasiesaal behulpsaam te wees, word voldoende gedek in die direktyef vir die Diploma in Operasiesaal Verpleegkunde.


27 May 1992
Letter from the Council

Concern is expressed with regard to the noticeable discrepancy between high marks obtained in the practical examination conducted by the school and the low theoretical marks obtained by certain candidates in the above-named examination. Furthermore, a disturbing tendency was observed regarding insufficient knowledge related to ethos and professional practice and application thereof. Keeping in mind that the candidate is being prepared for registration, this part of the curriculum should serve as the point of departure in nursing education.

Kindly submit to the council before 22 June 1992, the micro curriculum for the bridging course, the evaluation instrument for the OSCI for an explanation on how you conduct the practical examination.

Signed by Monama

Then there is the reply 4 June 1992
To Monana

Attention: enclosing the following: the micro curriculum for the bridging course, evaluation instrument used for continues assessment of the student’s practical performance in the wards and theatres, the instrument
used for evaluating the student’s teaching skills, the instrument used for
evaluating a case presented by a student, a sample of the OSCI used for
the final practical examination.

With regard to your request for an explanation as to how the final
examination is conducted, I offer the following:
First-year students: since council expects an assessment of the student on
a continuous basis, an average of the undermentioned is obtained:
assessment of two case presentations, ward and theatre assessments - one
per unit, two OSCE’s conducted at set times during the year, final OSCI
conducted.
The final mark is the average mark obtained by combining the average of
the abovementioned assessments with the mark obtained for the final
OSCE.
Second year: an average of the undermentioned is obtained, ward
assessment - one per unit; assessment of the student teaching skills,
evaluations of a symposium organised and presented entirely by the
students, evaluation of a mini research project marked by a registered
nurse with a masters degree in nursing.
Final OSCE is conducted the final mark is the average mark obtained by
combining the average of the abovementioned assessments with the mark
obtained for the final OSCE
In order to give you an idea of the standard of the research project
presented and the symposium presented, I am enclosing copies of three
projects as well as a copy of the programme of the symposium for which
the students obtained sponsorship from Sabecs.
I hope the information provided meets with your approval.
Fletcher

Then there was a request from Ann Latsky College of Nursing...

Facilities for bridging course training
Further to our discussion with regards to the training of Afrikaans-speaking
personnel from the Afrox Group of Hospitals, I would like to confirm that
clinical facilities in the Brenthurst Clinic, the Glynnwood and the Florence
will be available for the students.
Thank you once again for considering training students of our hospital.

Dan is hier ’n brief van Mej H S Eihlers – Helia
Versoek van Mev. L H Fletcher, koordineer van Afrox School of Nursing is
ontvang om die volgende kliniesefasiliteite te benut vir die opleiding van
studente in die oorbruggingskursus.
Glynnwood Benoni, Brenthurst Johannesburg, Florence Nightingale
Johannesburg.
Mev. Fletcher en die verpleegdiensbestuurders van die verskillende
klinike het onderneem om aanpassings te maak volgens die aanbevelings
in die situasie-analise-verslag. Die kollege beplan om die fasiliteite vanaf
Januarie 1993 te gebruik. Volgens Mev. Fletcher is genoemde fasiliteite
reeds deur die Suid-Afrikaanse Raad op Verpleging goedgekeur vir die
oorbruggingskursus.
Afskryf van hierdie brief is versend aan Dr. J Bornman, Adjunk Direkteur, Verpleegopleiding, Tak Gesondheidsdienste

_Nog steeds die Anaesthetic kursus – ja nog steeds die Anaesthetic Nursing Science – nou het hulle dit verander na dit ...

31 Julie 1992
Approval for a short course in Anaesthetic Nursing Science
Enclosed please find a proposed curriculum for a short course in Anaesthetic Nursing Science together with a motivation.
Anaesthetic nursing dynamics, general aim, programme objectives, anaesthetic nursing dynamics, professional practice, principals of nursing administration, communication, research methodology, anaesthetic nursing science, principles of anaesthetic nursing; anaesthetic nursing as applied to the respiratory system, the central or genomic nervous system, cardiovascular system, vascular skeletal system, endocrine system, immune system; course programme, entry requirements, learning experience, duration, evaluation examination pallet and security of examination paper, formal agreements.

_Nou het hulle daai hele ding so verander en die naam is verander na Certificate in Anaesthetic Nursing Science. Nou het hulle al hierdie goed bygesit van dynamic en alles – wil net kyk wat is hier – sien nie dat dit anders lyk as wat die vorige een gelyk het nie. Ek probeer nou uitvind waar is die hoeveelheid periodes. Die vorige een het mos baie meer gehad as wat die diploma gehad het._

Duration of the course: 6 months
Anaesthetic nursing dynamics: 100 periods
Theoretical component of 6 hours
Research 8.5 hours
Anaesthetic Nursing 124 (5 periods)
Theoretical component of 94 periods
So dis in totaal 225, 230 dae, 23 dae – kan nie rërig sien nie.

Briefie van 29-10-1992
Kliniese faciliteerder; faciliteite by die ondergenoemde inrigtings van Afrox School gebruik te maak ten opsigte van Glynnwood, Brenthurst, Florence; Afrikaanssprekende studente van Afrox as studente van die kollege by die raad geregistreer word, en dat hulle die eksamen wat u namens die raad aflê sal skryf.

(Ek wonder hoekom het ons nooit aansoek gedoen vir eksamens namens die raad nie)

18-11-1992
Application for approval of a short course in Anaesthetic Nursing Science for listing
Approved by the executive committee of the Council

Kennisgewing for inspection 12 July 1993
Institutions will be inspected in their capacity as clinical facilities for BG Alexander, SG Lourens and Ann Latsky Nursing Colleges, Princess Nursing Home, Florence Nightingale, Brenthurst, Glynnwood.

Then there’s a letter 16 July 1993
Please note that the Princess Nursing Home has closed and is no longer been used as a training facility. I have informed the persons in charge of the other hospitals of the dates.

En dan is hier ‘n opvolgbrief – 30 Julie 1993
Confirmation that the inspection programme has been changed as follows:
Brenthurst Clinic - 25 October
Florence Nightingale Nursing Home - 26 October
Glynnwood Nursing Home - 27 October

20 August 1993
Extension of clinical facilities for training
The Afrox School of Nursing would like to use the following facilities for training purposes:
Springs Parkland Clinic in Benoni recently acquired by Afrox for the training of bridging course students, Benoni Day Clinic as an extension of the Glynnwood Hospital for the training of enrolled nursing auxiliaries.
For your attention, the following information:
Benoni Day Clinic, Springs Parkland – Personnel, Registered nurses

**Benoni Day Clinic:**
Registered nurses: 6
Clinical facilities: total number of beds 15 – mostly surgical
Types of cases of surgical/minor general surgery: ENT, minor genealogical surgery, dental surgery, maxillofacial surgery, urology
Medical: Glynnwood – orthopedically, paediatrics, picture room facilities
Student accompaniment:
Registered nurse operating theatre technique; Clinical sister Glynnwood Nursing School, Personnel
Average monthly occupancies:
Number of admissions 150; Surgery general Anaesthetic 150

**Springs Parklands**
Registered nurses 58; Enrolled nurses 22; Enrolled auxiliary nurses 85
Total beds 181; ICU 7; Paediatrics 28; Surgical 48; Orthopaedics 48; Medical 50; Paediatrics 28
Types of surgical cases: general surgery, gastrectomy, cholecystectomy, appendicectomy, major orthopaedic surgery, urological, prostatic, etc., cardiothoracic, psychiatric, dermatology, vascular diseases, cerebra vascular diseases, infectious diseases, allergic and immunological diseases, electrolyte disorders, orthopaedic, major orthopaedic, total joint replacements, common medical and surgical conditions under paediatrics
Picture room available
Accompaniment: clinical tutor, registered nurse, nursing school personnel
Number of admissions 1200; Surgery 500-600; Surgery local 75-90
Students will receive theoretical components of their courses at the Afrox School of Nursing. The curricula for the bridging course and auxiliary nurse training have been approved by the South African Nursing Council. Glynnwood Hospital, which has already been approved as a training facility for the bridging course, will be used as a resource for the enrolled auxiliary nurses.

These two facilities were inspected. Also included in the inspection of 27 October

Afrox School of Nursing
Letter dated 21 October 1993
I would like to obtain clarity in regards to the registered nurse having to be present on insertion of the epidural catheter, having to record and sign for the correct placement of the catheter. We are busy compiling documents for using in our hospital by registered nurses/midwives caring for patients with indwelling epidural catheters, pure analgesic or labour/delivery-related use.
In order to facilitate safe patient care and recording of it, the correct placement are you requiring the nurse/midwife to sign or record that the catheter was inserted, record that the catheter is in the epidural or in the subarachnoid space or simply that a catheter was inserted.
Pre-topping up position check must be done, but without a dressing, there is no way of telling in what space the tip lies. Is the purpose of this to check whether the epidural is in fact spinal and not gesia, which of course carries higher incidents of complication?
Thank you for your assistance.
BG Hamilton
Reply from Anna Beard
With regards to epidural pain control via registered nurse
Your letter dated 21 October 1993 refers – and this letter was 10 November 1993.
The registered nurse or midwife should interpret the council’s guidelines in context with the situation in which she practices. In drafting a nursing care practice for an individual patient nursing assessment, implementation of nursing actions and the evaluation thereof is important. Record-keeping forms an integral part of patient care, thus enabling the registered nurse to give account of her actions or the omissions thereof. Correct placement implies that the registered nurse/midwife had been present during placement of the catheter and has been assured by the anaesthetist that the catheter is in the epidural space.

ście nie juis veel nie …

Toe is die inspeksie uitgestel na 9 Maart 1994 want die dokumente kon nie betyds terugbesorg word nie.
Dit lyk my dis die inspeksieverslag – dis ‘n lywige verslag hierdie – dit net soos daai een van Goldfields wat ek gesien het, ja hy lyk dieselfde.

1993 – Afrox School of Nursing
Inspection Hospital School, Afrox School of Nursing
LA Fletcher – hy is ook ’n baie dik verslag

3 Phoenix Place, Parklane
African Oxygen Limited
Student registered for a basic programme for registration as a nurse bridging course: 16
First-year study: 5
1994 10
Strict selection train for 4 hospitals and not more than 4 candidates for each facility

Post-basic – there is an attached note
Operating theatre - ICU
Certificate in Anaesthetic Nursing Technique
Nursing of orthopaedic patients, certificate in ophthalmic nursing science will be commencing on 01-10-1994
Orthopaedic patients – no students. Second intake June 1994
Certificate in ophthalmic nursing – no students presently.

Ok hier is die staff
LM Fletcher, BG Hamilton – intensive care
Nursing School is assisted with the listed courses by personnel who are not on the staff establishment of the school but are employed by Afrox Hospitals.
Certificate in Anaesthetic Nursing – Miss J Dennett
Nursing of Orthopaedic Patients – Mrs L White
Certificate in Ophthalmic Nursing – Mrs V Paton

Then there’s just a lot of … ek weet nie of ek al hierdie goed nodig het nie

Hier is ’n briefie ... Hier is nou weer ’n inspeksiedokument
Dit is nou Extension – dis nou die Springs Parkland Clinic en Benoni Day Clinic as an extension...

(Ek weet nie hoeveel van hierdie detail ek regtig gaan nodig kry nie – en albei van hierdie fasilitete was aanbeveel en goedgekeur, 11 Maart 1994)

Hier is ’n brief van die Raad dan ...
21 June 1994 where they say that it is resolved that Springs Parkland being approved as clinical facility for bridging course students, however it was resolved that Benoni Day Clinic not be approved as an extended clinical facility for the course leading to enrolment as a nursing auxiliary as the learning opportunities are intermitted and inadequate for the programme.
Go back to the inspection report misread by me. It says that the Benoni Day Clinic not be approved as an extended clinical facility for the course leading to enrolment of nursing auxiliary.

Faks van Brian Davidson, Afrox Health Care
Entabeni School of Nursing
Thank you for listening to my problem earlier this morning and for agreeing to give us some guidance as to how we might resolve the potential problem we face. As promised I enclosed the relevant self-explanatory correspondence which I have.

We are very keen to continue our roll in post-basic training as there is such a shortage of skilled nurses. As I mentioned we are considering re-introducing their 4-year diploma course but this depends upon the circumstances surrounding need and cost. Thank you so much for your assistance. Much appreciated. We can come and meet with you if necessary.

Kind regards
Brian

Post-basic training at Entabeni School of Nursing, and this was dated 2 February 1995

Presently we are experiencing difficulty with the South African Nursing Council who are reluctant to allow us to continue training post-basic because we no longer offer the 4-year integrated training and are also therefore no longer affiliated to the Natal College of Nursing or the university. Both of these institutions are satisfied that our facilities are more than adequate for teaching purposes; however the Natal College of Nursing is in a bit of turmoil at present, and no one there is prepared to commit themselves to the continued affiliation. According to the Gazette there is a clause which states that the SANC can recognised an independent training school without affiliation to a nursing, a university or college of nursing. It is this that we now ask council to consider.

Attached is a copy of the letter which Barbara Badenoch written to the Registrar of the South African Nursing Council, as it is imperative for the executive committee of the council to consider this request at their meeting in March 1995.

I was wondering if you on behalf of Afrox would consider supporting our application by communicating with the Registrar on our behalf.

Sylvia (something – I cannot read)

Letter dated 16-02-1995
Dear Brian

In terms of sub regulation 31(a) (highlighted in pink), Entabeni do not qualify as a training school for post-basic courses. They are applying for approval in terms of sub regulation 2 (highlighted in yellow). However Miss Woodward at SANC is of the opinion their approval will be highly unlikely because SANC is no longer conditioning the relevant examinations after the end of 1995; instead they are going to do internal with the D4 course. She suggests that the best course of action is to become a sub campus of
an approved college, which is what Entabeni is trying to do, or alternatively to enter into an agreement in cooperation with the university which is apparently very expensive. Perhaps Entabeni could claim to be exceptional on the basis of their results. It is also interesting to note that there are only 2743 ICU and 3617 theatre nurses registered in the RSA, thus out of population of 78 006 nurses.
Hope this helps.

Then the abstracts of the teaching guide and regulations are attached.

Notification of payment of annual fees
January 1996 – Eugene Marais Hospital was then seemed to be ...

Okay, nou is dit Marietjie Potgieter

Letter from Lesley Fletcher
Marking of limbs for amputation
It has come to our notice that some orthopaedic surgeons request the registered nurse to mark the limb for amputation before the patient arrives in theatre. We feel very strongly that this should be the surgeon’s duty, and his alone.
We would be pleased if the council would consider this matter at the Exco meeting to be held in June and to issue a policy statement in this regard in the Registrar’s Bulletin

Change of address
Afrox School of Nursing
Please note that on 1 July 1996 the Afrox School of Nursing will relocate to AMR Park 2, First floor, Concord Road East, Bedfordview. The postal address: PO Box 1570, Bedfordview

Nou is hier weer ’n brief van Lesley Fletcher

30-09-1996
The Afrox School of Nursing would like to extend its current nurse training activities to include the course leading to enrolment as a nurse. I am presently completing a situation analysis and will submit this together with a curriculum by the end of September 1996. I will be pleased if you will consider this matter at the executive committee meeting in October.

Then there is a response to that
03 October 1996
The agenda for the executive committee meeting in October has already closed. Your submission, once received, will be prepared for the following meeting. However, I must emphasise that it can take up to 6 months for approval of a curriculum. Any queries in this regard may be directed to the professional section of the council.
Then there is a letter from De Jager
SG Lourens
Goedkeuring vir voorlegging van die SG Lourens Verpleegingskollege curriculum vir die kursus wat lei tot inskrywing as verpleeghulp/inskrywing as verpleegkundige.
Hiermee verleen die SG Lourens Verpleegkollege toestemming aan Afrox School of Nursing om die goedgekeurde curriculum vir die kursus wat lei tot die inskrywing as verpleeghulp/inskrywing as verpleegkundige binne regulasie 2176 en 2175 van 19 November 1993 aan die Suid-Afrikaanse Raad op Verpleging voor te lê vir implementering binne genoemde opleidingsinstansie.
Voorlegging aan die Suid-Afrikaanse Raad op Verpleging van die curriculum opgestel deur die SG Lourens Verpleegkollege, is onderwerpe aan die volgende vereistes: spesifieke situasie-analise van die instansies, spesifieke missie en filosofie van die instansie.
SG Lourens behou kopiereg daarom mag die curriculum slegs met voorgeskrewe toestemming van die kollegehoof deur ander instansies voorgelê word vir goedkeuring en implementering.

Dan het sy nou hier gestuur, hierdie brief – geen datum

Course leading to enrolment as a nursing auxiliary and enrolment as a nurse
Afrox School has been approved to offer the courses leading to the enrolment ....
The school would like to extend its facility to offer the course leading to the enrolment as a nurse for which the necessary documents are enclosed. Since the publication of Government Notice No 2176 in 19 November 1993, a revised curriculum has not been submitted for the course leading for enrolment as a nursing auxiliary. A curriculum for this course is now being purchased from SG Lourens. The necessary amendments have been made and also included for your approval.

Extension of clinical facility for student training at Lesedi Clinic
Date stamp 18-10-1996
The Afrox School of Nursing would like the Lesedi Clinic in Soweto to become an extension facility for the training of the bridging course students. Inspection requested.

23-10-1996
A unified nursing education system for --- en elke brief het ’n ander posbusnummer
Thank you for the document referred to above which we have studied and discussed. I would be grateful if you would inform us at the Afrox School of Nursing of the date and venue of the Gauteng visit by the Nursing Council members, since there are a number of issues on which we would like clarification.
Lesley Fletcher
Response from Nursing Council  
28 October 1996  
Applications for utilisation of Lesedi Clinic in Soweto as a clinical facility extended, asking for documents to be submitted: a copy of the situation analysis of the Lesedi with the indication by the approved nursing school that it meets the minimum requirements for training, the name of the person responsible for clinical accompaniment, copy of a formal agreement signed by both parties with regards to the clinical placements of students, the number of students to be placed at Lesedi. Any queries in this regard can be directed to the professional advisor.  
Monana

Change of address - 28 June 1996

*So kom die dokumente terug want die posadres is verkeerd*

Letter dated 14-01-1997  
Application for utilisation of Lesedi Clinic  
In response to your letter please find attached the situation. Since Afrox hospital has no need for formal agreement regarding clinical placement of students, the student allocations is made by the Afrox School of Nursing. The clinical tutor reports to the person in charge of the nursing school. There are therefore no problems anticipated in this regard. Maximum of 5 students will be placed at the clinic at any one time. They will also be allocated at the Afrox hospitals for certain of their clinical experiences like casualties at the Glynnwood Hospital. Then there is the situation analysis...

Brief dated 19 March 1997  
Change of address  
Please be advised as of 29 March 1997 the Afrox School of Nursing will be accommodated of the 4th floor of the of the MIS Building, 16 Kings Road, Bedfordview

14 April 1997  
Application for approval of the curriculum for the course leading to the enrolment as a nurse/course leading to the enrolment of a nursing auxiliary  
They have been approved on 4 and 5 February. Lesedi Clinic as a clinical facility is subject to a positive inspection report by the council

Accreditation - Lesedi Clinic  
12 May 1997  
Clinical facility for Afrox School of Nursing will be inspected on 22 May.  
*and then they asking for some information and telling ...*

The Registrar  
9 May 1997
Appointment of moderator - listed course Nursing of Orthopaedic Patients

Abovementioned course resumed on 7 April 1997 at the Afrox School of Nursing.
Miss Sheila Crutchley of PO Box 9532, Verwoerdpark, will be acting as the course moderator.
signed by Mabel Segale

Then there is the inspection report

Hospital Inspection - accreditation outcome as clinical facility - Lesedi Clinic

Following our .... this morning, we would appreciate it if we could be furnished with a written report of the outcome as this has an impact on enrolment of our candidates who are due to start the course in July.
It comes from Mrs Marema who is the Nursing Services Manager sent to Marietjie Potgieter

Inspection Report

Afrox School of Nursing has applied for the utilisation of the above clinical facility for the placement of pupils for the course leading to the enrolment as a nurse. The size of the hospital - 170 beds, offering general and maternity services. The learning opportunities are adequate for the training of pupils for the course leading to enrolment as a nurse, but should be monitored carefully as the hospital has a rapid turnover, influencing the bed occupancy.
The school is planning to utilise this facility for the training of staff members from Lesedi Private Hospital only. The tutor is available for the clinical accompaniment of the pupils. The ratio of registered nurse to ................. categories is such that the clinical accompaniment by registered nurses will be possible. Adequate communication exists between Afrox Nursing School and the hospital.
It is recommended that Lesedi Private Hospital being approved as a clinical facility for the course leading to enrolment of a nurse offered by Afrox Nursing School.

Approved - meeting 1 July 1997

There is a survey to determine the qualifications of persons involved in nursing education.
25 November 1997
signed by Marietjie Potgieter

Ek wonder wanneer het sy toe nou hier ingekom

Lombard, Segale, Potgieter, A Coetzee, W Griffiths, Mogane, Maroane, Telford, Smith, Naude

Letter sent to Anncron – but there is nothing – net ‘n copy of the letter, maar ek kan nie die letter sien nie, dan is daar ‘n acknowledgement van Sylvia Ann Lombard
With regards to the accreditation visit at Anncron on 2 April 1998

_Dan is hier weer ‘n –_

Daars ‘n brief van Dr Bernardo L Rapoport, Specialist Physician, Medical Oncologist, in which he informs them that he is willing to accommodate students to observe the management and treatment of the outpatients, which will include chemotherapy at our facility, the Medical Oncology Centre of Rosebank.

There is a letter from Sylvia Ann Lombard, 20 January 1988, thanking him for his willingness to accommodate oncology nursing students.

Letter to the council, University of the Witwatersrand, Argyle Clinic

_so hier beplan hulle nou ‘n curriculum for oncology nursing_

Afrox Health Care Division has recently opened oncology wards at the Brenthurst Clinic in Johannesburg and St Georges Hospital in Port Elizabeth. New oncology facility will be opened in June/July at the Glynnwood Hospital in Benoni to accommodate the ever-increasing number of cancer patients who need specialised treatment and care. The nurses at these clinics have no formal training in oncology nursing to provide quality care to these patients, while doctors are more than willing to teach on an informal basis. The opinion of the Afrox School of Nursing that a formal structured programme, specifically designed for training of registered nurses in oncology nursing, will provide an acceptable level of professional skills and knowledge required.

_en dan vra hulle toestemming vir placement van hierdie studente_

The Hillbrow Hospital, Johannesburg Hospital, Medical Oncology Centre in Rosebank

The course will be offered through a modular system using a self-paced learning package, block and study day system. There will be continues assessment in theory and practical work of the students to ensure effective learning. Accompaniment of the students will be undertaken by the course facilitator and oncology registered nurses working in the oncology departments. The course will be for students who hold a diploma in oncology nursing – oh no – will be facilitated and who also have the clinical oncology nursing experience: 3 years in paediatric nursing; oncology: nine years in adult, six weeks in the USA in bone marrow transplant

Teaching experience: 6-week course in chemotherapy currently a private practitioner

Signed by Mabel Segale

University of the Witwatersrand
25 February 1998
Dr Ranjan Sur
Dan is hier nou an application for approval of a curriculum in clinical facilities in Oncology

So dis nou weer dieselfde brief met hierdie goed en die curriculum wat aangeheg is – eintlik maar net ’n situasie-analise wat aangeheg is.

Kennisgewing 14 April 1998
Council inspection: Entabeni Hospital, Highway Medical Centre and Victoria Hospital

23 April 1998
Application for approval of a short course leading to a Certificate in Oncology Nursing … and then they ask for a situation analysis again: number of classrooms, availability of a clinical laboratory, facility for setting and safekeeping of exam papers, clinical learning objectives, programme timetable, number of periods, etc., medical surgical nursing. Comparing the course for listing purposes: The course leading to registration clearly indicates that the …………………… course is over weighted.
Your attention is drawn to circular 19 of 1996.

Special reference to the timing of the application and that no retrospective approval will be granted.

So daai enetjie was over weighted weereens, jy sien … en toe is hy nou geakkrediteer – 26 July 1998.

Postponement of accreditation

Confirmation
Letter from the Nursing Council confirming that the short courses are still being offered: ophthalmic nursing, anaesthetic nursing, oncology nursing, nursing of orthopaedic patients.
Appointment of moderator: Nondlandla Gloria Duba - Diploma in Oncology Nursing

Hier kom nou ’n belangrike enetjie

28 October 1998
Change in status and name to Afrox College of Nursing
Afrox School of Nursing is presently converting to a tertiary education institution which will be called the Afrox College of Nursing and will be affiliated with the University of Port Elizabeth.
Until now all ……………………. communication with Afrox has been conducted by the Afrox School of Nursing as well as the following hospitals that are approved by the council as schools: Entabeni Hospital, Durban; Eugene Marais Hospital, Pretoria; Flora Clinic, Johannesburg.
The nursing education offered by these schools is limited. Many nursing
training requirements, i.e. post-basic courses, had to be met through external nursing colleges and universities at the company’s expenses. Due to various factors within the health care industry, including the inability of nursing colleges to accommodate Afrox students, it was decided that the status of the Afrox School of Nursing be changed to that of a nursing college. This will enable the institution to offer basic and post-basic programmes and to meet the nursing education needs of the company. All nursing education within Afrox will in future take place through the Afrox College of Nursing.

.......... will be based on a relationship resource model and will take place at the various Afrox Hospitals’ learning facilities throughout the country with the nursing education support unit in Bedfordview coordinating the managing, education and teaching. This means that the current approved hospital/nursing school mentioned above become learning facilities of the college. There will be a period when they have a dual status when the current system is phased out. It is hereby requested that Entabeni, Eugene Marais and Flora Clinic retain their school status until all current students and pupils have completed their training. All learners currently registered or enrolled as students or pupils of the Afrox School of Nursing be allowed to complete their training under Afrox College of Nursing in order to prevent confusion.

Curricula for the programmes to be offered for all new intakes as from 1999 will be submitted for approval in due course. The association agreement with the University of Port Elizabeth will be signed on 19 November 1998. As from 1 November 1998 the Afrox School of Nursing will be known as the Afrox College of Nursing, and all correspondence and queries must please be directed to Afrox College of Nursing, PO Box 1570, Bedfordview.

Signed by Marietjie Potgieter

27 Oktober 1998 was die veranderinge by Afrox College - en dit was dan vanaf 1 November.

25 November 1998
Our letter dated 26 October 1998 refers.
Application is hereby made for approval of Afrox College of Nursing to offer the Diploma in Medical and Surgical Nursing Science 212 of 19..... in association of the University of Port Elizabeth as from 1 April 1999. The following curricula that we had approved by the university are submitted:
Diploma in Medical Surgical Nursing; Critical care nursing, Operating Theatre and Orthopaedic Nursing.
Clinical facilities to be utilised: Entabeni Hospital, Eugene Marais, Flora, Glynnwood, Mercantile, Springs Parkland, St Georges Hospital Pretoria, Pretoria Heart Hospital
For theatre nursing: Anncron, Brenthurst, Entabeni, Eugene Marais, Flora, Glynnwood, Mercantile, Springs Parkland, St Georges
Orthopaedic nursing: Eugene Marais, Flora Clinic, Glynnwood and St Georges Hospital
Placement of students for short periods ....................... which is not an Afrox Hospital as well as the Port Elizabeth Provincial and Livingstone Hospitals have been agreed to. Letters confirming these agreements will be forwarded as soon as possible. These hospitals are currently approved to be utilised as clinical by other nursing colleges and universities. Clinical accompaniment and evaluation will be done by the nurse educator situated at the particular hospital or by a mentor who is specifically assigned for that purpose.

Marietjie Potgieter

2 December 1998
Application for approval of curricula and clinical facilities
The following persons will assist the mentor for operating theatre:
Miss A Bekker. Basic qualifications: registered nurse, registered midwife, operating theatre, community nursing, nursing administration
J Tapinos: registered nurse, registered ........................., registered psychiatric nurse, operating theatre.
Agreement with Port Elizabeth University is attached.

10 December 1998
Additional clinical learning facilities – short course in oncology
Afrox College of Nursing is planning to offer the short course in Oncology Nursing Science at the St Georges Hospital in Port Elizabeth starting April 1999.
Oncology learning facilities at this hospital are inadequate. We have therefore identified the Port Elizabeth Provincial Hospital as an additional facility that can be used to augment our existing facilities. The college request therefore the approval of Port Elizabeth Provincial Hospital. A copy of the letter of agreement is attached.

There is the letter of agreement with some information on the facilities.

22 December 1998
To Miss K Peterson
Confirmation that the University of Port Elizabeth students will be working their practical requirements at Afrox hospitals
I confirm that three students registered at the Department of Nursing at Port Elizabeth University will be completing their practical requirements for registration as a registered nurse, midwife and psychiatric nurse as far as possible at the following Port Elizabeth hospitals: St Georges, Mercantile, Hunters Craig. These students are on Afrox bursary schemes and are required to complete all their practical requirements in terms of their training and registration where possible at an Afrox institution.
Signed by JM Chopins

Livingstone Hospital - Date: 07-10-1999 - Afrox College of allocation of students
Livingstone Hospital – letter 1 February 1990

_Klomp brieue wat gaan oor placement of students at Pretoria Heart Hospital, Port Elizabeth Provincial & Livingstone. Goedgekeur Pretoria Heart Hospital - Dit het iets te doen van Oktober 1998_

Hierdie is 24 November - Admission hereby granted to allocate basic and post-basic students
Dr FL Brank

Brief van die Raad - 28 January 1999
Curricula for the Diploma in Medical and Surgical Nursing in association with the University of Port Elizabeth
Critical care, operating theatre, orthopaedics en al daai goeters has been approved by the executive committee

Application for approval of an additional clinical facility for a short course in oncology was approved 29 January 1999.
_Dan is hier ’n situasie-analise wat bladsye en bladsye en bladsye beslaan ten opsigte van_
Approval of clinical facilities for the programme leading to enrolment as a nursing auxiliary, enrolment as a nurse, bridging course leading to registration - submitted 18 February 1998
Anncron, Brenthurst, Dalview, Empangeni Garden Clinic, Entabeni Hospital, Eugene Marais, Flora Clinic, Glynnwood Hospital, Mercantile Hospital, Springs Parkland and St Georges has been approved in their own right as clinical facilities for either Afrox ....

Dit is die einde dan van Volume 3
APPENDIX R

PRIVATE AND CONFIDENTIAL

THE SOUTH AFRICAN NURSING COUNCIL
PRETORIA

INSPECTOR'S REPORT ON TRAINING SCHOOL FOR NURSES

NOTE: The required information should be given on this form of report which has been prepared for the convenience of inspectors. Inspectors need, however, not limit their remarks to the headings indicated below but should endeavour to furnish the Council with as complete a picture of the training of students as possible. Besides visiting training schools with the object of reporting on their activities, inspectors should aim at assisting hospital authorities as far as possible in their training problems and generally act as a liaison officer between training schools and the Council.

1. Name of training school: Entabeni Hospital
2. Where situated: Durban
3. Time of inspection: 9.30 a.m.
4. How is the hospital managed and maintained: Private, no public, sick fund D.A.R.
5. Date of establishment of hospital: 1930
6. Date of recognition as a training school:
7. Beds: 150

<table>
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<tr>
<th></th>
<th>No. of beds</th>
<th>Average daily % of occupied beds for previous calendar year</th>
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<tr>
<td>European</td>
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<td>Infectious</td>
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<tr>
<td>Total</td>
<td>150</td>
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8. Are all patients available for training of students: Yes
9. Are separate wards available for male, female, children, and infectious cases: Yes separate wards for medical, surgical, and infectious cases.
F: Good morning ladies and again thank you for allowing me to interview you.

P 1: Good morning and Welcome to our school

P2: Good morning

F: Here is a copy of the voluntary consent form. It states that you are not forced in any way to participate in the study and that you could withdraw for the study at any time should you wish, with no negative effects on you or the institution. I also ask permission to record the interview as evidence and for transcription, to be used for the data analysis of the research.

P1: we have both signed.

F: Thank you

P1: Thank you for the information that you have already sent to me

P1: I tried to understand your questions and to give you the information. If it was not appropriate, I thought you would tell me if I am giving you not what you are asking.

F: Ja, ja ... but uh, you were...the others were not even able to give me this upfront.

P1: the advantage I have, I started here in 2006. So I know what was happening. But there was a gap because I was ...now I was going to run the hospital as a matron. But now I am back again. But now I kept, they kept me in the managerial what you call it ... uh, uh, uh, what you call... the managerial portfolio. When it comes to college management they want me to be part of decisions and they want me to ...though I am not part of the college...they wanted my input as I have more experienced than the principal. They want me to come in for every meeting.

F: OK. Great.

P1: so I am here on the ...when there were problems I can pick

F: so you are very well informed about the whole ...

P1: ja, ja because even this takeover that happened in 2006, I had to design, ah, ah this to say: you are taking over, so ask this. Now the person who was taking over was a tutor but has never run a school.

F: Yes, yes...as a manager

P1: what to ask form the principal who was going out. I said ask this and this and this. This is what you need to know to carry forward the group. So when she was handing over it was
easy because if she didn’t say much, I had run schools before...

F: yes. And it’s totally different from running a hospital or ...

P1: it’s true... you realise that when you are there, you don’t know how to run the school, but these girls are lucky because I expose them to everything. Whether it is learner registration, completion of record of instruction, but all the time they are involved rather than me knowing everything and then when I have to go or collapse, because I will have a mental block, now what did the students do?

F: ha, ha, ja, ja. No that’s very important, ja. Ok, so, uhm, according to what you have forwarded to me the school was started, or the Academy was started in November 2003. Uhm. Ok... you said it was the challenges and the staff turnover and so on... and uhm ... can you give us a little bit of background on, you know, how it started, what was, you know, like, before...because a lot of work went into it before it was accredited. Isn’t it?

P1: yes. It was. The ...Mrs Naiker was like uh...she was from St Aiden’s...uh Hospital when she was employed. She was also working like, within St Aiden’s College. So she joined JMH, at that time I was working at Isipingo and then the Directors wanted a school. The thing is, before then I was working for Michaelmas Nursing School, and I was placing students at City, City was my clinical facility as Michaelmas because I was running the Durban campus for Michaelmas school. Michaelmas Nursing School. Which I hope you know...

F: I know Michaelmas.

P1: so as I was running the Durban campus for Michaelmas school I was placing students at City, they were the first clinical facility. Then I expanded the clinical facility for Michaelmas into Isipingo, Victoria hospital, which is not part of this group, uh, Clair wood government and uh Osindusweni, Hibiscus, all the numbers. I think I expanded; I made agreements with eight clinical facilities around Durban and south and north coast to consolidate the business for Michaelmas.

F: Ja,

P1: Indirectly now the staff from Joint Medical Holdings, City Hospital, and Victoria was studying with Michaelmas. So the directors had this interest also to open the school in future, but uh, Isipingo snatched me before, before for their staff development clinical facilitation, HIV/AIDS counsellor, because I had that in my background, I was an AIDS counsellor from government and Uh they also...I had worked as a case manager, like doing medical aids and all. So I was half day on nursing, half day on admin when I was given a post there. But they had the agenda that in future they wanted to open the school. So when Dr Boolah started saying that he wants to open a school, he started talking to matrons and saying he wants to open the school and Mrs. Naiker was recruited to join here. And then they consulted professor Boolah, I don’t know his initials very well, but he. He said to me he spoke to professor Boolah. You know sometimes when it comes to doctors; they don’t trust nurses, ha, ha. So they think the doctors knows and professors they say, oh, there’s the South African Nursing Council, and the matron said, but doctor, why would you need professor Boolah for that, because that’s nursing and we know the South African., you don’t
need somebody ...

Back at his mind he has got a belief that Prof. Boolah played a major role because he’s a doctor. You know, this thing, it’s still happening from our history; doctors undermine nurses until you find that the Council says, you know what? Uh we not interested in this doctor or professor opening the school because it’s a school of nurses, its nurses that should open. Then and only then the matrons could write letters and and... But initially it was going to be this big thing for doctors. The council said we don’t encourage doctors to open nursing schools. Then it became...oh matrons, you know you need to write letters to the council and then... because they now thought Boolah could ...but still now he wants to, when you write articles, he wants to special thanks to Prof. Boolah. I said yes, there would be mention ...if you write an article because you, you did consult there. It’s one of those things where you just ... sometimes they bypass you and they talk to the Council and the Council says: go back and talk to Mrs Vilakazi, she the educator, she would know more. We appreciate your call but the principal is there and she knows. Just refer the matter to her. She will know what letter to send to us and what documents. It’s still happening at some stage. Even the students, they do that.

F: ja

P1: Then after the doctor story they wanted the Vishnu and a forum, the JMH forum to run the school. And during the inspection they said: who is going to be the principal? And then they realised they cannot ...oh because we were informed that if it’s not a nurse, and the owner is not a nurse, someone with education, if she doesn’t have they not going to approve the school. Then they stopped that nonsense. But still, this person likes to supervise...how do you supervise something that you don’t know?

F: exactly!

P1: you can’t even make decisions ... so they outgrown that. But it’s very common.

F: ok...so were you part of the accreditation application and all that preparation...

P1: Yes, I was part of it. While Ms Naiker was busy uh with the curriculum, I was busy with eh learning modules and uh the evaluation tools.

F: OK...

P1: so I was really part of this and then Mrs. Phakkrie also had the contribution as like policies, she assisted Mrs Naiker with policies.

F: how do you spell this?

P1: Mrs Phakkirie...double k...P A K K I ja. So she was uh, uh, on the side of policies, because she had infrastructure. We didn’t have a clerk so we used matron’s secretary, so she was assisting in the issue of policies. But the tools, it was just between me and Mrs Naicker. And the curriculum, we made a, I made an input wherever she contacted me ...also there was, there is this thing when you sometimes, people feel they can do things and then when they are in the middle you find that they need you. Because at that time, I was uh, promoted for the matronship for the uh, Dadof Hospital, in the mean time they want me to
assist in the college project. So from there well, most of the curriculum, it was her. I just made inputs on few things. The part where I played a major role was the modules...that would go out...like as for teaching and for students and then the evaluation tools. That’s what we worked on, it’s like I worked the modules and the tools where like between the two of us. Because we had to agree on things and disagree, and find loopholes as to why is this a critical point, why... because I was also from a four year course background, bridging course and midwifery. So I had taught all programs when I was here. So it worked like that.

So...finally, we prepared everything, everything was there and we had set the scenario for the Council to come and inspect and they came. They greeted us, first thing they said, they said: how many times are we inspecting one and the same person? Now you are here? Because I was from Michaelmas, ha, ha and I was from Government, and it was like: Oh, you again! Where will we find you, every five years you are moving, because it was like...every five years I was actually moving. I was actually doing what they were asking, because they find me in government and then when I moved to ...what you call... t Michaelmas, unfortunately one of the people in the team met me when I was in government...O now you are here and then I moved to here. And then I said I am tired Mrs James. Do you know how many times you were inspected...they said, no it’s fine. Even Sakhisiswe, I went to Sakhisiswe and ??? Indirectly, they said something was, the similar pattern about the way that school worked until we had to ask the principal, so who was mentoring you? You can’t be up to the T so much being the first time. And then your name came up. It was my friend, I had to help her, I said.

F: so you actually played a bigger role in education

P1: Ja

F: OK. That’s good. How long did it take, this whole process of your... you preparing...starting with preparations till you were accredited by the Council to your first intake?

P1: I think it took about twelve months...I think it about twelve months... because...almost twelve months. Not exactly twelve months, but almost twelve months, because uh... like June-July we were like waiting for them to come and inspect and they were not giving us the month and the application has gone through and then they gave us the date and uh I think the first sitting, their first meeting must have been in September, where they said yeh yeh yeh to us. But we were waiting, because the application I think went earlier than this. It only that I don’t have now the initial letter. I only have the December correspondence... but there is an an an ... you now that copy that they do, that show that the meeting was, I will get it, it was put into the file. Because this is like the letter of confirmation, that one...that the inspection happened. That was the first letter of confirmation.

F: Ok, ja I see what you mean. So you had one intake only then?

P1: we doubled...50...100, one intake for 2176 and one for 2175 so that was 50 each

F: ok, ja...ok. And now you are at 250?

P2: ja
P1: because initially, they gave us one intake of each, and then we applied further for two intakes of R2175 uh, there, this was 2004

F: oh yes, ok.

P1: and that’s the response we got

F: ja

P1: that’s the letter that we send in 2004, to say that we want to increase the intake and this is where they... it goes with that, I think they go together. And then, I think uh I think, ...and they send us, because we insisted on two intakes uhm...they wanted further clarity here on the intakes and this letter ...and then they responded, I think in 2005 to say they are giving us that.

F: Ok...increase...ok. Good.

P1: for there in 2004, October where they said they have, they are agreeing to those two intakes... because I have just photocopied from the original...

F: thank you very much. This is very helpful.

P1: Because they kept on asking for different situational analysis and we kept on giving them...this one...all of these... I could arrange that one for you,

F: thank you...ok. So basically what we are looking at is only three years of your existence, uhm, because the research is up to 2006, ne? Uhm and we...

P1: yes and after that we don’t, something that falls within...something...you remember I said we tried bridging course...

F: ja Uhm ...

P2: 683...

P1: in that letter, in that letter they said that uh, we can do a follow up in uh, uh

P2: 2005 or 6, I think...

P1: it was 2005; I think they said something about 2005...

F: ja...2006 ja

P1 Then they said in 2005 was uh, information session that was going around when they were introducing the new tool, that’s when they said that’s gonna fall off; there’s no need for us to follow it up. We tried and phoned them in 2006, they said no no no no, first let the person who was handing over to Mrs Pakkiri put it there that Bridging course is on hold. You can look at eh four year course. And with us, they didn’t have aspirations for us as private schools because of the midwifery component. And the psychiatry. They said we don’t have those two components in private when it comes to practical,

F: and the council, this delay has n huge impact on businesses, which they don’t realise. To
me it seems as if the council is not looking at the interest of the private NEI.

P1. No they didn’t want because they had all these instances of...well in some instances they were justified, because it’s not everybody that a fly by night, they should do their work in actually monitoring those schools. We know schools that are not fly by nights, but their products, you wouldn’t take them, and you wouldn’t take your daughter there, because you know what is happening...the word goes around...

F: the word goes around...

P1: and you know, I...we have had one experience, and I told someone that was in Council: you know what: Don’t tell me you want to bring someone that is from this nursing school. She said: Why? I said: I am sorry if you are related to that person, but he standards are not so kosher. I sorry to say that this is the situation. O can’t you... I said: You know what...I am going to ask the matrons to put her on trial basis in the wards and see what happening. Put her one ward, the sister said no thank you, I don’t want her. I put her in another ward and I phoned her, I said I told you the products of that school are not okay, I am not bragging about this school, you can... I’ll comfortably take products from other schools than that school, that specific school. I am sorry to say that, but it’s the truth. So you suppose to do your work, guide the SANC, not to ask us to be talking, because I don’t have evidence, they can sue me. But I can sure you, if that person is from there, I don’t want to see her. Even if it means in my hospital I don’t want to take in this college for a second year. Because I’ll be starting from scratch to teach her. So it’s not fair. I am taking Life, Netcare, Candlelight, the other , I mentioned to her, there are about up to ten nursing school around, I’ll take their product for the second year, but that school, sorry. I won’t. Because that person won’t be taught okay and you’ll expect me to say she’s my product, now after the second year. A staff nurse doesn’t have this, doesn’t have a one year, because I’ll have to start in second year but she doesn’t have the first year...

F; The foundation...ok. Ok. Uhm Right. Uhm, we have spoken a lot about the preparation and ok, your first intake then was ...was it still...was it in 2004 because you got your accreditation towards the end of 2003 ne?

P1: They faxed us the... what...yes that’s what we got...no, we started in December 2003.

F: Ok.

P1: so the first group is 1203, PNA’s, which are Auxiliaries, and PEN’s which are enrolled nurses. In the archives you’ll see there are two groups, 50-50 each. The thing is, as I am saying, because I wasn’t doing admin, Mrs Naiker was doing it, so I don’t have the actual letter but I have results for 2003, that I have. We can photo copy it.

F: thank you that will be great then. And...How many of the 50 then actually graduated by the end of that year?

P1: they didn’t have, uh... our first graduation was in 2006 and we incorporated all the people that have passed, 2004, 5 and 6.

F: ok.
P1: and that was our first, close to 400 graduates.

F: ok, good.

P1: Uhm... I am not sure if I still have the copy of the brochure of 2006. I am not sure, but it might be on the computer there... the 2006 graduates.

F: Uhm, uhm,

P2: would you like to have a list?

F: I would like to, ja, I would like to have a list of their names.

P1: The only thing that I have now is... I have what, the gradations I have run...

P2:

F: that’s right, ja, ja

P1: Ohhh...I have a DVD...

F: Ok...

P1: because I have, here... this is 9 and now is 10. Ha ha. What I did, I actually???? ...I did not do this. This is 2000 and what... 7, There’s professor...and ... Here is professor Nzimakwe, you know this professor? She was our guest speaker in

P2:

F: and then the uh uh management of the institution...Uhm, do you also have the college council, the senate meetings and all those? How do you...?

P1: we do have the management meeting for college that puts directors, uh...myself and my deputy... the finance, uh...

P2: HR, IT,

P1: we’ve got Finance, HR,

F: Ja...IT, Principal and vice principal...

P2: Hospital manager, Vishnu, we have someone from accounts, Like an accountant department, although he is not an accountant, but the accounts department is also involved

F: Uhm, Uhm.

P1: We also, but we call them when it’s necessary...like the maintenance people. Because there are things where you find that you have to take major decisions, like how much things are gonna cost, so we do have a representative from Maintenance. I could give you the copy of the minutes of one of the meetings. So we get the management...

F: and how often do you have these meetings?
P2: you want an old one?

P1: Ja, within those dates, ja please.

P1: It was before I came

F: Uh hum...

P1: before I came, because I came back in 2007

F: ok, ok.

P1: so if you want as old as that we will get that for you.

F: ha-ha. Ja you know what I am looking for instance things that happened within the first year that the, the institution was operational. Uhm and you know, like first events are always something...

P1: major

F: ja, ja you know...

P1: ja you’re right, you have a good point there. So I am just thinking about DVD’s... giving these...do I have a DVD for 2006? You know sometimes you end up not knowing...That’s NEA...Nursing Education...

F: When did you get the accreditation...I see your certificate there, with Department of Education...in which year was that?

P2: Oh this is something; I received it just now...you see its 2009. As I say, I came in 2007 and you find that you...they send you to and fro, up and down, looking for this document and that document and ... so that is like while you continue to operate, they’ll tell you oh, I want uh, this document, and then you have to look for it. But annually, we are maintaining the...uh...the status. Because annual reports go in.

F: ja... uhm

P1: where you send your ??? Safety report, Tax clearance, your...they have about six criteria. Now they have put seven, the CD with the ... how many students in, how many out...completed...who wrote, who sat for the exam. They’ve added that data, it used not to be there.

F: OK... and then there’s ... the students that you have...are they self funded...are they...?

P1: they are self funded...except there are times that they approve learnerships

F: Yes. Ok so you do take part in learnerships form SETA

P1: yes, we do. The director will say, may be they have their... they apply for learnerships, for employees that side and they also say Gandhi, this year and they say maybe apply for five...we did apply and then we skip a year...out first learnerships were in 2006, and the second learnerships were in...
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<th>P2: not 2008</th>
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<td>P1: 2008 we never got...2009. Ja</td>
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<td>F: ja, ja</td>
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<td>P2: first 2006 and then 2009 we had learnerships</td>
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<td>P1: But the others from the hospital, they apply for learnerships and they send staff.</td>
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<td>F: yes that’s right, their employees</td>
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<td>P1: staff, yes, 18.1. The 18.2 they usually skip a year or two</td>
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<td>F: and what are your criteria then for recruiting those 18.2 learnerships candidates?</td>
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<td>P1: Our criteria is...we look at uhm ...Equity Act, we don’t have enough, maybe males, and we don’t have enough coloureds</td>
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<td>P2: Coloureds...</td>
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<td>P1: and we do not find that and then we look at also financial constraints. You find that mostly, Africans, they don’t have enough. Because the first one that was given in 2006, they were all African girls. And then the 2009, that’s where I had three Coloureds, one male, one African girl. And then the hospital ones, because already we have employees, we also divide them. Because you will find that our company has got lots of may be the second racial group that will also affect us, though we are giving chances to the other groups.</td>
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<td>F: Ja, ja. Ok. That’s very interesting. It’s good to hear that people actually do take part in the learnerships, you know...</td>
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<td>P1: Ja...</td>
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<td>F: Because sometimes you wonder if, uhm, if it gets down to this level or is it only these big companies that benefit.</td>
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<td>P1: It kills also business in terms of profits, because...that’s why they don’t want the learnerships</td>
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<td>F: Yes?</td>
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<td>F: so they will say five, you have a group of 50. Then you have this 5 people...the n you look at who is best performer, or after the interview and then you look at where’s the male and ...But with the Coloureds, we had a venture, to say you are wanted, went to Councillor, community to say can you apply...and where all the Coloureds are based because the company is not doing good enough in term so employees. So the drive was to have them form here so that they are absorbed.</td>
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<td>F: ok, ok. And how many of the learners that you train are employed by the company once they, they complete their training.</td>
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<tr>
<td>P1: we find that most of them are absorbed and others would say, oh I don’t want, except</td>
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for those that are restricted by contract. Because I remember ones that were recruited for Isipingo. And one said, they didn’t give her a contract that time to say you will serve, until she completed. That one left. So the second ones, I said: do contracts. Because you are claiming that you want to call people but you are not absorbing them. So I’ve got coloureds now. What’s plan to absorb them when they finish this contract? So they put that plan in place. They are being absorbed.

F: ok. And your students are coming from which areas? Mainly Durban surrounding areas or also coming from the rural areas of ...

P2: they do come from rural areas

P1: The do come from rural areas, but the thing is, when they write the addresses they are renting here. They are staying in the flats but they do come from rural areas, you find they hear from relative and the move all over. And sometimes the relative is working here and they leave the farm and they move here. But we get Durban surroundings, uh... outskirts of KZN, rural and urban, as well as eastern cape.

F: ok, Ja because Eastern Cape is not that far.

P1: they actually, is like the relatives are... one relative qualifies and then the following relative comes...its word of mouth. They just phone and say: I am so and so, I am so and so’s the cousin and the sister or the parent is phoning you...that’s my eldest daughter, I am bringing the youngest now. It’s like I am teaching generations...

F: you are teaching generations. Ja. No, that is true.

P1: and once you have rapport with the matrons their staff, they have, they will tell you their story. They will say, no no no, I am updating with you, Don’t give me another person. So sometimes it is like, I move from Michaelmas, I move from here, and then they phone and said: no, no, no, no we don’t know your deputy, we are moving with you, where are you now? Because of the way you have run things and... We know when we starting the course, we know what are needed; you always give us a detailed document. We have tried other places, we don’t want to guess what is happening, when the block is, when the exam... We don’t want to guess. You are an organised girl. So we want you school.

F: so are you using a block system?

P1: yes.

F: how is it scheduled?

P1: it is still a contact... the first month they are on block, second and third month they go to the wards, fourth month they back on block. Fourth and fifth month they are in the wards. But during that time that they are in the wards, they have contact days. Because now we have to pick up the... shortcomings and ... uh we have to...

P2: Summative...

P1: We have to do summatives and reteach and then do learner support, because its like...uh, you cant say you’re finished, because they have finished the curriculum. You must
give back that now, so that we can do formal assessment after the sixth or seventh month. Because you can’t do formal assessment during the...they still finding their way in the wards. And with whatever work you give them and with whatever was demonstrated to them. So during that time, its accompaniment, contact day, accompaniment, contact day. And thereafter the seventh month, on the seventh month or so we are giving them formal assessment where we look at them doing clinical procedures, where they prepare for themselves. Because the OSCE deceives you, everything is prepared for you. You don’t get an overall...

F: Yes, no that’s true. Are you looking at also bringing in the total care approach?

P1: Ja. If you look at that tool it will tell you that we look at it.

P1: I personally don’t like OSCE’s. You know, they can’t look at it in the context, it is so inhuman, that you end up with a nurse that you would n’t how she interacts with the patient and you’re not sure because she concentrates on the skills. It’s a task oriented thing or procedure or approach. Where the interaction, it changes. Let’s say you are in the middle of nowhere, the patient vomits or... you want to see that reaction. Does she panic or does she say, you know what, get a receiver, and solve this first. No, no, no you can’t vomit! Haa-ha. Or say the condition of the patient changes, you want to see how she reacts to all that.

F: because that’s what happens in real life.

P1: Yes, in real nursing. And I mean, here you’re scrubbed and ready to do a sterile procedure and all of sudden something happens. How do you deal with that?

F: Exactly.

P1: Or they rip of the dressings...

P2: That’s what you find when you are doing the assessments, when they are gloving, whilst they are gloving they tear the glove and then they are in his panic mode: what do I do now? I tore my gloves...

P1:

P2: Ah, I failed already, I tore my glove...oh...

F: can I get copy of your block program, you know jsut to see how you schedule your blocks? Do have...

P1: can you give the year planner?

F: Ok ...year planner.

P2: this is it

P1: the year planner where you see each group, which is, where is each group so that you know. This is not gonna give you much. It’s like and operationary plan which tells every one what is happening in each month, in case you missed something. You take this...Oh this is my group, I haven’t done this.
F: this is a very good document to have, ne? To remind people...

P1: I have a meeting each day...I change, every time there is a change, go to the computer and I change. You tell them and then you say, uh... can I have your exam forms for your group? And they say: Oh, mine...yes I am on the operational plan. I did. And then I supervise so that I don’t miss the deadline.

F: to make your life easier ne? Ja.

P1: and they don’t miss the deadlines. Because what happens now, the whole group is not registered with the Council. How do you...

P2: its because you don’t have the deadline...

P1: I extend the due date that they have there in the front, I must have this, so that I can... Eh, this group is for formal assessment. So you are scheduling a due date. I am looking at the schedules. When they sit and they doing the schedules, I say,...uh...I drew the criteria. I say, how do you draw a schedule? I’ve been drawing schedules for this, but if I go, will you be able to run the school? Scheduling as an educator...you need to know how to schedule...yourself, students and every body else. What activities are happening in April? We having interviews, we having this, we having blocks, we having this accompaniment...where do I fit in? If its you, that is involved in that, you need to set time aside for that so that when you finished the schedules it easy to come up with a time table. You don’t, if you don’t have a schedule, the timetable that you are gonna draw, you are going to be double booked.

F: exactly, yes, ja

P1: So I always out this and say: Girls...

F: Tell me about your application procedure for your students? What happens when they ally?

P1: We say they must bring CV’s. Certified copy of matric and ID, because we are looking at their symbols in different areas. We’re not looking for exemption...

P2: this is something that is current...

F: oh, current...

P2: Hmm...and you would like something that was then

P1: I don’t have any...

P2: may be you could work on one that has nothing on top...I can do that for you?

F: that will be great, yes.

P2: which year would you prefer?

F: well, if your first was in...maybe from your first intake? If its possible, 4, 5 and 6 you
know? Then, uhm ... if it hasn’t changed a lot then it fine.

P1: it, it, it changed, because initially, ah they had to much block, its only that I couldn’t say it because I was not eh principal.

P2: so it changed when these groups started...

P1 and during that time students were not absorbing anything in second month. They cant her you, they are over saturated and still going on and on...

F: so you see, what you are saying is very important, because that will show you how it developed fom this system to a more efficient system

P2: Uhm

F: so if it is possible for you to get ...

P1: ja, 2003 and 4. It was like went, there was no break in it.

P2: its only 2007 we changed it. Because ...

P1: I am to much of a changer. The rest of teh years where the same. The change, a lot of changes came in 2007 because when you have worked, you know what works and what doesn’t work and from experience you see, you know what... I wouldn’t like this. So you take it away. All teh rules that, say, this must be, ah, we are in a democratic thing, so listen a bit. We are and FET, not a high school. And be open minded...

F: ja, thats right

P1: the minute I get... so because I did sociology and that, it opens us a bit. Otherwise we were too military, because of the way we were groomed and ...you can’t blame nursing because it cam fromt her ne?

F: but it was also good. It was good for the time period and discipline. Ja.

P1: But now there are so many challenges which surround our kids, our students and its like...wow...I wonder if we would have survived with all this? With HIV an all this going on and ...

F: ok. The applications procedure...

P1: Ok, the application procedure> Like I said, we are asking for CVs, certified copies of Matric and ID. And then in that, eh... what you call... we looking for biology or Life sciene, any science subject, we are looking for English and then we are looking for mathematics. You don’t have a D in mathematics, as long as you have D in English. Because what we have learnt from the department of education, is that the E’s are given a pass mark. You know there ??? is low. So what we have learnt from the Departmetn of Education, to ahve a better pass mark, so the D is not as low in English. You find that as private institutions, they are calculating their profits. You can’t have an English teacher to incorporate, to improve... And their background is not fair. That’s why I have now when you see the short course, you must know the E, are the ones there, because I am trying them to... I trying to put them in a
situation where they get used to us speaking the language because that is how they are going to be educated in his language. And then the Anatomy is news also, because its biology in depth. There they understand where you come from when you have a D. And then they are doing calculations and they are doing procedures. They are involved in all the CPR’s and they see what are the emergencies in nursing before we say, ok now. Come to this. Its easy with the D’s, because they are good in the languages, they are... there is minimal problem when it comes to the results. And it has helped us to maintain our results high.

F: pass rate, ja

P1: Pass rate, ja. Other than that it’s like still a challenge at some stage. Because we have caregivers who have got grade 10. You know the people who have served the hospital, they are fluent, they are fluent and we do staff development. So I said, those are improved grade 10’s. They can communicate and uhm, they are used to hospital surroundings and terms and it’s not much of a challenge when you interview them and bring them here. They ae open minded.

F: yes.

P1: but they still sometimes have difficulty... and when you looked at who has failed, those are the people that sometimes give you... not all of them. It’s it’s...it’s more than 50%.

F: but also writing in English is quite a challenge.

P1: yes. If you are Afrikaans speaking...

F: even for Afrikaans speaking, uhm, people and all the people who has got English second language, its a challenge for them to answer a question in English.

P1: they do understand you, but they don’t know how to express...

F: they can talk, but hey have difficulty in actually writing.

P1: no, we do experience that a lot. And we try. It does help to have this revision block. Because we have the first two blocks...

F: yes?

P1: that are spaced and then the last block before exam where we actually go through thios and clinically we also evaluate you. And then again do, go over the work before you go for exams.

P2: and the interpretation of the questions, what is expected of them?

P1: because we do the explaining, describe, define... the other, they give you the... you see, that is why don’t get one full mark. They give yo the answer but she doesn’t understand how to write it. So this is the time where we are actually assisting them witht eh common questions from the previous papers, in case they come out again. This is what...if you ask this, this is what you should answer.

F: so once you’ve got all the applications, you do a paper selection?
P1: yes. Then we write the interview, we have a written interview, and we set it basics on the biology...

P2: general knowledge

P1: and general knowledge, about the world cup and all the teams and current things and that type. I construct questions on what they will be doing and ... I have quite a number of things that I have, I actually...

P2: simple maths...

P1: calculations

P2: simple calculations, uhm and then we have a comprehension passage where require them to read and we question them. To see their understanding of the language.

P1: You see, I have it in your health questions...

P2: Anatomy and ...

P1: Then we ask them about the ministers...who is the minister of health?

P2: Because you find that they pay little attention to something that is important, they don’t even watch the news.

P1: Or sometimes I give them an abstract to check their understanding. And sometimes I just check the biology with the diagrams and then have the general questions. But it depends on what do I want to put. But what I want to look at, is this girl in matric is this there...on that level? So that I don’t ask them things of higher level.

F: Ok. Do you do any psychometric testing with them? Not?

P1: after that comment sometimes that your hear that there are biased, they exclude certain cultures, I said: you know what, I don’t want to subject them to that because they are coming from different cultural backgrounds. So I am, I am not so keen. So I did speak to different psychologists and I find that whatever they give me in terms of answers I say no, I don’t use that. Let me just use this common knowledge: do you watch TV? Do you listen to health...? because you know what they do? They play DVD’s and CD’s. And they are not listening to community health education. Thats why I deliberately ask HIV, Measles, TB, everything. Because it they read the papers and TV, if you have interest in this field, this is what you should follow. Why shouldn’t you understand basic things that are there in the community? Because some people are not educated, but they have so much knowledge about how to prepare rehydration fluid...

F: Ja, ja. And then after that do you have an interview also? Personal interview or ...?

P1: we used to do that before, we no longer doing that. We used to do that before. We just, once we have this symbols, we just see them for the written interviews...

P2: I think for the time period she is talking about, we did do that.
P1: at that time...yes.

P2: we had a structured questionnaire where we sat on a panel, yes. Now we have stopped that, because...its...

P1: its time consuming and the Directors were saying you are wasting a lot of money getting people to sit on the panel for all these interviews. So we do not assess the understanding, that’s why I came up with this abstracts form different ... and ask questions on the understanding thereof.

F: So, how many applications did you get, more or less? You know those first couple of years?

P1: Sjoe, lots and lots. We were sitting... about a thousand each time we ask for applicants it was like abundance. And sometimes, like you fing that, yes you have one thou five, but from this one thou five, you can only three, only 300 that qualify to sit for the interview.

F: ok and then paper selection and then you decide on the once you want.

P2: we gave them these tests and then we find we still have...we only lost fifty, not a large number. That is when the interviews came about. Then we were eliminating them through the interviews.

F: and did you maybe select more than the 50 to make provision for people who didn’t pitch or didn’t you have a problem with that? Like you sometimes you select your number, your 50, you send them your notification that they must come and register on a specific date and then they don’t all pitch for the registration?

P1: No, that is very common. We always have a back up system. So were trying to marks, we put them like 15 to 20 people on the waiting list. And tell them that they are on the waiting list. Because you find with the rating they pass. You want 50 like its not easy to get exactly 50. Sometimes you get less that 50 and you have to go either down, depending on how far down you want to go and then you can have a special interview again. Another, because while you had sit these, you find that there are others, especially when they are many, you find that you have day 1, day 2, day 3. And sometimes you have 2 interviews a day...to fit them in down the hall. Because in the hall you can sit about 100. So if you 300, you find that you have a 9 o’clock, 11 o’clock and 2 o’clock so that you can finish the three hundred. And from this 300 that you sit, uh, the likelihood of you getting 100, trust me, is very little because out of the 300, the people who really understood the questions will be sitting more or less at seventy. And you’ll find you have got extra 20, not extra 100 or 50. The rest are like, don’t now what you are talking about. You just find that you sat them and they come with the 9’s and 8’s. We have experienced that a lot.

F: do you charge them for the selection process?

P2: yes.

P1; If you are below 40, you make me doubt that you...
F: exactly, ja. And, and uhm...if you, if you have less than your required 50, will you still continue with your intake or...have ever...?

P1: now we continue. We make a special interview, ‘cause we do that in time. We have time to fit in another interview.

F: so you will always have 50?

P1: We’ll always have 50. Because we always have people, either on the waiting or...who was second interview and fill this and tell the others they are on the waiting list.

F: and your intakes, are they in...which months? January or February?

P1: it also depends, like we have the third intake, sometimes we move it to January, because we look at the Council regulation. We need to fit in the 44 weeks according to the council regulation. So you’ll find that we move Feb to Jan. But our intakes are meant to be February, April, September.

F: Right. Ok and uhm, your tutors they also do accompaniment, ne? You said that some of them are at teh hospital...

P1: ja, all of them.

F: all of them. Do you teach all the groups or are you maybe like allocating one group to a specific tutor or do you involve all the tutors inthe teaching of all the groups?

P1: we involve all the tutors in the teaching of all groups but we allocate one tutor to each group for admin, registers, marks, everything, allocation, so that you actually have a group that you are supervising, you know everything about them. When we talk about record od instruction you know where the hours are because I want to see the hours. If you are short you should do that, because you need to tell me before she is enterd for the exam how far she is. If she is not having a minimum of 800, I don’t want that student, I don’t enter them. So I, I need that to follow that. So I check them.

F: And I think the students also enjoy having more than on tutor, not to see the same face the whole day?

P1: It becomes boring ja. The same face and she’s soft spoken...dadadadada...

F: Ok. You said when you started you were only two people?

P1: yes.

F; And then, when did your staff increase? When you got the new intakes or how did your staff complement increase over the years?

P1:it increased, because we advertised. During that time we had to just get in class. We didn’t have any choice. And quickly we interviewed her and the other candidate. And she was more suitable because she knew, while we didn’t have the stock how to quickly get to the wards and get the stock for us. And get the station ready, by the time we come out we were ready to demonstrate for both groups, whatever is due by that particular time. So,
gradually, I think you came on board in Feb.

P2: yes.

P1: Because we had to go in summative in January, both the two of us. For the OSCE we had to go and brief the unit managers and prepare the ten stations ourselves for the OSCE and actually check each other, if everything is balanced because now they are not inclined to the teaching and we had to balance the tools for them. And then we had to brief them and then we put them on the stations to help us to evaluate those 100 students. So the unit managers played a very major role in the beginning within the first OSCE. Within the wards we had to evaluate them because we could not just put them in the wards. Because we were desperate. We just said no, that’s not ethically right so, we put the ten stations and we discussed with the directors and matrons. We need ten registered nurses, we’ll brief them, we’ll show them the tools. It will be prepared by us. Everything we did, all they had to do was tick, tick, tick, cross, cross, cross. And we’ll do the ////

F: ok. Ja, and then the other tutors, when did they join?

P1: so it was February, then Una came in march and then it was Peters, uh... was it May or June?

P2: ???

P1: But uh, she came from City. We interviewed her promoted her from City and then the second tutor that came in amrch was from Dadoc. As I went back to be the matron I released her. And then...the...other one was released by matron Pakkiri also from?? It was uh...then we were still 4. But it wasn’t bad. At least the ratio was 1 into 25 for the first time. Because even the principal had to teach now. Yes she was involved in teaching. She couldn’t be out so, all I could do was to come and assist her there and there and go back again to the hospital. And then she had to continue because she had three tutors now. And they were not like, they were... she was the qualified tutor, they were registered nurses. She had to bring them up. All we did was like quick fix for each one that came. But they were good at teaching.

F: it seems as if you did a good job.

P1: she was my first guinea pig,

P2: ja, I was the guinea pig

P1: You will learn this and you will do it. You will observe me. Come, get to class, sit there and see how am I teaching now. She had a lesson plan that she had to follow through, right through. By the time she studied she was a master.

P2: Yes, it was easy for me, education, you know

F: because you had a good foundation

P1: Even now, they are considered to do management. They actually watching me and all. They were coming and sitting here and skiing me. And then I say this is what ... remembers I asked you to do this? This is the reason, this is why I asked you to do that. So that question
answers, that thing answers that question. I would have practical examples because I gave them this small tasks. And then I explain and they do it. And then when they do it at university they just went: oh, for real! You know they’re coming for marketing and I give them the thing and ask them: what do think this thing is? whay did I send you to Kingsway, why did I send you...thats marketing.

F: exactly, ja. Ok there we have the 50, the HWSETA, your catchment area, you gave me your stats there. Ok, your biggest achievements, that we’ve got. Your strategic partners, ok, uhm...right your challenges. Ja, Uh-hu. Poor performers grade 10, ja ok. Is there anything else that you want to add?

P1: Ha-ha-ha. I don’t know. My deputy can tell me.

P2: ha-ha

F: but you are so enthusiastic and passionate, I can jsut think, it must be very nice to work here because the environment is positive.

P1: I like to develop, its like come and share with me. Why cant you see the way I think? We can achieve, you know, I am that kind of person who want to see someone growing, to say you know, I’ve done a good job. Because this was was an ENA when I came, now she is a registered nurse, now she has grown. If I go she can take over, no one from outside now can take the position. She can handle this and you know. You knowits so nice when uh, theres, the successionplan works from internal and you see your taking this position, unlike, not you don’t want the people from outside, but its so ... they worked so many years to get there where you are. And in some ways they look up to you. Unlike if you are not developing them. I feel I failed???

F: What is the vision and the mission of your institution?

P1: uh, its behind you. Thats for Mandela, because we had two things under our wing. But uh, actually its more or less the same. Our vision is to ensure that we give this training to the community and improve their health and reducing the shortage of nurses. So what we are ??? that each person is unique and they could uh uh develop at a different levels or paces and you start to be very patient with them. That’s why we introduce all these learnerships and all. And spiritually, you know we come from different religious what you call... and the are all different and you have to embrace this. So to reinforce this, we have like, when we have this uh... projects that we are running under sociology...they need to portray culture, they dress, they prepare food and every body needs to taste the dishes of different cultures and they do and they wear... different activities, to say that, you know what, we have something that is common, but different. And we could... you need to repsect me for who I am. You look at me and say, o o o, wah tod you do...that religion or that culture. Because transcultural nursing is gonna take you to where the patients are different. If you cant respect yourself and others around you, how are you going to nurse our patients because they come from different back grounds. You are in a pot and you are salad and you find patients being salads. Arre you going to segregate them and say are you Muslim or are you ...I want to touch only Muslims or only or what ever religion. So we are trying to live this value or this philosophy. Thats why we involve students to participate and to do this. And
we are saying they are doing sociology, when it comes to culture, either the definition and all... just stretch it again and show us what wedding happen, how you interact as a family, what are the things like teenage pregnancy. You know they play a role play, they combine technique, they even put the world cup this time... Some one was pregnant and it was a worldcup baby. And the farther had to go and play soccer. Follow this baby round. I am going to Renaldo, his going to go back. To Portugal and all this. And all the learners were showing the cultural schock when the Indain comes and introduces the African husband or what’s it called, the other one, come and introduce the husband which is going to be an Indain. Hey, hey hey, how am I going to deal with this? This is a different... that is what is happening in our society. People forget that /// and you don’t see anything wrong with a white or an Indian or coloured. Its just political these names were given, but they, if you cut them the blood is still red. They feel the pain. She wont say: I don’t feel the pain. You can cut me. She’ll say: you cutting me now, are you mad? So these are the things we try.

F: wil it be possible for me to get copies of your original vision and mission statements that you had when you started? If they were changed in that three year period...

P1: I reviewed it, I made them realise what the contradictions were.

F: ja, you know its also, if you are in a dynamic and innovative company then these should change with the strategy of your company.

P1: yes that too. But it is still like, we still look in to our shareholders, our staff, your assets, because they want their share. We still have to look at our customers who are students. They are here for their education and they pay their money. But the staff is viewed as a valid asset, uh-uh valid assets that is of high value that needs to be nurtured. Thats way on the process ... they were not given bursaries. So I motivated for them to get bursaries. I... to mention a few things...and petrol allowances. Because now for the clinical accompaniment to be effective, well these girls are looking at the petrol, they gonna cut down on the trips. They are gonna say they have gone there even if they hadn’t. Even if you look at the record, the are??? Because they are not getting petrol to get that place. It has to come from the salary. Yes, I introduced that petrol allowance, I, I, I looked at their salaries, they were not market related. We reviewed that. I looked at them and I said this college has been here since 2003, you have never allocated staff. How do you expect them to develop from their salaries? I want bursaries. I get bursaries now. So I got bursaries so they could...

P2: we all did assessors...

P1: I ensured that they all did assessors course and now...oh, computer skills. Now looking for two new directors. If I plan to take early retirement I ???

F: Is the Academy, is it a separate legal entity from ...or is it under the JMH group? A divison, department of JMH?

P1: It’s under. Under. It’s a subsidiary, its like the big name who are called Joint Medical Holdings and then we have subsidiaries. So all these are the subsidiaries. So thats how we do our marketing, by putting all... we put all that to show that we have this hospitals, we have ambulances, then we have a school, then we have a behaviour centre where we treat
psychiatric issues on outpatient basis, all that.

F: and is this run as a profit centre?

P1: yes they are all profit centres. Uh... the only centre that is new is Yeathemba, its not there...

F: it is here, ja.

P1: that s the non profit one because its a... they do like free HIV counselling, its like a support centre for patients that doesn’t... you know sometimes medical aids ??? So we introduced this. Even our students can utilise this because we have students who is living with HIV, who are on anti retriivals. En uh, we are referring them for such issues.

F: What about the indemnity? Do they make provision for their own indemnity or is the indemnity...

P1: professional one? Professional indemnity is inclusive in the fees. Our fees actually include. Thats why in the brochure, I have written that. If you look in the brochure, I gave you the brochure, the fees include professional indemnity, we pay with DENOSA so that they are covered because when they go clinical they can be exposed to anything. But i don’t ake any nonsense because sometimes qualified staff will do their non sense. And after asking two or three questions they drop the case. I said, you know, you must be careful. I need to know who was on duty, why would the first year do this which is far from her scope? Becasue you allocated her. And then unfortunately you will find that qualified staff has signed. And then I ask whose signature is that? That person has signed, she was supervising her. So please, in your discipline, wait if the matter goes further and somebody take legal action like the public. They tell me I will point fingers. But for now I think it’s an internal thing. Warn the student and tell the qualified staff how to professionally sort her self when shes given someone something that is above the scope. But don’t blame it on the students. Because they want to blame your training, they are very quick. Its like they are waiting to attack you in the meetin, just recently I had a clinical competency...uhm....meeting because the argument was on the thiongs that happen. You know how they sign records and they don’t even look? They, they, they...they jsut sign. So this is waht I, I wil give you a copy, thye just sign and I am jsut sharing this with you. These are the problems which are very common and you go to the wards, nobody even sees you nd they are doing wrong things and they are qualified staff and they allocate people sometimes not according to level...becasue a person is lazy, doesn’t look that this is a first year student. She says go and put up a vacolitre or go and od that and give this treatment. And she says cubicle 1. The student goes to cubicle 1, There is one patient, give this patient and it is the wrong patient. Then I jacked up the students and say ask: What intelligent questions should you ask? Oh, if a person says I must do that, I don’t say defy them, respect them. But intelligently do that. What intelligent question? I am suppose to the person that is allocating you about your scope. First you must acknowledge that it’s above my scope but I am willing to learn. What is the name of the patient?

F: yes, yes. Do you know that UHM... the other day I was doing rounds in the hospital
And the sister said: the knee replacement feels fine, no pain in the leg. The ...

P1: the diagnosis, not the patient...

F: not he patient, the diagnosis and you know, when I was teaching PHC I used to teach physical examination and then you know, they talk about the pneumonia in bed so and so and then I said: Show me a pneumonia. I would love to see a pneumonia. You know because I haven’t seen one and then I get this picture in my head of these lungs lying in the bed, so inflamed, struggling to breathe, full of secretions. But I mean they totally depersonalise the the patient.

P1: They don’t even see how they hurt the patients. They are demurred to...what? to a disease. To a procedure, you know. But may be the nursing, it is the nursing or our times, where the young one’s they think anything and they say things. And when you listen to them, you say, what? What did you say? I wouldn’t like you to talk to students. Because I wouldn’t like them to learn what you are saying.

P2: I have list of the graduation, have a look at that.

P1: This is graduation 2004, You see I was there. Oh, ha ha, that one the parent that came with 27 questions, I will never forget that one...oh. The farther had a rude daughter who was very unruly. He was referred to me...

F: uh hu...

P1: He came with 27 questions. He was from the union, And he was pompous about being legal and what not. I said, lets start, lets forget about being legal...But because I have my eldest daughter, shes a lawyer, so I might be more jacke up about the, you, new. So lets forget about hte law and see what is you grievance, what is it that you want to know. So he had 27 questions...but when I talked to him, it was like I answered fast. He said, hu, why didn’t they bring me to you in the frist place? You should be the principal. I said, no I am the matron of the hospital. He said So why am I here? I said because you are not satisfied witht eh principal, so I am just helping the company to resolve the conflict.

F: Ja, ja. Are your students involved in any community outreach projects? You mentioned the HIV counselling and free services but is there anything else that you are involved in?

P1: Yes uhm... sometimes they go out to do free bloodpressure uh uh checkings. This is...look...this is waht we sometimes send out in terms of information on the criteria on how select. You can have that.

P2: and we also assist in, like we have teh Big Walk?

F: yes?

P2: we have rendered first aid...uh..

P1: do you still have the copy for this one?

P2: list of students?
P1: the last one...oh but now, older...ha ha... old ones

P2: 2000 and uhhmm

P1: but they did participate, yo know from the hospital side, you know? We always take them to shopping complexes to do free blood pressure checking, GM’s, and health education, condoms, HIV. So the centres that we visit are the Wheel, the Workshop and game City. Those are the shopping complexes that we visit. So our nurses go there and then our students go there. I have something on the newspaper though, jsut look at that. Just recently the Chair form Church was running that and our students were participating. It just here.

F: uhm hm.

P1: this is the piece. This, I think you ahve met this guy, Mr Naidoo, the one classroom three?

F; Yes, Ok

P1: This is Sr Naidoo from the ward and then the Unit manager, so these are our students who were helping there. But now it is like, under the church banner.Btu we are invited by church because of the employees who go there. Routinely we are doing these shopping complexes and teh diabetic clinic, and so we also go the Clare Estates. So those are the... we do...we do...

F: ok that s nice. Thank you very much for all the information.

P2: Here are the photo albums of the previus graduations

F: Thanks I will look at them. For interest sake, do yo have any white students?

P1: no we don’t, they don’t come our way

F; but in our area we struggle to get uhm Indian students

P1: no you know, the whites don’t come here. They have the fear, you know, people have all wrong ideas. When you walk around here, you don’t see your kind. If you see one, yo know she is...she knows nothing happens this side. But the first thing that we had, we had a meeting with the (XXX) when they were told that you could be coming here: how is it? How bad is crime? We then just, Mrs Naiker laughed and she said you know guys, the language you speak and the languge we speak... do you have parking?
APPENDIX T

TRANSCRIPT OF RECORDING ON THE ARCHIVED FILES OF GANDHI MANDELA NURSING ACADEMY

Date:

Ghandi Mandela lêer begin ek nou mee, in die leer is daar ‘n brief wat gereg is aan die SAN,C gedateer Mei 3, nee 30 Mei 2002, waar hulle aansoek doen om registrasie as ‘n nursing school: JMH Academy en hulle vra om die ENA & EN en Bridging Course training aan te bied.

Enclosed is the curriculum for the above training courses. Samples of formative summative tests with memorandum, time table, course objective, situation analysis, disciplinary code, practical evaluation, orientation programme included

Staff: Mrs. Pakkiri RN, RM education admin present study M Cur admin. NSM is her current responsibilities
Mrs S Naicker RN, RM education admin clinical instructor
Miss Mohammed RN, RM Education ICU, ICU sister
Mrs. a ram RN. RM education admin trauma sister
Mrs. IE Mundhree RN, RM clinical accompaniment
Mrs. R JaiKaran computers MS excel secretary
Hospital safe available for storage of exam and test papers.
Teaching aids: resus and for CPR, OHP full model and bed with equipment for demonstration of nursing procedures;
Admission requirement and selection: please selection test, matriculation certificate, positive monthly appraisals

dan is daar ‘n volgende briefie wat gestuur is June waarin Mrs. Pakkiri al die documents terug vra omdat dit onvolledig is. Brief van die SANC aan Mrs. Pakkiri 19 June 2002 word die goedjies acknowledge en stuur terug saam met circular 5 of 2002 and 7 of 2001. 11 June 2002” application for approval of a nursing school:
The above mentioned nursing institution hereby apply for approval of a nursing school under the proposed name of JMH Academy of Nursing. Find enclosed course leading to enrolment nursing auxiliary 2176 course leading to enrolment as an enrolled nurse 2175 and then also course leading to registration as a general nurse. Letter to Mrs. Pakiri: account of R1368 from SANC for accreditation.

Letter dated 4 July 2002 from SANC re application for approval of the curricula for the following programmes: course leading to enrolment as a nursing auxiliary; enrolment as a nurse; registration as a general nurse; application for approval off the following clinical facility: City hospital; Isipingo hospital; approval as a nursing education institution JMH Academy of nursing receipt acknowledged fee payable en die invoice
Letter 16 Augustus 2002: To Mrs Pakkiri:
For the above mentioned curriculum to be submitted to the education committee for consideration the following is needed for each programme: a table of contents; admission statement; formulation of curriculum using south African qualifications authority format programme; content and credits programme; objectives; exit level outcomes; associated assessment criteria; critical cross-field outcomes/associated assessment criteria; number students or pupils you intent to admit; number of intakes per year; learner contract; selection criteria; admission requirements; explicit examination policy; support system for staff and students/pupils; academic support for weak students; disciplinary code; indemnity for learners; clinical learning objectives according to units. Your curricula are sent back to you for proper compilation. Please contact quality assurance department for assistance.

Enclosed circular 2 of 2001 and 5 of 2000

5 Junie 2003 clinical facility City Hospital Isipingo Hospital Maxwell Clinic and Durdoc Hospital was discussed at SANC meeting. It was resolved that the curricula be approved: enrolment for nursing Auxiliary, enrolment as a nurse Clinical facilities: City Hospital: 24 learners; Isipingo hospital 16 learners; Maxwell clinic 4 learners; Durdoc hospital 6. Mentoring of pupils no monitoring of pupils performance in other approved programmes before approval of bridging course for enrolled nurses leading to registration as a general nurse; site visit of the nursing school before for commencement of the training. From Mrs Ntlokotsi.

Then there is a letter informing them of a site visit scheduled for 17 June 2003 SANC quality assurance visit: 17 June 2003 teaching staff must be present and then a request to change the date from 17 June to 20 June 2003.

Letter from Mrs Naicker: approval and issuing of licence to JMH Nursing Academy I refer to our telecommunication on 1 June 2000, no 1 July 2003, where you confirmed that there were no SANC meeting scheduled in July 2003 to address the above issue. Our groups’ directors have as such expressed their concern. We have at present a group of an average of 40 potential learners who have completed their first year Enrolled Nursing course and are unemployed and wish to commence with their second year in Enrolled Nursing course in August 2003. This will enable these learners to be eligible to write the examination in May 2004 having completed 10 months of training. The management of Joint Medical Holdings Ltd would greatly appreciate your assistance in finalising their approval as soon as possible as to prevent these learners from qualify only in December 2004 as opposed to May 2004, thus delaying their opportunities to seek employment. We would appreciate it if this matter could receive the committee’s urgent attention so that we can contribute towards the HW SETA national skills priorities. S Naicker.

There is a Cipro certificate. this one is out of place sorry let me just put it aside
then there’s again ‘n letter from Joint Medical Holdings to who, the SANC, 7 August this is that JMH Nursing Academy is awaiting approval/issuing of a licence all documents thus far have been proposed as JMH Nursing Academy. The above-named company requested that the licence be issued as Ghandi Mandela Nursing Academy. The physical address remains 52 Lorne Street, Durban. Then there is another letter: 20 August 2003: I refer to our telecommunication with Mrs O James on 1 July 2003 and correspondence on 2 July 2003. I have to date not received any response to our inquiry. The management of Joint Medical Holdings would greatly appreciate your assistance in final accreditation report with a licence number as soon as possible. Dr. Bhoola.

Reply to Dr. Bhoola and that is acknowledged. The report for the accreditation has to go to education committee of the SANC and then it has to be ratified by SANC. It is unfortunate that as yet the education committee has not sit as soon as it is ratified by council you will be notified. Mrs O James

Letter to the Registrar: 18 September 2003, again concerning the accreditation: I refer to our telecommunication with Mrs. O James 1 July 2 July; 20 august. I have to date not yet received any formal responses to our en quiries. I must stress to you that I have had to incurred tremendous costs in purchasing a property for the nursing school valued at R1 million. My monthly cost for the current running expense is R30 000, as we have been unable to open the school timeously. We are experiencing financial deficits within the company since the budget the bought premise is not bringing in any revenue to function independently. Mrs. Olive James and Mrs. Sibiya have inspected the premises on 20 June 2003 and indicated that everything was in order. It was only a matter of reporting back to the SANC for final approval. We were promised that this process would be finalised within 3 months of date after inspection. We have to date received no correspondence from SANC and are very concerned about the way in which this matter is being handled. I have been giving to understand that the delay in finalizing the approval of nursing school is due to the change in the council cabinet membership. I don’t know what that is however, we would appreciate if you could issue us temporary licence until such time you have finalized the report for accreditation. Dr Bhoola signed again.

Accreditation visit report from JMH: there is a summary of all the staff, and the facilities and the equipment and then there is the document completed by Mrs James, a letter 22 September approval and issuing of licence to JMH Ghandi Mandela Nursing Academy as the academic advisor to the Joint Medical Holdings Nursing Academy my brief has been to oversee the sight plans curriculum and enrolment of students our understanding has been that accreditation will be given in three months from the moment of your sight visit we have appreciated your response to our letter dated 2 July 2003 additionally we have written twice to Ms. Subedar on 20 August and 19 September I am pleased that you had accepted my call on 19 September 2003 we realise that the delay in providing accreditation to
the JMH Nursing Academy has been due to the timeframe for the appointment and orientation of the new SANC we are also aware that you cannot proceed with enrolment without the accreditation letter concern is therefore expressed on two counts namely 40 potential learners cannot proceed with their careers the academy is losing 50 000 rand per month your assistance in this matter is crucial and I am pleased that you proposed to place the question of accreditation end of October 2003

nou brief van die raad het geen datum op nie dear Mrs. Naicker accreditation receipt of Dr. Bhoola is here with acknowledged accreditation visit that was undertaking by the two officers of the council was a data collection exercise the report will be submitted to the education committee for deliberation and thereafter to full council for approval if all requirements have been fulfilled the office can not issue any form of licence without the approval of the council we therefore advise you to outwait the outcome of this visit as the councils forthcoming resolution the office is also uncertain of the status of the source to the letter in respect of the academy of nursing my goodness professor Bhoola anyway kom ons gaan maar voort en ok nou is hier weer die request change of name issuing of licence dis gevra dat die verander JMH Academy application was approved on 26 and 27 November correspondence with regards to requesting the change in the name Ghandi Mandela Nursing Academy was forwarded to the professional advisors on the 7th of August was not done and the licence is being issued as JMH Nursing Academy kindly note the change of name from JMH Nursing Academy to Ghandi Mandela Nursing Academy enclosed the copy of the previous correspondence requesting the name change the physical address remains the same en hier is ook daai Cipro certificate application for main reservation waar hulle Ghandi Mandela nursing academy reserve vir ‘n tydperk van 3 maande nou is hier weer ‘n brief van Mrs. James 14 January issuing of licence your letter is acknowledged the name change has been noticed the office had to ensure that the application which was on JMH be approved and then implement the new name which is Ghandi Mandela Nursing Academy kindly note at present the council does not issue a special licence document or certificate for nursing education institutions for now the letter of approval serve as an authentic document the council is in the process of designing certificates for all nursing education institutions that are approved so daar het hulle uiteindelik in 14 January 2004 ‘n brief hier nou weer ‘n brief 2003 2 December the Council oh dis die confirmation Council meeting 26 27 application was approved you are permitted to run the programmes course leading to enrolment as a nurse course leading to enrolment as an auxiliary nurse number of intakes per annum one number of pupils per programme 50 and 50 clinical placements to be utilised number of pupils to be placed city hospital 24 each Isipingo hospital 16 each Durdoc hospital 6 each Maxwell clinic 4 each please note the council of exact date of commencement of the courses congratulation and best wishes die brief was geteken deur Mrs. James nou is hier ‘n Ghandi Mandela nursing first letter head 16 March 2004 application for the approval of
non nursing personal to teach the nursing programme Ghandi Mandela Nursing Academy has the following enlisted doctors that are keen to be involved in nursing training Dr. RL Bhoola specialist physician Dr. V Govin, specialist surgeon and then Dr. YK Seedat Professor in medicine focusing teaching would be anatomy and physiology first aid nutrition specialised areas in nursing. (my goodness). 8 June 2004 antwoord Mrs. Naicker specialised personal to teach pupils please be informed that the programme under discussion is for very basic categories it does not need specialist anatomy and physiology should be taught at an applied level very elementary level Sibiya 15 June 2004 application to increase intake for programme 2175 Ghandi Mandela nursing academy was approved as a training school by the SANC in November 2003 we had then proposed one intake of 50 students for 2175 one intake for 50 students 2176 nursing school hereby request to increase the intake of pupil enrolled nurses 2175 to two intakes of 50 students per group per year reason been that JMH Ltd no longer accommodate the total 60 students from the following private schools Michael mass candle light eight Protea Nursing School for their clinical requirements since February 2004 further to our accreditation visit in June 2003 JMH Ltd bed state has increased as the beginning of 2004 and the changes were as follow city Maxwell ward 10 old bed state 168 new bed state 178 Durdoc 3 old bed state 46 and now 50 Isipingo ward 8 100 to 240 taking the above information into consideration therefore request to increase our intake of pupil nurses 2175 from one group per year to 2 groups per year Mrs. Naicker application for increase the response from the council 16 August 2004 before your application is presented to the master plan that will demonstrate how the second intake will be integrated the staff compliment to see if the pupil tutor ratio is in line with the council recommendations Mrs. James dan hier is nou weer ‘n brief aan Mrs. James 26 Augustus 2004 situational analyses of the nursing college the principal s Naicker tutors M Vilakazi clinical teaching sisters hurr no let’s start all over Hurrishun; Sister I Peters en Sister V Hunsracjih clinical preceptors City Hospital Sister F Alley Sister C Singh Sister A Naidoo Isipingo Hospital Sister Tshabalala Odayar Cassim Durdoc Danisa H Danisa physical facilities and equipment offices principal secretary two offices for academic staff classroom times 3 with seating capacity of 50 each all for group discussions and role play clinical simulation laboratory with all the necessary teaching aids library with prescribed and reference text books for students use while in the nursing college resources in the library computer times 2 with internet access photo copy and fax machine clinical areas for placements city Maxwell 10 ok this is the same as that it was before 10 168-178 Durdoc 3 46-50 Isipingo 8 100-140 Mrs. Naicker dan nou hier is ‘n brief van Mrs. James 27 October 2004 application to increase the number of intakes from one to two per year accreditation committee meted on 20 October 2004 your application was discussed and approved it was resolved that Ghandi Mandela be permitted to have two intakes per year the number of pupils per intake to remain as 50 then ‘n brief van Mrs. Naicker again 15 February 2005 training for R683 the above named in this academy has been licensed in
November 2003 and had applied for accreditation for the following 2175 2176 683 since commencement of the academy thus far we have only trained 2175 and 2176 we were advised to wait for a year before commencing the programme 683 kindly inform us when we can commence training with 683 should you require further information urgently please contact us ok daai was 'n copy or a fax ag selle ding klaar gelees antwoord 3 March 2004 receipt of your letter dating 15 February is herewith acknowledged according to a letter written to you on 5 June the curriculum was not approved the schools performance in 2175 has to be monitored you may apply in march 2006 for the 683 programme curriculum must be accompanied by proof of registration with the department of education proof of registration with receiver of revenue and audited financial statement your cooperation will be appreciated brief 28 February 2005 amended register further to our telephonic communication 25 2 acknowledge the following changes to the registration of students list of names of students for first time registration of 2175 times 50 students not as previously sent as 52 do not refund their admission for to the sum of R91.20 but instead carry it over to the next intake please take note of this two students who are no longer part of the group reddy vaneesha and pretty matlala dan is hier net 'n naam lys aan waste brief is dit die hierdie was 'n faks van daai Ghandi Mandela nursing academy 6 April 2005 is 'n brief van hulle moet 'n naamlysie ken students commencing training on 1/12/03 who are continuing second year of studying dan is daar 'n naam lys en 'n naam lys en 'n naam lys net datums waarop hulle begin 4 Mei 2005 confirmation of accreditation kindly furnish us confirmation of registration with a practise licence number on a formal south African nursing council letter head hw seta department of education require this information so that we could gain access to accreditation by these departments respectively kindly give this correspondence your urgent attention dan is hier 'n brief van Mrs. Kgonwana wat erken dat die studente gerigister word information update form 2005 'n versoek dat die brief voltoo moet word en in gestuur word na die raad toe brief 3 maart 2005 en dan hierdie brief application for intake 2175 second year south African nursing council is lisenced Ghandi Mandela Nursing Academy in November 2003 we currently have the following intake 2175 times two intakes of 50 learners 2176 times one intake of 50 learners motivation there is a demand from learners who have completed 2176 and wish to upgrade qualification from enrolled nursing auxiliary to enrolled nurse by completing the second year programme of 2175 we request approval for this proposal time one intake of 30 learners situational analysis Mrs Naciker Mrs Ramm Mrs Vilakazi Mrs Jahveri Clinical Teaching Sr Hoorishan Sr Peters Sr Hansrah City Hospital Ali Singh Naidoo Isipingo Tshabalala Odaya Cassim Durdoc Hospital Danisa physical facilities office principal secretary 2 offices for academic staff classrooms times 3 50 seating capacity of each all for group discussions and role play clinical laboratory library same same same as the previous same beds as previous dan hier is die aplica acknowledge the receipt on 27 July your letter dated 3 march is herewith acknowledged our telephonic conversation on 27 June as reference you
are requested to clarify the content of the application regarding number of intakes per year. Submit situational analysis for clinical facilities. Submit situational analysis for the nursing school. Clarify who are the resources that have been upgraded to accommodate these extra students. Ganswane information update. Dit is gestuur. Ok, nou is hier ‘n application. Ok, laat on seers hierdie een sien. 3 Mei 29 April. Application form for substituted students. Dan is hier ‘n lys van students the above named candidates have been terminated for training except for Subramoni Bradley who has been reregistered as pupil nurse with effect from 17 February 2005. Only 14 candidates can be registered for training. Kindly indicate who of the 15 candidates must be registered accordingly. Your immediate response before 15 April. Mrs. Ghowani. Ok, response to fax list of 14 candidates to be registered. En dan is daar ‘n naamlyks daar aan nou is hier weer ‘n brief. 5 September 2005. Mrs. Ghaswani application for intake 2175. Second year. Copy of your letter. En dan is hier situasie annalise maar dis presies dieselfde as wat dit was dan nou die raad se reply 14 Desember 2005. According to the council records, the nursing is proved at its meeting. 1 intake of 2175. 50 learners 1 intake 2176. 50 learners approved by the credititation committee of council at its meeting held 24 to have 2 intakes of 50 learners each for the course leading to enrolment as a nurse. 217 we would like to be approved to ad on a group of students for the second year. Once off of 30 learners currently the nursing school does not take first year learners. Discussion council does not have special approval for once off provisions off programmes. The same process will have to be followed indicating among others anditation of resources to accommodate additional intake and number of learners. It was agreed that since the nursing school is approved for 50 learners in the programme and the school does not take 50 50 first year learners the total approved number of 50 times 2 intake per year may be taken at second year level. For as long as approved number are not exceeded. Nou is hier ‘n brief van ‘n P. Govender. 29 Maart 2006. I am typing this letter to you to let ou know my daughter is a first year student nurse at Ghandi Mandela nursing academy. She has written her examination on 24th march and her colleagues have done their practical training at the Durdoc medical hospital and city hospital during the time they were not remunerated understandably they had to put in a lot of time for the duration now they are assigned to duty at the city hospital without remuneration they were told that should they not report for duty their results would be held. I ask please to intervene so that these students get remunerated for the work they do. Note the students at state hospitals too. I like most parents has sacrificed most of our income to finance their study. Your assistance in this matter would be greatly appreciated by all of the students. Proof of application for registration with the department of education as a private further education of training institution. The office of the council received proof of submission of the application form to the doe on 14 June 2006. An acknowledgement letter is required from the doe as proof of submission of your application for consideration. Ok, then there’s a letter 1 August 2006. This letter serves to confirm that Ms. S Naicker is no longer the principal of Ghandi Mandela.
nursing academy as of 1 august 2006 Mrs. s Pakkiri is in charge it will be appreciated if all future correspondence could be addressed to me should you have any queries het ek die datum van daai brief gese 1 Augustus 2006 4 Augustus erken ontvangs vra Pakkiri se SANC number en kwalifikasies Mr. P Govender 21 Augustus your letter dated 29 march my goodness has reference the issue of payment and non payment for work done or not done at city hospital is an employer employee issue and there for does not fall in the jurisdiction of the nursing council ag nou het die ding weer afgesit wee jy you are advised to seek the assistance of a labour organisation like DENOSA Grace Ramadi inquiry about the approval of the new programme ok laat ons eers hier kyk 30 augustus accreditation for the 4 year training my goodness Ghandi Mandela nursing academy request all the requirements guidelines required for accreditation for the nursing diploma 4 year course with network from currently Ghandi Mandela nursing academy has successfully undertaken the enrolled nursing auxiliary enrolled nurse course as from December 2003 due to the shortage of registered nurses for the joined medical holdings group there is a need for the above course so that our joined medical holdings hospital can render a save quality of nursing care for our community at the moment we are using registered nurses from nursing agencies and this undermine our quality currently providing the community with midwifes deliveries at discounted prices as the community prefers to use private hospitals instead of government hospitals for this service this will meet our practical requirements for midwifes as the average number of cases delivered by midwifes is approximately 100 per month en nou is hier ‘n brief 21 September 2006 Mrs. Pakkiri require council has currently place a moratorium on the approval on the following applications new school sub campuses of private schools new programmes increase of intakes increase of the intake en hier se hulle council has placed a moratorium en as jy met hulle praat daaroor dan se hulle department of health nie council nie nou is hier weer ‘n brief en dit is 2 Augustus is sy datum information about the course bridging to RN’s Ghandi Mandela nursing academy also wants to offer the nursing community the opportunity of undertaking the course for bridging to registered nurses at the moment there are limits of this course for bridging being discontinued and a 4 year modulary course been offered please enlighten me brief van Mrs. Pakkiri 16 Augustus currently council has place moratorium on approval of curriculum for the bridging an enrolment leading to registration as bridging course for enrolled nursing education institutions are currently approved to offer the above mentioned are not part of continuing until further notice the 4 ear course leading to registration as nurse general psychiatry in community midwife offered a diploma or degree level is only one its approved by council no modulate course is being provided Kgaswane hulle het gewoeker met hulle talente nou is hier weer ‘n brief late exam entering to the registrar late exam entries I Romana Roberts employed at kruis hospital wish to state that I’m in charge off entering the pupil nurses exam and due to unforeseen circumstances fell ill last week and was hospitalised for 3 days off returning to work I realized that
pupils were not entered for the examination and phoned Ms Erasmus immediately and advised me to put it in writing take full responsibility for the pupils not been entered as I honestly never expected to fall so ill I hereby wish to grant permission to be granted permission to enter these first year pupils for rewrites I'm even prepared to pay a penalty out of my pocket shame complete documentation 13 November is hierdie een daai een was ook 13 November completed documents for the first year examination re enter for enrolment as a nurse has been submitted to ms Erasmus for registration it has been submitted two working days late we apologize for any inconvenience signed by Mrs. PM Brown nursing manager of KwaZulu Natal Health Grey’s Hospital wonder ek of sy ook gecharge was 17 November 2006 application forms posted on 10 November acknowledge you are informed to accreditation status correspondence has been sent to Umalusi explaining the present situation of South African Nursing Council as an education training quality assurance body the office of the council is still awaiting the response from Umalusi to avoid addressing individual providers on the same issue your co operation is highly appreciated Sibiya dis die laaste document wat hier in hierdie leer is hierdie leer was nou nie so opwindend gewees soos die Gold Fields leer maar obviously is hierdie skool maar net 3 jaar oud en het daar nog nie so baie gebeur nie ek dink in elk geval die skool is baie dinamies en het baie gedoen gekry in 'n kort tydperk so dit dink ek is die einde van vandag tot more