Registrar's Portfolio
ANNUAL REPORT 2013

ATRIUM A

RETHINK. REINVENT.

UNIVERSITY OF JOHANNESBURG

Registrar's Portfolio

ANNUAL REPORT
2013

RETHINK. REINVENT.

UNIVERSITY
OF
JOHANNESBURG

CONTENTS

www.**uj**.ac.za

ANNUAL REPORT 2013
REGISTRAR'S PORTFOLIO
EXECUTIVE SUMMARY

OVERVIEW, OPERATING CONTEXT AND GOVERNANCE

The Registrar's portfolio consists of the following divisions: Central Academic Administration (CAA), Central Administration, Corporate Governance, the Unit for Quality Promotion (UQP) and Health and Wellness (excluding wellness services rendered by the Human Resources portfolio). The Registrar's Executive Committee oversees the governance within the portfolio and meets monthly.

Central Academic Administration (CAA)

Academic Administration refers to the management and governance of the academic lifecycle of the student, from application to graduation. CAA operates to enable the University's fitness for purpose and adequate support of its primary academic strategic objectives. The current student data system is Integrator from Adapt IT (previously ITS). The institutional Academic Administration Coordination Committee (chaired by the Registrar) oversees the governance of academic administration and meets monthly. The following other specialised committees are operational: Admission Committee, Registration Committee, Timetable Committee and Graduation Committee, chaired by the Registrar. In addition to this, various specialised operational committees exist within Academic Administration to attend to operational matters.

The Director: Academic Administration reports to the Registrar. Each faculty has a Head of Faculty Administration reporting to the relevant Executive Dean. However, a dual governance system exists and the Registrar is ultimately accountable for the quality of academic administration. The annual external student data audit is submitted to the Department of Higher Education and Training (DHET) via the Registrar's Office. CAA governance is divided into the following units: Faculty Coordination including Academic Structure, HEMIS Coordinator, Registration Logistics, the Student Enrolment Centre, Timetabling and Graduations. The following governance committees report to the Senate Executive Committee (Senex): Admission Committee, Academic Administration Coordination Committee, Registration Committee, Timetable Committee and Graduation Committee. Each committee operates in accordance with the relevant charters approved by Senex.

Central Administration

Central Administration comprises the Director's Office, the Graphics Studio, the Language Unit, the Postal Services Unit, the Study Material Unit and the University Secretariat.

The Director also acts as the Procession Master at graduation ceremonies. He provides assistance with the committee administration governance related to the Convocation, Senate and Council meetings, as well as campus visits by the Executive Leadership Group (ELG). The University Secretariat provides professional secretarial support to Council and Council committees, Senate and identified Senate committees, MEC and MEC sub-committees, joint committees of the Council and Senate, and the Council and the MEC. The Language Unit provides support to the entire University regarding the implementation of the UJ Language Policy. The Study

Material Unit accepts responsibility for stock management, the coordination of the reproduction, purchasing and issuing processes of learning material. The Graphic Studio is the in-house design studio of the University. The Postal Services Unit is responsible for the distribution and dispatch of mail for the entire University on all campuses for both students and staff members.

Corporate Governance

The Corporate Governance Office functions within the broader University context and aligns its service delivery with the legislative framework of the Republic of South Africa, the Higher Education Act 101 of 1997 (as amended), the Institutional Statute of the University of Johannesburg, and the vision, mission, values and goals of the University.

The departments within the Corporate Governance Office include Records Management (paper and electronic); Contract Management; Legal Services; and the Corporate Governance subdivision dealing with: nominations and elections, access to information, Commissioners of Oaths, academic regulations, policy development, Senate lists and membership of Senate committees.

Unit for Quality Promotion

The Unit for Quality Promotion (UQP) UQP oversees and facilitates the implementation of the UJ Quality Promotion Plan. This entails *inter alia* support to faculties and support divisions with quality evaluations of faculties, departments, programmes, modules as well as evaluations of support divisions.

Health and Wellness

Four Health and Wellness divisions exist at the University, rendering extensive services to the University community. Three of the divisions report to the Registrar, namely the Institutional Office for HIV and AIDS (IOHA), Occupational Health Practice and Primary Health Care Services (PHC). The fourth division, Employee Wellness, resides in Human Resources.

**Figure 1: Some staff members from the Registrar's portfolio
at Diversity day celebrations**

STRATEGIC PRIORITIES IN 2013

Each division in the Registrar's portfolio has its own strategic objectives and scorecard. The following were the main strategic priorities of the portfolio:

- Enhancement of the online application, registration and late enquiry systems;
- Improved efficiency and effectiveness related to the matching of Grade 12 results and the final selection and admission process to enhance compliance with the Institutional Enrolment Plan for 2014;
- Implementation of the New Timetable Optimisation Software (Celcat);
- Development of a new timetable for the Doornfontein Campus (DFC) for 2014 (to accommodate the relocation of programmes of the Faculty of Health Sciences and the Faculty of Engineering and the Built Environment to DFC). The new Celcat optimisation software was utilised to construct a new DFC timetable which was completed during November after an intensive consultation process with DFC academics;
- Development of a new system for the Management of Marks System (MAMS) in response to the need for real-time student performance information for the early identification of at-risk students;
- Enhancement of the undergraduate Prospectus (taken over from Advancement) to ensure the accuracy of information provided in the booklet, to improve the promotion value of the documents and to provide a user-friendly, comprehensive guide to the study opportunities at UJ;
- Preparation for the implementation of the Act on the Protection of Personal Information;
- The establishment of a Legal Service Office;
- The revision of existing policies;
- Sustained excellence in support service delivery by all divisions.
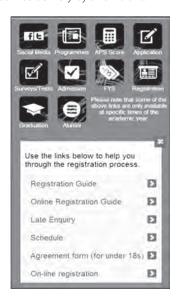
Figure 2: Online Registration via UJ Student Portal

POLICY FRAMEWORK

The Registrar is the Compliance Officer of the University. Therefore, the legislative Policy Framework for Higher Education Institutions is applicable, including legislation, regulations and policies related to the access and protection of information, legislation and directives related to financial management; legislation related to human resources management; directives for student, employee and space data integrity; and prescribed external audits and submissions to the Department of Higher Education and Training.

A special project was launched in February 2013 to review a total of 94 policies dating back from the establishment of UJ in 2005 up to 2008. The review was essential especially in view of the changing Higher Education landscape and new legislation.

MANAGEMENT OF RISKS

Central Academic Administration

A risk-mitigation strategy for academic administration, focusing on the academic lifecycle of the student, was first developed in 2007 and has been continually refined since then. The risks related to academic administration are governed by Central Academic Administration and managed within the faculties, as well as by the academic life cycle-based institutional committees reflected in the overview. The academic administration risks with a possible threat to sustainability are listed below in order of impact and importance. The impact on the institution and the effectiveness of the mitigation strategies are reviewed on an annual basis. The Register reflecting interests declared by employees (family members registered at UJ) was compiled and applicable internal controls were instated to mitigate risks related to assessment marks on the student data system.

In 2012 the University decided to no longer allow physical walk-ins of late applicants during the days following the release of the Grade 12 results. Alternative (virtual) access during these critical periods was introduced via an electronic late enquiry and application system. Applicants without internet access can access information via an extended call centre. Immediately after the release of the National Senior Certificate (NSC) results, UJ calculates the final admission status of first- and second-choice applications as well as declined applicants whose Grade 12 results had improved. All category applicants were informed via SMS of their final admission status. These statuses were also available on the UJ webpage. All four UJ campuses were closed for walk-ins during the period 3 to 11 January 2013 and only card-carrying students were allowed on campus for special assessment sessions.

To further mitigate the risk of walk-ins, a comprehensive communication campaign was launched to inform prospective applicants of the application deadlines and to inform them that no walk-ins would be allowed on any campus in January. For this purpose the **CLEAR** campaign (**C**hoose, **L**earn, **E**arn, **A**pply and **R**egister) was utilised.

Unforeseen operational difficulties resulted in numerous delays in the completion of the DFC campus project and the readiness of venues for teaching with subsequent implications for the lecturing timetable. Intervention strategies were implemented in the operational environment to expedite the project. This was declared an institutional risk and the progress was monitored by the Audit and Risk Committee. Short-term alternative arrangements regarding timetabling were instituted to mitigate the risk.

A new DFC lecturing timetable was developed to provide for the new DFC teaching venue configuration and the Faculty of Health Sciences consolidation. For this purpose newly acquired timetable optimisation software (Celcat) was utilised. An effective rate of 85% was reached. The remaining 15% of modules was scheduled manually.

MAMS was developed in response to the need for real-time student performance information for the early identification of at-risk students. The current Excel program only makes provision for a download of the assessment marks at the end of each semester. MAMS will create a central repository where marks will be accessible to Safenet as they become available during the course of the semester/year. MAMS also adds value to the management of marks as the following examples illustrate:

- The Head of Department, programme manager or module coordinator has access to test results during the semester for early identification of problems in a specific module or on a specific campus.
- Different lecturers on the same module are able to see the rest of the results and can benchmark their results against the rest of the group.
- The overall performance of a student in all modules is available to ensure appropriate and timeous academic support interventions.

The development was completed in April 2013. Academic Administration tested the functionality of the programs. From April 2013 user testing started with a small number of lecturers capturing their marks on the MAMS production system. This pre-pilot testing was done to verify the potentially high risks involved with marks.

Although the pre-pilot group was small, all module types (semester modules, year modules and continuous assessment modules) and small and large groups were captured. The pre-pilot phase was completed after the July 2013 supplementary assessments. All reported system errors were documented and were fixed before the end of June 2013. The internal auditors (KPMG) were involved since March 2013.

The combination of too many module choices and limited lecturing venues at APK had created numerous clashes on compulsory modules and non-compliance with the UJ Teaching and Learning Strategy. Less than 60% of modules comply with the required three formal contact sessions per week, creating a reputational and sustainability risk for the University. The undergraduate lectures were scheduled until 18:45. To mitigate the risk, an existing partially underutilised 1 000-seater assessment venue (D Lab Cellar) was re-equipped as a lecture venue. The Management Executive Committee (MEC) furthermore approved a budget for the construction of two large lecturing venues during 2013/2014.

The MEC approved restructuring within Academic Administration to enable the appointment of an employee dedicated to the improvement of governance and quality of non-subsidised whole programmes and short learning programmes. An appointment was made from 1 November 2013. The existing 80 non-subsidised whole programmes were reviewed during 2013, with the exception of 14 programmes that would submit their reviewed programmes in 2014. These programmes would be submitted to the Council on Higher Education (CHE) as part of the Category B HEQSF alignment before June 2014 for external approval. From 2014 only pipeline students would be allowed to register for the old qualifications. New students would register for the new qualifications and compliance with the qualification endorsement requirements would be enforced.

Central Administration

Strategies were implemented to mitigate risks regarding poor understanding of copyright issues in the academic and non-academic environment and late submission of study material for printing.

Corporate Governance

The management of contracts and agreements remains the main risk. The establishment of the Legal Services Office and the appointment of a second legal officer for the Division mitigated the risk to a certain extent. Quantity and quality of conversion of historical documents also presents a substantial risk, but as the process progressed, this risk was largely mitigated.

Health and Wellness

Legal compliance and risk prevention is sought and achieved regarding health risk assessment, medical surveillance, the radiation regulatory framework, travel health, food hygiene auditing and event medical risk management. Interventions include pro-active assessment of environments for risk, early advisories on developing risk, consulting subject matter experts and site visits.

RESOURCE MANAGEMENT

The approved budget was R 81 177 898 and expenditure was R82 137 862, which indicates a 1% overspending.

The total number of employees is 144, consisting of 67% black and 71% female.

PERFORMANCE

Central Academic Administration

The enhancement of the online application system was tested and implemented before the start of the new application cycle on 1 April 2013. Academic Administration reached its targets in terms of the enhancement of the Application Rating System (ARS) to include the electronic selection of internal postgraduate applications. This project was piloted in collaboration with the Faculty of Economic and Financial Sciences but was available

to all faculties. The development of the Application Rating System (ARS) for the electronic final selection of applicants with the use of electronic Grade 12 results is the first and currently the best in South Africa.

The risk of walk-in late applications was effectively mitigated by means of an electronic late application enquiry system, also available via mobile devices with internet access. An extended call centre was also available to assist late applicants and application enquiries. UJ is leading the online registration movement in South Africa. A student satisfaction rate of 81% was obtained.

The timetable optimisation software (Celcat) was successfully implemented and piloted for the rebuilding of the DFC lecturing timetable following the consolidation of Health Sciences on DFC. Further enhancement of the interface between Celcat and Adapt-IT is, however, needed and will be addressed in 2014.

The Management of Marks System (MAMS) was piloted in the second semester of 2013. Numerous enhancements were requested by participating academics which will be incorporated in a second and third phase/release of MAMS. Sustained excellence in data quality was obtained in 2013 and registrations and assessments were successfully completed without any major incidences.

Based on benchmarking with other universities, UJ graduation ceremonies are rated as one of the best nationally. This is supported by UJ's annual student satisfaction survey at graduations with a 91% student satisfaction rate. A total of 11 176 qualifications were awarded at 50 graduation ceremonies held in February, May and September 2013. No certification risks were identified or reported during 2013. An annual external audit on certification was performed in November 2013 and no exceptions were reported.

In excess of 400 electronic data validations are available via the Higher Education Data Analyser (HEDA) to support Central Academic Administration in validating the data quality of students. Feedback from the University's external auditors (responsible for the audit of the HEMIS/subsidy claim of the University) and DHET confirms that the data quality of UJ is one of the best in South Africa. Only 21 fatal errors were recorded on student HEMIS data.

Central Administration

The different sub-sections within Central Administration have performed admirably and have provided excellent service with regard to committee administration, the collection and distribution of post, the supply of learning material to learners and support to employees in the design and preparation of graphic material. In addition, the Language Unit continues to play a central role regarding the implementation of the UJ Language Policy as a contribution towards the general cultural transformation of the entire University.

The University Secretariat is functioning exceptionally well. The Secretariat cumulatively serviced 133 meetings in 2013.

In terms of printing of study material, 145 785 study guides were printed, 1 420 interactive CDs were reproduced and 3 281 text books bought and distributed in a total of 34 667 issues made to students.

The Graphic Studio performed well as is evidenced by the fact that in 2013 they designed 6 747 items including brochures, magazines, cover pages, advertisements, conference posters, flyers etc. The material cost of this was R230 881 but this represents a real cost of R3 193 905, which represents a saving of R2 963 024. The Postal Services Unit processed outgoing mail with a total value of R1 100 821, and courier services to the value of R4 608 254. A total of 883 circulars were also placed on the intranet.

The Language Unit did 446 translations and 358 language editing tasks as well as eight interpreting sessions and 92 instances of telephonic language advice. A total of 217 clients were serviced, comprising 21 faculties/divisions, 62 departments and 133 individual staff members. Collectively, the clients made 820 language services requests.

Corporate Governance

Thirty-nine nominations and elections were executed during the reporting year. The E-Vote system was tested and will be implemented during 2014.

During 2013, a total of 414 new and historical contracts were added to the contract drawer in the Electronic Document and Records Management System (EDRMS).

Other achievements include: the implementation of a lifecycle workflow within EDRMS to manage contracts, agreements and retention of documents; handling of all the application forms and supporting documents within the EDRMS system through 734 workflow queues; implementation of the HR rollout in EDRMS; the KPMG legal and compliance maturity audit; and the Protection of Personal Information Act (POPI) awareness campaigns throughout the University.

The future for Records Management should be the adherence to legislation, international standards and UJ policies and procedures throughout the entire institution. Raising the stature and excellence in UJ can be achieved when records (and therefore information) can be easily retrieved, referred to and used in making sound business decisions. When employees have the correct records they are able to submit the correct facts, they can draft documents based on the records available (historical or not) and can do so with ease. The ripple effect this will have on the turnaround time of requests for information, as well as the use of information throughout UJ, will be significant.

Unit for Quality Promotion

The flexibility of the UJ Quality Plan, combined with the decision to review all programmes by 2015, poses an ongoing challenge to the UQP: customising support for the different kinds of reviews (e.g. module reviews, combined programme and departmental reviews, non-subsidised programmes, etc.) and keeping track of the progress in faculties and in the service and support units are ongoing challenges. The UQP remains responsible for the custodianship of the quality review processes. Regular communication with the faculties, more specifically HODs, as a way to address this concern, was initiated in 2012 and was continued and extended in 2013.

A report on the implementation of the UJ Quality Promotion Plan was presented to the Senate and Teaching and Learning Committee, while a full written report was submitted and presented to the Executive Leadership Group. Key commendations and recommendations were reported.

The framework for non-subsidised programmes was reworked as a policy with separate procedures and submitted to the Management Executive Committee for approval.

In February 2013, UJ hosted the Garmin Group (an inter-institutional discussion group). Institutions which attended were the Nelson Mandela Metropolitan University (NMMU), North West University (NWU), University of the Free State (UFS), University of Cape Town (UCT), Stellenbosch University (SU) and UJ. On the first day, the discussions centred on student engagement in quality processes.

Health and Wellness

Overall the departments in Health and Wellness performed very well. In 2014, the objective is to engage with the students on various health campaigns, in particular the residence programmes to involve campus health's awareness campaigns, to improve awareness of challenges regarding their wellbeing, as well as recruiting students to be health ambassadors among their peers and take an active role during campaigns. IOHA also plans to expand the Link Network to 2 000 members and to have focused quarterly awareness campaigns run jointly with PsyCaD and incorporating educational material in the induction programmes of SRC, RAG, house committees and societies; and to make a significant positive shift in knowledge, attitude, perceptions and behaviour regarding risky student behaviours.

UJ was identified as a national benchmark institution for HIV and AIDS programmes in its peer review held in October 2013. The Office is one of four HEIs selected by United Kingdom Durex to participate in a safe sex campaign. The total number of clients tested for HIV in 2013 was 3 637.

The Health and Wellness divisions held various successful health campaigns and audits, as well as several awareness campaigns, during 2013, including the STI/Condom Week, TB Month, and Breast Cancer Awareness campaigns.

Figure 3: Students participating in the "My Life, My Body, My Decision" Campaign

The annual health risk audit plan has been augmented by three additional issue-based risk assessments, with a 94% overall completion on the adjusted target. The biennial health risk assessment of the Faculty of Health Sciences scheduled for 2013 was postponed till mid-2014 when the new facilities will be fully operational.

Completed health risk assessments included an ergonomics survey of the Faculty of Law, the Faculty of Engineering and the Built Environment, health risk assessment of facilities at the Doornfontein Campus, and a radiation audit of sources and practices at UJ. A comprehensive Legionella Survey of all hot water systems at UJ was commissioned and conducted by the National Health Laboratory Service to determine the presence or risk of the disease and to gauge the safe temperatures at which hot water systems should be maintained to prevent pathogenic growth. Food hygiene results displayed compliance with the HACCP criteria by exceeding the norm of 85% across the board. The UJ average annual total score was 89%. The total score represents equally weighted microbial counts and housekeeping scores. Given the dynamic research facilities, substances, processes and equipment, occupational health risk was measured through qualitative health risk assessments in all work spaces and quantification of hazard risk in selected high risk environments. A 94% completion was reached on the annual Health Risk Audit Plan.

An emerging need for travel medicine consultations resulted in 102 visits, which was double the number of consultations in 2012 when the service was initiated.

After an initial ELG resilience evaluation in 2007, a second assessment was done in 2013 and provided insight into levels of burnout, quality of life, and workload and group dynamics. The March 2013 Self-Evaluation Survey among the Executive Leadership Group on the Executive Resilience Programme yielded a 100% client satisfaction rate.

A total of 85 events have received event medical risk assessment and deployment of *medical* resources in line with the norms. Intensive planning for the Open Days (*medium* risk categorisation) and President Obama's visit resulted in zero medical incidents. Zero percent adverse events was set as a target and was achieved.

STAKEHOLDER ENGAGEMENT

Internal stakeholders

The most important internal stakeholder is the student registered at the University, as well as the applicants. Sustained excellence in service delivery to the applicants, students and graduates is therefore important. Satisfaction surveys are conducted at the end of registration and graduation. These survey results are reflected in the cycle reports that not only serve at the various governance structures, but are also posted on the Intranet as a circular to the University community at large. In addition to this, the charters of the various committees in this portfolio make provision for UJ SRC representation.

The other internal stakeholder group is the employees of the University, especially those involved in the academic lifecycle of the student. These employees are represented on the various academic administration committees. A dual model exists related to academic administration: the heads of faculty administration report first and foremost to the relevant executive dean, but also to the Registrar via the Director of Academic Administration. This dual model works well, not only in the interest of good governance, but also in the interests of integrated stakeholder communication, teamwork and collective leadership.

All sections in the portfolio work closely with UJ faculties and divisions.

External stakeholders

The Registrar liaises with DHET regarding the submission of quarterly and annual reports; HEMIS audit reports; the submission of new academic programmes, as well as those with name changes and/or significant content changes; and general compliance. Once new or amended academic programmes have been approved by DHET, they are submitted online to the Higher Education Quality Committee (HEQC) and Council on Higher Education for accreditation purposes. In addition to this, the HEQC Audit Report and subsequent further communication on the quality improvement plans related to this audit are submitted via the relevant member of MEC.

Figure 4: Prof Marie Muller and UJ Delegates at the Chevalier Learning Commons in the library of the Hong Kong University of Science and Technology

The Registrar's Office communicates with Higher Education South Africa (HESA) on matters related to the Matriculation Board, including the governance related to the National Senior Certificate results and electronic results. PricewaterhouseCoopers is involved in all the external audits conducted for external submissions to the DHET as well as other external audits. KPMG conducts the various internal audits.

System and service providers include Qualification Verification System (QVS), Adapt IT, Metrofile and Celcat Software.

The Health and Wellness sections liaise with both national and international centres, institutes, organisations and institutions. Local involvement with the City Council's Disaster Management Forum by Occupational Health Practice has resulted in formal collaboration. Extensive contact and bilateral liaison occurs regarding event risk management, public health threats and food safety. Networking continues with colleagues at other HEIs.

SUSTAINABILITY PERFORMANCE

An online application system, including the electronic attachment of admission documentation, is available to applicants in addition to the paper application form. The student system was electronically updated with the Grade 12 results (including the IEB results). Final admission statuses were electronically calculated based on the published admission requirements and statuses were communicated to applicants by means of an SMS within two days following the release of the Grade 12 results. UJ furthermore has an online registration system which is fully integrated, including the real-time validation and governance checks required for registration. With the online registration system, registration, agreement and coding forms no longer need to be scanned, indexed and stored. All timetables and assessment results can be accessed via the Student Portal.

In order to enhance the communication turnaround time with students, an SMS and communication module has been developed within ITS. In addition, secure emails are sent to students with all their information on a monthly basis, contributing to carbon footprint initiatives, as well as reducing the Postal Services' budget significantly. Students can also update changes to their details at any time via the student portal on ITS. Companies or individuals can use the QVS integrated service online to verify qualifications obtained or to track academic performance.

An intercampus access control system interfaced with ITS allows access to students on all campuses. The MAMS system is used by lecturers to capture assignment, test and examination marks online onto ITS, thus improving governance.

In support of UJ's paperless, waste management and recycling initiatives, the Registrar's portfolio sustainability efforts also include: the conscientious use of utilities and ensuring that medical/biohazardous waste derived from clinics and the ambulances are disposed of correctly; the use of Dropbox for the distribution of documents; and significant progress in the rollout of the Electronic Document and Records Management System (EDRMS). The EDRMS project not only contributes significantly to a 'paperless business world', but also improves the general state of retrieval systems.

LEADERSHIP FOOTPRINT

Employees within the portfolio have delivered a number of papers and presentations and are represented in national and international bodies.

Employees within the portfolio have delivered many papers/presentations and are represented in national and international bodies:
* Mr G van Wyk was a member of the Wits application process quality review in July 2013.
* Mr T van Zyl was a member of the TUT registration process quality review in May 2013.
* Mr T van Zyl and Mr L Fourie jointly presented a paper at the International Conference of Learning at the University of The Aegean, Rhodes, Greece in July 2013. The subject of the paper was *UJ's success story surrounding*

the design and implementation of a virtual late application enquiry system (UJ's mobi site) for walk-ins in 2013.

- Mr T van Zyl was awarded the Vice-Chancellor's Distinguished Award for Outstanding Service Beyond the Normal Call of Duty.
- Mr G van Wyk and Ms M Alwar jointly presented a paper at the national annual Higher Education Faculty Administration Forum (HEFAF) conference in May 2013 in Cape Town. The subject of the paper was *Call Centre Management within Institutions – Fit for Purpose.*
- Mrs E de Wet, Mr E Bascerano and Mrs C van der Walt presented a paper on the POPI Bill at a brainstorming workshop of Higher Education Institutions in the Western Cape.
- Mrs E de Wet, Mr E Bascerano and Mrs C van der Walt attended the Legal Practitioners' Forum for Higher Eduaction Institutions at the University of North West.
- Mrs E de Wet presented a paper on *Records Management at HESA.*
- Mrs E de Wet and Mrs C van der Walt presentated a paper by invitation from Cape Peninsula University of Technology on *Compliance with Legislation.*
- Mrs E de Wet, Mr E Bascerano and Mrs C van der Walt are members of the Corporate Lawyers's Association of SA.
- Mrs E de Wet is the Chairperson of the ImageNow user group for South Africa.
- Mr E Bascerano accompanied the Registrar to Singapore and China on a benchmarking study tour.
- Mr M Vongo of the Unit for Quality Promotion (UQP) attended a conference in Glasgow, Scotland in June.
- Colleagues from the Unit for Quality Promotion attended the CHE Quality Assurance Forum. The workshop focussed on the 2nd cycle of audits, the national review of social work and an update on the HEQSF. Papers on the *Quality Reviews of Research-based M and D Programmes* were also presented at two conferences, i.e. HELTASA and SAAIR, and a paper on *Student Engagement in Quality Enhancement* was presented at SAAIR.
- Ms T Foster (Head of the Institutional Office for HIV and AIDS) attended the HESA HIV and AIDS Strategy Group Meetings (as an elected member). She also served as Chairperson for the Central Universities Regional Forum for HIV and AIDS and was selected to serve on the HESA/HEAIDS/AAU task team in support of collaborative partnerships between HEIs in SA and Universities in Southern Africa. In addition, she attended the HEAIDS National Summit, where she presented a paper on the *HIV and AIDS Programme at UJ.*
- Mr A Kleinhans received a scholarship from the Dutch Embassy, coordinated by SVUSA/VU University in Amsterdam, for enrolment into a skills programme in Global Health which commenced on 1 September 2012 and ended on 31 August 2013.
- Ms D Gengan was selected to serve on the HEAIDS reference group for the pilot project aimed at *Youth Development and HIV Prevention through Campus Radio and Social Media.*
- Mr F Simbeku and Ms N Madikgetla presented the following papers respectively at the HIV Colloquium in September: *Student Support Group for People living with HIV at the University of Johannesburg and The UJ LINK Program: Keeping the Link strong.*
- The SA Society of Occupational Health Nursing Practitioners appointed Sr Elana Venter to lead the Hazardous Chemical Substance regulations re-writing project on behalf of the society.
- Dr D Mavunda has been approached by the International Atomic Energy Agency (IAEA) to serve on its panel of radiation experts in Africa. He holds nominated chairpersonships for the Advisory Committee for Industrial Physics at TUT and for e-learning at the African Radiation Protection Association (ARPA).

CONCLUSION AND WAY FORWARD

The various divisions performed very well in 2013 under the visionary and capable leadership of the outgoing Registrar and the Registrar Designate.

The focus in 2014 will be on:
- Ensuring a workable, effective class and assessment time table on all campuses:
- Enhancement of systems and processes to improve effectiveness and student-friendliness of our application, selection and registration processes, with a particular focus on international and postgraduate students

- Enhancements of systems, processes and policies to improve governance and controls:
  - Review of the pilot roll-out of the Management of Assessment Mark System (MAMS) in 2014, and if feasible, further (cautious) roll-out in second semester 2014. (Data security issues as identified need to be addressed.)
  - Implement governance and systems controls to improve the data quality of Continuing Education Programmes (non-subsidised programmes).
  - Comprehensive review of the ITS academic structure data quality, following the new HEQSF alignment.
  - Implementation of enhanced certification security measures (additional security markings on the certificates issued by UJ).
  - Implementation of Protection of Personal Information (POPI) Act requirements.
  - Continuation of the revision of existing policies and the development of new ones as required.
  - Building trust, collaboration and open communication within the Office, with relevant other divisions in the University and with external stakeholders.

We would like to express our sincere appreciation to Council, MEC, ELG members, staff in the Registrar's portfolio, other colleagues and stakeholders for their support and assistance during a successful 2013. Our sincere gratitude to Prof Marie Muller for her important and key contribution to UJ over the many years in various positions in the University and wish her well in her retirement.

We are looking forward to new challenges and implementing new and creative innovations to continue building UJ as an international university of stature.

Figure 5: Prof Marie Muller, outgoing Registrar with Prof Kinta Burger, Registrar Designate

SECTION A:
CENTRAL ACADEMIC ADMINISTRATION (CAA)

1. OPERATING CONTEXT AND GOVERNANCE

Academic Administration refers to the management and governance of the academic lifecycle of the student, from application to graduation. Academic Administration operates to enable the University's fitness for purpose and adequate support of its primary academic strategic objectives. The current student data system is Integrator from Adapt IT (previously ITS). The institutional Academic Administration Coordination Committee (chaired by the Registrar) oversees the governance of Academic Administration and meets monthly. The following other specialised committees are operational: the Admission Committee, the Registration Committee, the Timetable Committee and the Graduation Committee, chaired by the Registrar. In addition to this, various specialised operational committees exist within Academic Administration to attend to operational matters.

The Director: Academic Administration reports to the Registrar. Each faculty has a head of faculty administration reporting to the relevant executive dean. However, a dual governance system exists and the Registrar is ultimately accountable for the quality of Academic Administration. The annual external student data audit is submitted to DHET via the Registrar's Office. Academic Administration governance is divided into the following units: Faculty Coordination including Academic Structure, HEMIS Coordinator, Registration Logistics, the Student Enrolment Centre, Timetabling and Graduations. The following governance committees report to the Senate Executive Committee (Senex): Admission Committee, Academic Administration Coordination Committee, Registration Committee, Timetable Committee and Graduation Committee. Each committee operates in accordance with the relevant charters approved by Senex.

2. RISKS AND MANAGEMENT OF RISKS

A risk-mitigation strategy for Academic Administration, focusing on the academic lifecycle of the student, was first developed in 2007 and has been continually refined since then. The risks related to Academic Administration are governed by Central Academic Administration and managed within the faculties, as well as by the academic life cycle-based institutional committees reflected in the overview. The following Academic Administration risks with a possible threat to sustainability in order of impact and importance are listed below. The impact on the institution and the effectiveness of the mitigation strategies are reviewed on an annual basis.

The Register reflecting interests declared by employees (family members registered at UJ) was compiled and applicable internal controls were instated to mitigate risks related to assessment marks on the student data system.

Large number of late applications/walk-ins

UJ has a legacy practice of late applications/walk-ins at all campuses during the days following the release of the Grade 12 results in January. To mitigate the risks related to late applications/walk-ins the University has decided not to allow any physical walk-ins.

To further mitigate the risk of walk-ins, a comprehensive communication campaign was launched to inform prospective applicants of the application deadlines and to inform them that no walk-ins would be allowed on any campus in January. For this purpose the **CLEAR** campaign (**C**hoose, **L**earn, **E**arn, **A**pply and **R**egister) was developed. Furthermore, a dedicated application enquiry system, accessible via mobile devices with internet connection, was developed for late enquiries and applications. Applicants without internet access could access information via an extended call centre.

**Figure 6: The Vice-Chancellor and Principal, Prof Ihron Rensburg,
in the extended UJ Call Centre**

Figure 7: Prof Marie Muller, Outgoing Registrar at the UJ Extended Call Centre

Immediately after the release of the NSC results, UJ calculates the final admission status of first- and second-choice applications as well as declined applicants whose Grade 12 results had improved. All category applicants were informed via SMS of their final admission status. These statuses were also available on the UJ Homepage.

All four UJ campuses were closed during the period 3 to 11 January 2013 and only card-carrying students were allowed on campus for special assessment sessions.

DFC Campus upgrade and consolidation: venue readiness for teaching

Unforeseen operational difficulties resulted in numerous delays in the completion of the project and the readiness of venues for teaching with subsequent implications for lecturing timetable. Intervention strategies were implemented in the operational environment to expedite the project. This was declared an institutional risk and the progress was monitored by the Audit and Risk Committee. Short-term alternative arrangements regarding timetabling were instituted to mitigate the risk.

A new DFC lecturing timetable was developed to provide for the new DFC teaching venue configuration and the Faculty of Health Sciences consolidation. For this purpose, newly acquired timetable optimisation software (Celcat) was utilised. An effective rate of 85% was reached. The remaining 15% of modules was scheduled manually. All HODs concerned signed off on the new lecturing timetable.

Late publication or incorrect assessment marks due to the implementation of MAMS

MAMS was developed in response to the need for real-time student performance information for the early identification of at-risk students. The current Excel program only makes provision for a download of the assessment marks at the end of each semester. MAMS will create a central repository where marks will be accessible to Safenet as they become available during the course of the semester or year. MAMS also adds value to the management of marks as the following examples illustrate:

- The HOD, programme manager or module coordinator have access to test results during the semester for early identification of problems in a specific module or on a specific campus.
- Different lecturers on the same module are able to see the rest of the results and can benchmark their results against the rest of the group.
- The overall performance of a student in all modules is available to ensure appropriate and timeous academic support interventions.

MAMS business process

MAMS was developed by ICS in collaboration with CAA for the management of assessment marks.

Testing of MAMS

The development was completed in April 2013. CAA tested functionality of the programs. From April 2013 user testing started with a small number of lecturers capturing their marks on the MAMS production system. This pre-pilot testing was done to verify the potentially high risks involved with marks. Although the pre-pilot group was small, all module types (semester modules, year modules and continuous assessment modules) and small and large groups were captured. The pre-pilot phase was completed after the July 2013 supplementary assessments. All reported system errors were documented and were fixed before the end of June 2013. The internal auditors (KPMG) were involved since March 2013.

Pilot project: July to December 2013

The planned date for full implementation of MAMS is the first semester 2014. Due to the risks involved with assessment marks, user testing (on the production system) by means of a representative group of lecturers was done during the pilot phase from August to December 2013. The pilot group captured marks on the MAMS production system and no duplication of mark-capturing was required. Implementation in the first semester 2014 will only commence if the outcomes of the pilot testing is positive and the internal auditors sign-off on the project.

Inability to find a workable timetable for APK

The combination of too many module choices and limited lecturing venues had created numerous clashes on compulsory modules and non-compliance with the UJ Teaching and Learning Strategy. Less than 60% of modules comply with the required three formal contact sessions per week, creating a reputational and sustainability risk for the University. The undergraduate lectures were scheduled until 18:45.

To mitigate the risk, an existing partially underutilised 1 000-seater assessment venue (D Lab Cellar) was re-equipped as lecture venues. The MEC furthermore approved a budget for the construction of two large lecturing venues during 2013/2014. In the short term, departments can schedule ad hoc (catch-up) extended lectures in alternative venues/time slots.

Dr L. Stoop was tasked with determining the lecturing footprint of each qualification. The number of electives was subsequently reduced for new intakes from 2014. The Academic Structure on the student system (Integrator) was adjusted accordingly. New timetable optimisation software (Celcat) was acquired and piloted with the new DFC lecturing timetable. Lessons learned from the DFC experienced will be applied during the APK re-optimisation process. Major concerns whether a solution would be found still exists.

Non-subsidised offerings: insufficient quality management

Due to insufficient staffing, compliance with the UJ Quality Framework for Non-subsidised Programmes is lacking. The insufficient quality management resulted in reputational risks for the University. The MEC approved minor restructuring within CAA to enable the appointment of an employee dedicated to the improvement of governance and quality of non-subsidised whole programmes and short learning programmes. An appointment was made from 1 November 2013. The existing 80 non-subsidised whole programmes were reviewed during 2013, with the exception of 14 programmes that would submit their reviewed programmes in 2014. These programmes would be submitted to the CHE as part of the Category B HEQSF alignment before June 2014 for external approval. From 2014 only pipeline students would be allowed to register for the old qualifications. New students would register for the new qualifications and compliance with the qualification endorsement requirements would be enforced.

3. STRATEGIC FOCUS AND TARGETS

2013 goals and targets

Enhancement of online applications (electronic selections and automated email response) before the end of May 2013.

The enhancement of the online application system was tested and implemented before the start of the new application cycle on 1 April 2013. Adapt IT will terminate the support of Integrator 1 at the end of 2014 and UJ

Figure 8: Online Registration in UJ Computer Laboratories

has decided to upgrade to Integrator 3 in March 2015. Preparations for the upgrade will start in July 2014 with the review of the UJ customised software. Further enhancement of the online application system of Integrator 1 is therefore not sensible. To encourage online applications, the MEC approved that no application fee would apply for online applications and a fee of R200 would apply for paper applications. To further streamline the process, no documentary proof for the Grade 11 results would be enforced. Electronic Grade 12 results were utilised for the final selection of applicants. The Application Rating System (ARS) would be utilised for the electronic selection of applicants from 1 April 2014. A fully automated selection process will be developed for the online system on Integrator 3.

Implementation of new timetable optimisation software

After an intensive process and involvement of a panel representative of all stakeholders, it was decided to acquire the Celcat optimisation software for lecturing, and assessment timetable optimisation as well as the Roombooker software. Celcat is a UK-based company with more than 400 international clients. The software was successfully implemented, although Celcat was frequently challenged by complex UJ timetabling issues. Celcat pre-released software enhancements to UJ to resolve UJ timetable challenges. All indications are that Celcat is a powerful tool which could increase the timetabling efficiency provided that all dependencies, e.g. Space System information, are reliable.
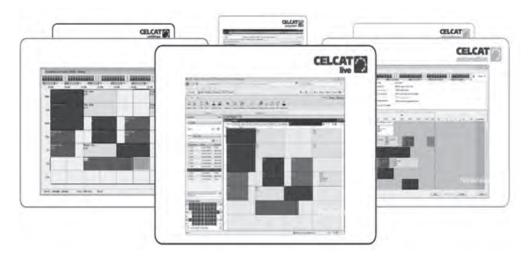
Figure 9: Celcat Software used for Timetables

New DFC timetable for 2014 (new lecturing venues and consolidation of Health Sciences)

The new Celcat optimisation software was utilised to construct a new DFC timetable. Numerous problems were experienced with incorrect Celcat set-ups, incorrect Space System data and unrealistic venue expectations from academics. The system reached a maximum optimisation level of 85%. The remaining 15% of modules was scheduled manually. The lessons learned and knowledge and experience gathered from this project will be utilised in the construction in the new APB and APK lecturing timetables. The DFC lecturing and assessment timetables were completed during November after an intensive consultation process with DFC academics.

New assessment of Management Marks System (MAMS)

MAMS was developed by ICS in collaboration with CAA for the management of assessment marks in response to the need for real-time student performance information for the early identification of at-risk students. The current Excel program only makes provision for a download of the assessment marks at the end of each semester. MAMS creates a central repository where marks are accessible to Safenet as they become available during the course of the semester/year.

In February 2013, as part of Phase 1, KPMG validated and verified that the MAMS software met the requirements regarding its design and development in order to ensure that the key system objectives were met.

The pilot project commenced on 23 July 2013 and was concluded by the end of November 2013. Approximately 200 participating academics were trained. Feedback from academics regarding system enhancements was discussed with the development team on a weekly basis. ICS provided funding against a vacant position for the services of an external service provider to assist with and expedite MAMS enhancements.

KPMG audited the system at the end of November 2013 with the purpose of advising management regarding system integrity assurances. The audit report would inform the final decision regarding the full implementation of MAMS in 2014.

2014 to 2016 goals and targets

Academic Administration's strategic objectives were aligned with the following strategic institutional objective:

Strategic objective 6: Fitness for global excellence and stature
• world class infrastructure and systems;
• good governance.

Applications

• Develop automated electronic selection of applicants for the online and back office application system.
• Enhance process and procedures for postgraduate applications to support and enable the achievement of the strategic objective to increase the number of postgraduate students.
• Phase-out paper applications in favour of online applications.

Registrations

• Implement governance and system controls to improve the non-subsidised student data quality.
• Enhance application and registration processes to enable and support an improved international profile.

Timetables

• Re-optimisation of the assessment timetables utilising the new timetable software (Celcat) for the next three-year cycle (2015, 2016 and 2017).
• Align the APB lecturing timetable to 45-minute lecturing periods.
• Rollout the new ad hoc venue booking software (Celcat) module.

Assessments

• Implement MAMS assessment system.
• Improve invigilation during final assessment opportunities by means of surveillance cameras in assessment venues.
• Implement a sustainable alternative process to replace the current unsustainable process of sick notes which are open to fraud.

Certification

• Implement enhanced certification security measures.

Integrator upgrade

• Upgrade to Integrator 3.
• Review current customised software and terminate programmes if functionality is included in Integrator 3.

Graduations

• Ensure enhanced communication with graduates by means of SMSs and graduation information on the UJ homepage.

Student data quality

• Institute capacity building and skills transfer to mitigate the risk related to HEMIS submissions and sustained data quality.

- Develop a system to improve governance and data quality in respect of new HEMIS reporting requirements for postdoctoral students.
- Conduct a complete review of the Adapt IT academic structure data quality following the new HEQSF alignment.

National positioning

Applications

The Integrator System, and by implication the UJ online application system, is in terms of functionality slightly below the systems used by other leading South African universities. Substantial enhancements were done the past two years to bring the Integrator online application system on par with other institutions.

Electronic selections

The development of the Application Rating System (ARS) for the electronic final selection of applicants with the use of electronic Grade 12 results is the first and currently the best in South Africa. The Application Rating System (ARS) and the Electronic Application Inquiry System for late application enquiries, were developed, among others, to mitigate walk-ins. The ability of these systems to deal with approximately 80 000 applications in terms of selections and communication with the applicants are exceptional. Tshwane University of Technology (TUT) procured and implemented the systems developed by UJ.

Registration

UJ is leading the online registration movement in South Africa. The enhancement that was done by UJ to the online registration system, including enhancements to improve governance in terms of admission requirements, documentation and legal compliance and lately also to lecturing time class groups, is well ahead of other universities not only nationally but internationally. A student survey satisfaction rate of 81% was obtained.

Student data quality

In excess of 400 electronic data validations are available via the Higher Education Data Analyser (HEDA) to support Academic Administration in validating the data quality of students. Data quality is a reputation and credibility risk and eventually determines the subsidy claim of the University. Feedback from the University's external auditors (responsible for the audit of the HEMIS/subsidy claim of the University) and DHET confirms that the data quality of UJ is one of the best in South Africa. Only 21 fatal errors were recorded on student HEMIS data.

Timetabling

UJ experienced major challenges due to the complexity of its academic programmes, the comprehensive nature of the programmes offered and the demand on venues. The procurement of the Celcat software and the initiative to re-optimise the APK lecturing timetable would address some of the problems experienced with timetabling. Celcat is an UK-based service provider with over 400 clients worldwide. UJ would share in the international exposure of Celcat. The fact that Adapt IT is the official supplier of Celcat in sub-Saharan Africa would simplify the interfacing between Celcat optimisation software and the UJ student database.

Assessments

Nationally the UJ assessment processes and procedures are superior. This was confirmed during the national annual assessment conference/benchmarking opportunity (EXAF). CAA regularly presents papers at this conference. The Management of Assessment Mark System (MAMS), which was a joint project between CAA and ICS, was piloted in the second semester of 2013 and, if positive, would be implemented in 2014. This system will further improve the governance and provide increased functionality to deal with the early identification of at-risk students. TUT indicated that they are interested in procuring the system as soon as it is tested and stable.

Certification

UJ has implemented additional security arrangements during the past five years and is rated among the best in

Figure 10: Student Assessments

South Africa. This is confirmed by the annual external audit by means of the "zero exceptions" report. The process is also verified regularly by the internal auditors. CAA regularly presents papers at the national annual assessment conference (EXAF). UJ will shortly implement the latest international certification security measures.

Graduation

Based on benchmarking with other universities UJ graduation ceremonies are rated as one of the best nationally. This is supported by UJ's annual student satisfaction survey at graduations with a 91% student satisfaction rate.

Student system: service provider

Currently only two system service providers, Adapt IT (Integrator) and Oracle (People Soft) are active in South Africa. UJ utilises Adapt IT and has requested substantial student system enhancements/customisation to meet the compliance and governance needs of the University. Adapt IT complies with approximately 80% of UJ's current administrative needs. This resulted in the development of more than 400 local/customised software programmes, increased monthly maintenance costs and difficulty to upgrade to newer versions. At every benchmarking opportunity at conferences or otherwise, UJ representatives would benchmark the performance of Oracle and Oracle user satisfaction. Adapt IT is a South African-based company with more than 50 clients in South Africa, Africa, Bolivia, Ireland, Scotland and New Zealand. However, the 'research' universities in South Africa utilise Oracle. Benchmarking with People Soft users indicates that Oracle is currently not able to provide the same level of functionality in terms of user friendliness and compliance requirements as provided by Adapt IT.

Adapt IT Tertiary Software, Adapt IT Abacus and their holding company Adapt IT Holdings, have been majority owned by the JSE-listed Adapt IT Holdings Limited since 1 July 2009. On 1 January 2011 the remainder of the shareholding was sold and Adapt ITS became a 100% owned subsidiary of Adapt IT. In order to simplify the group structure, improve operating efficiencies and leverage the Adapt IT brand across industry sectors, this process had been completed by amalgamating these companies together with other group subsidiaries into a single operating entity, i.e., Adapt IT (Pty) Ltd. UJ would constantly monitor the situation to ensure that the best possible student system is utilised by the University.

4. EMPLOYEE PROFILE

Employee profile by category and Peromnes

Table 1: Employee profile per employee type

REGISTRAR: ACADEMIC ADMINISTRATION: PER EMPLOYEE TYPE	
Employee Type	Total
FT contract	1
Permanent	61
Grand Total	**62**

Table 2: Employee profile per Peromnes

REGISTRAR: ACADEMIC ADMINISTRATION: PER PERMONES LEVEL	
Peromnes level	Total
P10	11
P11	29
P5	1
P6	6
P7	1
P8	9
P9	5
Grand total	**62**

Approximately 75% of the CAA employees are in the age category below the age of 50.

Equity profile: overview and progress

Table 3: Employee profile per race and gender

REGISTRAR: ACADEMIC ADMINISTRATION: PER RACE AND GENDER		
Race	Gender	Total
African	Female	21
	Male	11
African total		**32**
Coloured	Female	4
	Male	1
Coloured total		**5**
Indian	Female	4
Indian total		**4**
White	Female	13
	Male	8
White total		**21**
Grand total		**62**

Although 66% of the Division's employees are from the designated groups, the senior staff (P5, P6 and P7) are White. However, the race composition of the P8 group has changed significantly in recent years.

5. STAKEHOLDER ENGAGEMENT AND REPUTATION MANAGEMENT

Internal stakeholders

The most important internal stakeholders are the students registered with the University, as well as the applicants. Sustained excellence in service delivery to the students, applicants and graduates is therefore important. Satisfaction surveys are conducted during registration, assessments and graduation. These survey results were reflected in the cycle reports that also served at the various governance structures.

The outcomes of the surveys compared over a three-year period follows below:

Table 4: Student satisfaction survey

ACTIVITY	2011		2012		2013	
	Participa-tion Rate %	Survey Satisfaction Rate %	Participa-tion Rate %	Survey Satisfaction Rate %	Participa-tion Rate %	Survey Satisfaction Rate %
Registration	10	78	13	73	14	81
Assessment	18	87	10	87	9	87
Graduation	16	91	14	94	10	91

The other internal stakeholder group is the employees, especially those involved in the academic life cycle of the student. These employees were represented on the various Academic Administration committees. A dual model exists related to academic administration: the heads of faculty administration report first and foremost to the relevant executive dean, but also to the Registrar via the Director of Academic Administration. This dual model works well, not only in the interest of good governance, but also in the interests of integrated stakeholder communication, teamwork and collective leadership.

This portfolio requires collective leadership and teamwork to succeed.

External stakeholders

The Registrar liaises with DHET regarding the submission of HEMIS audit reports.

CAA communicates with Higher Education South Africa (HESA) on matters related to the Matriculation Board, including the governance related to the National Senior Certificate results and electronic results. PricewaterhouseCoopers is involved in all the external audits conducted for external submissions to DHET as well as other external audits. KPMG conducts the various internal audits. Dippenaar and Reinecke is the official service provider for graduation attire and Gordon Harris the official photographer at graduation ceremonies.

The Qualification Verification System (QVS) is the service provider for the verification of qualifications and servicing of alumni when academic transcripts were requested.

Adapt IT, the provider of the student system software, is a strategic partner that supports academic administration, from applications to graduations, and ensures overall student data integrity.

Metrofile is utilised for the storage of assessment answer scripts and the scanning and indexing of all student documentation.

Celcat Software (UK-based company) is utilised for the construction of lecturing and assessment timetables. Adapt IT is the sub-Saharan Africa product supporter for Celcat.

6. RESOURCE MANAGEMENT AND SUSTAINABILITY

Financial sustainability

Table 5: Overview of CAA budget for 2013

DIVISION	TOTAL OPERATING	ACTUAL EXPENDITURE	AVAILABLE	%
Director CAA	346 373.00	399 695.00	-53 322.00	115.39
Faculty coordination	637 161.00	495 246.00	141 915.00	77.73
Registrations	914 933.00	991 344.00	-76 411.00	108.35
Graduations	272 727.00	349 699.00	-76 972.00	128.22
HEMIS	51 191.00	25 411.00	25 780.00	49.64
Examinations	1 172 009.00	972 894.00	199 115.00	83.01
Training Officer	66 816.00	48 984.00	17 832.00	73.31
Biographics	226 818.00	70 000.00	156 818.00	30.86
SEC	1 170 665.00	668 719.00	501 946.00	57.12
Contact Centre	1 271 544.00	605 217.00	666 327.00	47.60
Student Administration	31 818.00	22 769.00	9 049.00	71.56
Access Cards	1 334 371.00	1 223 684.00	110 687.00	91.70
Class and Timetables	356 428.00	955 879	** -599 451.00	268.18
	7 852 854.00	6 829 541.00	1 023 313.00	86.97

*** Procurement of Celcat timetable optimisation software. The expense was budgeted under capital.*

The following donations were received:

• Official graduation photographer: Gordon Harris: R42 428.00

• Official supplier of academic attire: Dippenaar & Reynecke: R35 000.00

• Sale of Late Application (Mobi) Software to TUT: R43 859.65

Donations were utilised for purchasing graduation kiosks and stools.

Environmental sustainability

An online application system, including the electronic attachment of admission documentation, was available to applicants in addition to the paper application form. The student system was electronically updated with the Grade 12 results, including the IEB results. Final admission statuses were electronically calculated based on the published admission requirements and statuses were communicated to applicants by means of a SMS within two days following the release of the Grade 12 results. UJ furthermore has an online registration system which is fully integrated, including the real-time validation and governance checks required for registration. The online credit card payment system is linked to the registration system and can be used for fee payments throughout the year. With the online registration system, registration, agreement and coding forms no longer need to be scanned, indexed and stored. All timetables and assessment results can be accessed via the Student Portal. The need for paper documentation was subsequently minimised.

7. CONCLUSION AND WAY FORWARD

Academic Administration reached its targets in terms of the enhancement of the Application Rating System (ARS) to include the electronic selection of internal postgraduate applications. This project was piloted in collaboration with the Faculty of Economic and Financial Sciences but was available to all faculties. The risk of walk-in late applications was effectively mitigated by means of an electronic late application enquiry system, also available via mobile devices with internet access. An extended Call Centre was also available to assist applicants with application enquiries. The timetable optimisation software (Celcat) was successfully implemented and piloted for the rebuilding of the DFC lecturing timetable following the consolidation of Health Sciences on DFC. Further enhancement of the interface between Celcat and Adapt IT is, however, needed and will be addressed in 2014. The Management of Marks System (MAMS) was piloted in the second semester of 2013. Numerous enhancements were requested by participating academics which will be incorporated in a second and third phase/release of MAMS. Sustained excellence in data quality was obtained in 2013 and the registration and assessment processes were successfully completed without any major incidences.

A total of 11 176 qualifications were awarded at 50 graduation ceremonies held in February, May and September 2013. A student satisfaction rating of 91% was reported.

No certification risks were identified or reported during 2013. An annual external audit on certification was performed in November 2013 and no exceptions were reported.

Academic Administration successfully performed and completed all life cycle processes.

SECTION B:
CENTRAL ADMINISTRATION

8. OPERATING CONTEXT, GOVERNANCE AND RISK MANAGEMENT

Central Administration comprises the following units:
• Director's Office
• Graphic Studio
• Language Unit
• Postal Services Unit
• Study Material Unit
• University Secretariat.

Central Administration aims to provide an excellent support service by creating a welcoming and caring environment with a strong service orientation for staff, students and visitors. In this light the different units within central administration strive for alignment with the following UJ Strategic Objectives:
• fitness for global excellence and stature;
• national and global reputation management;
• excellent student experience and support.

The different sub-sections within the directorate have performed admirably and have provided excellent service with regard to committee administration, the collection and distribution of post, the supply of learning material to learners, support to employees in the design and preparation of graphic material, ensuring the efficient use of the Madibeng conference venues and the provision of language services for staff and students by the Language Unit.

The University Secretariat aims to render professional support to the following statutory committees of the University:
• Council and Council committees;
• Senate and identified Senate Committees;
• MEC and identified MEC committees;
• Joint committees of the Council and Senate, and the Council and the MEC.

In addition to the professional support rendered to the statutory committees, the Secretariat also offers support to employees responsible for committees by assisting with agenda compilation and minute-writing sessions upon request.

The University Secretariat is functioning exceptionally well and is a leader in the country in committee administration. Its rating by the different statutory committees which they service is 9 on a 10-point scale. The University Secretariat serviced 133 statutory committees in 2013. Committee-specific induction packs for new members and permanent invitees of Council and Council committees, Senate and Senate committees and MEC and MEC committees were provided which gave an overview of the following:
• overview of the committee;
• functions of the committee;

- composition of the committee;
- charter for the committee;
- Guidelines for Effective Meetings;
- officers of the committee (chairperson and secretariat);
- minutes of the last four meetings of the committee;
- meetings schedule for the year;
- relevant policies (where applicable).

Positive feedback has been received from all the parties concerned. The University Secretariat also provides agenda packs to the UJ Archives in electronic format (CD), as opposed to the hard copies which were bound in book format.

The Graphic Studio is the in-house design studio of the University. The studio's key function is to conceptualise ideas through the integration of text, typography and illustrations in the production of printed and marketing material. The studio is supplied with "raw" information by the client, which is utilised to create, design and transform into a visually pleasing, printable end product that satisfies the client as well as communicates the intended message.

The Graphic Studio is doing good work as is evidenced by the fact that in 2013 they designed 6 747 items, including brochures, magazines, cover pages, advertisements, conference posters, flyers etc. This represents a saving of R2 963 024 if the work had to be outsourced.

The Postal Services Unit strives to ensure efficient, accurate distribution and dispatch of mail for the entire University on all campuses for both students and staff members.

The Postal Services Unit has performed well. A total of R1 100 821 was spent on mail in 2013 while R58 991 was handled in the form of incoming registration fees etc. Bulk mail to the value of R378 592 was also handled and courier services to the value of R4 608 254 was processed.

The Study Material Unit accepts responsibility for stock management, and the coordination of the reproduction, purchasing and issuing processes of learning material. This Unit has material printed or purchased and delivered to the study material store, and then receives and issues the material to clients (students and lecturers).

The Study Material Unit is also playing an important role in support of the academic project of the University in the sense that learning material is reproduced by means of a tender process which generates meaningful financial savings for the University. Interactive CDs, textbooks and learning guides were distributed to students on registration which means that students could commence their studies from day one.

The Language Unit envisions the support it offers to the entire University regarding the implementation of the UJ Language Policy as a contribution towards the general cultural transformation of the entire University. Key to this intent is to use the four UJ official languages and their associative cultures as the cornerstone of creating a uniquely UJ community, distinct, but co-existing with the peer institutions, the entire South African community and the rest of the world. The inclusion of Sesotho sa Leboa and IsiZulu within the UJ Language Policy reflects the University's genuine commitment to the indigenous African languages and their roles: first, to engender this distinct multilingual UJ community; second, to grant a nuanced South African academic, administrative, communicative and marketing practice within the entire University. The Language Unit is committed to provide a well-grounded and high-quality Language Policy implementation support to the entire University community.

The Language Unit continues to play a crucial role in supporting the University in its implementation of the quadri-lingual Language Policy and the general transformation of the University. This it achieved by internal and external collaboration, language development projects, language awareness and the languages services it offers both staff and students.

The Director's Office accepts responsibility for the efficient use of the conference venues in Madibeng and fulfils a governance role at graduation ceremonies by providing procession master services. The Director's

Office ensures the efficient and effective use of the different Madibeng conference venues which has resulted in the optimum utilisation of these venues. The improved sign-posting has made it much easier for visitors to Madibeng to find their way to the relevant venues.

In terms of governance and risk management, the Study Material Unit underwent an external audit after which measures were put in place to mitigate risks. New forms and processes were developed and have been implemented effectively to ensure cost-effective printing.

The University has made a conscious decision regarding the rollout of "tablets"/notebooks in first-year undergraduate teaching and learning, as part of a full rollout to all undergraduate students within four years. This will impact on the role of the Study Material Unit in that printing and distributing of hard copies will decrease as material is made available electronically. The effect of this on the employees of the Unit will be monitored very closely and staff will be deployed within other sections of the portfolio where possible.

Within the University Secretariat quality control is an ongoing process, with the draft minutes being reviewed for style and content, where required, prior to being submitted to the relevant Chairperson. The quality of submissions are also reviewed and submissions are referred to the author should it be unclear or not be in the prescribed format. By checking the quality and the accuracy of the content of submissions, the committee administrators make valuable contributions towards improving the overall governance of the committees.

The Language Unit meets on a monthly basis and also on a one-to-one basis with the line manager to set parameters, monitor quality issues, turn-around time, planning etc.

The Director meets with the manager of each of the units on a quarterly basis to discuss operational matters and the smooth running of each of the units.

9. STRATEGIC FOCUS AND TARGETS

Central Administration contributes to the following Strategic Objectives:

Strategic objective 1: excellence in research and innovation
KPA 1.3 Excellent student experience and support;
KPI – Positive student survey results;

Strategic objective 5: national and global reputation management
KPA 3 – Dynamic brand;
KPA3.1 Established global excellence;

Strategic objective 6: fitness for global excellence and stature
KPA 3.1: A welcoming and caring environment with a strong service orientation;
KPI – A welcoming and caring environment for staff, students and visitors;
   – A service orientation for staff, students and visitors;
KPA 3.2: Efficient conduct of University business;
KPI – Fitness for purpose and efficient structures/committees.

The University Secretariat contributes to this by compiling informative agendas which assist decision making and then provide accurate minutes of statutory meetings. The performance of the Secretariat is reflected in committee/structure annual reviews by a score of 9.0 out of a possible 10. The Secretariat cumulatively serviced 133 meetings.

The Language Unit performed 446 translations (600 851 words) and 358 language editing tasks (665 401 words), as well as 8 interpreting sessions (24 hours) and 92 instances of telephonic language advice. A total of 217 clients were serviced, comprising of 21 faculties/divisions, 62 departments and 133 individual staff members. Collectively, the clients made 820 language services requests and were dutifully well serviced.

The unit also engaged in language development projects internally as well as collaborations with language interest groups externally. The Language Unit Style Guides, *Pukutlhahli*, *Taalgids* and *Isiqondisi soLimi* were

reviewed internally. The Unit also collaborated with the South African Weather Services which generated 960 isiZulu concepts/terms. Other collaborations were with the Centre for Legal Terminologies, which generated 155 Sesotho concepts and terms, and with Stats SA.

The Unit played a central role in language promotion/awareness campaigns by launching the 2013 Language Awareness Campaign with the International Mother Language Celebration in February. The focus was threefold: UJ campuses; LU school projects (Bopanang Primary and Orlando West Primary); and the launch of the Prof. Neville Alexander Language Scholarship. The Unit provided 11 language stories which were published in the *Seipone Newspaper* as part of LU-Seipone Sesotho sa Leboa Language promotion drive. Coordinating this project, the Unit distributed a total of 4 200 copies throughout UJ campuses. Some copies were given to LU partner schools, Bopanang and Orlando West primary schools. The project is steadily making serious inroads into the University since new requests for the newspaper are continually being received.

Various forms of learner material are developed within the faculties (learner guides, readers, interactive CDs and textbooks) to add value to specific courses. The Study Material Unit then reproduces the material for distribution to students. The correct products of high quality are handed out to the relevant students during the registration period, and it is ensured that sufficient stock is available for all registered students. Lecturers are regularly informed and reminded of stock levels, due dates, forms to be filled in, etc.

Suppliers get well informed of requirements, deliveries are monitored, and appreciation is shown. Thus, urgent orders are done within the requested time.

To give students, as the end-users, the best service, an issue is checked together with the student. A sound system was installed to help with the efficient flow of matters at the various counters, ensuring an effective client service. A total of 145 785 study guides were printed (with a cost of R1 357 004), 1 420 interactive CDs were reproduced and 3 281 textbooks were bought and distributed in a total of 34 667 issues made to students.

The Postal Services Unit processed outgoing mail with a total value of R1 100 821 and courier services to the value of R4 608 254. Incoming money to the value of R58 991 was received and bulk mail to the value of R378 592 was processed. A total of 883 circulars were also placed on the intranet.

The Graphic Studio processed a total of 6 747 items (which may be posters, brochures, placards, cover pages, advertisements, stickers, transparencies, certificates, promotional material etc.). The material cost of this was R230 881 but it represents a real cost of R3 193 905, which represents a saving of R2 963 024. The total time was 3 275 hours.

10. EMPLOYEE PROFILE

All of the 42 employees within Central Administration are permanent, full-time employees. Central Administration has a director and a director's secretary, two line managers at P6 and three at P8. There are 8 employees at P9, 4 at P8, 3 at P11, 13 at P12, 7 at P13 and 1 at P14.

The equity profile of Central Administration is currently acceptable. Twenty-five (60%) are female and 17 (40%) male. Twenty-nine (69%) of the employees are black and 17 (31%) are white, of the 29 blacks 4 are coloured and 2 are Indian.

In terms of age, only two are 64 and the rest are all younger than 60. One of these two employees is in the Study Material Unit and will thus not be replaced upon retirement. The other is a low-level assistant (P14) and can be easily replaced.

The Study Material Unit is likely to become redundant as all the students will eventually possess a tablet or laptop so learning material will be electronically available and there will be increasingly less material printed. Seen in this light, as posts become vacant, a replacement will not be appointed.

Four of the employees are busy furthering their studies while 16 of the employees have attended the short courses available through the Training and Development Section of HR.

Dr Monareng (Head of the Language Unit) presented a paper at Darwin University in Australia and also completed an International Executive Development Programme through Wits University and the London Business School. Ms Sibiya of the Language Unit Collaborated with the South African Weather Services which generated 960 isiZulu concepts/terms, while Ms Tisa Viviers was elected as Deputy Chairperson of Prolingua. Mr Lishilo and Ms Sibiya collaborated with Stats SA in producing a national publication "Multilingual Statistical Terminology Guide".

11. COMMUNITY SERVICE, STAKEHOLDER ENGAGEMENT AND REPUTATION MANAGEMENT

The University Secretariat's community engagement project for 2013 was Abraham Kriel Childcare. The University Secretariat visited the Abraham Kriel Childcare Home on 10 May 2013 to share in a special opportunity to gain insight into their services at the main branch based at Langlaagte in the south of Johannesburg. The highlights of the visit are summarised as follows:

The Secretariat visited the houses on the campus, where children with severe or complex trauma/mental disabilities or illnesses stay. The house parent system is used in the houses where mentally challenged children stay, while childcare workers on 24-hour duty are employed at the houses for children with severe trauma and behavioural problems.

A visit to Marais Kloppers followed. This is a campus that focuses on infants and toddlers who are abandoned, abused, have cognitive learning disabilities and/or HIV-positive children below the age of 8. The living conditions of these children were really commendable in that they have clean facilities that are extremely well maintained.

The Secretariat also visited the Johan Malan Campus, which is a nursery school for the toddlers based at Marais Kloppers and other children from the surrounding areas. This stop was by far the most heartwarming. The kids welcomed us with a mini concert filled with a song and some comic relief.

The employees within the Language Unit are involved in a number of collaborations, among others, Prolingua, the South African Weather Services, the Centre for Legal Terminologies and Stats SA. They are also involved with school projects with Bopanang and the Orlando West primary schools in Soweto and Dr Monareng was a speaker at these events.

In terms of stakeholder engagement, there is regular engagement with committee members on all aspects of statutory committees and engagement with non-committee members who prepare submissions for statutory meetings. There is also engagement with employees who are responsible for faculty/departmental meetings to advise on agendas and minutes, as well as engagement with employees who provide support to statutory committee functioning, e.g. audio visual unit, maintenance etc.

There is regular external engagement with peers at other higher education institutions to exchange ideas on relevant matters.

12. RESOURCE MANAGEMENT AND SUSTAINABILITY

In terms of resource management, all the units within Central Administration exercise a tight control over their respective budgets and all have remained within budget. On average, the Central Administration budget spend was 97%, which speaks of line managers who monitor their budgets very closely.

All statutory committee meetings are in electronic format and circulated, where appropriate, via Dropbox. Some agendas are circulated on CD (especially where external Council members are involved and for Senate, as it has too many members for material to be distributed via Dropbox). The use of paperless meetings has been cascaded down within the institution and staff members have been encouraged to implement paperless meetings at all levels within UJ. An initiative was to request courier services to supply UJ with re-usable containers so as not to make use of plastic and cardboard boxes. Separate containers for plastics and paper are present in all units and these are recycled. Other environmental sustainability efforts include full support of UJ's waste management and recycling initiatives by recycling paper, limiting printing and printing on both sides of the page, as well as switching off lights at night.

13. LEADERSHIP

A number of peers from other South African universities and selected international universities have visited different units within Central Administration to identify best practice and to hold discussions on governance and other related issues. Dr Monareng is invited regularly to partake in discussions on mother-tongue teaching and serves on a number of committees in this regard.

The entire portfolio is committed to transformation matters and a number of employees serve as transformation facilitators. Transformation 'champions' have also been identified in each of the units. It stands to reason that employees within Central Administration have been very supportive of transformation and diversity matters initiated by UJ. In fact, employees of the Language Unit have manned stalls at all the UJ transformation initiatives and the chief co-ordinator for UJ Diversity Week is from Central Administration.

14. CONCLUSION

The different sub-sections within the directorate have performed admirably and have provided excellent service with regard to committee administration, the collection and distribution of post, the supply of learning material to learners and support to employees in the design and preparation of graphic material, while the Language Unit continues to play a central role regarding the implementation of the UJ Language Policy as a contribution towards the general cultural transformation of the entire University.

SECTION C:
CORPORATE GOVERNANCE

15. OPERATING CONTEXT

Core business

The Corporate Governance Office functions within the broader University context and aligns its service delivery with the legislative framework of the Republic of South Africa, the Higher Education Act 101 of 1997 (as amended), the Institutional Statute of the University of Johannesburg and its Vision, Mission, Values and Thrusts. The Office, although diverse in nature, strives towards excellence in delivering a quality service in all of its divisions. Our clients include, first and foremost, the internal clients, as well as our external clients. Corporate Governance also strives to improve our footprint at national and international level. The function of the Corporate Governance Office includes the legislative and compliance framework within Records Management, Corporate Governance (compliance), Legal Services and Contract Management. The Corporate Governance Office and subdivisions have a footprint on all four campuses and are technology driven, which includes internal as well as external systems.

Governance documents and risk structures

The Corporate Governance Office reports to the Office of the Registrar. The Director: Corporate Governance is a permanent invitee to the Senate, and a member of R-Exco. The Corporate Governance Committee meets quarterly. The Records Management Committee meets weekly to monitor progress as set out in the action list. The Access to Information Committee meets weekly and the Contract Management Committee meets monthly. The Legal Services Committee is a newly established committee and the Charter and the Standard Operating Procedure for this Committee still need to be approved. Policies, guidelines and standard operating procedures are guiding the functions within Corporate Governance and include the Records Management Policy, the Contract Management Policy, the Nomination and Election Policy, the Guidelines for Effective Meetings, the Manual on Access to Information and the Policy on Access to Information, to name but a few. Furthermore, the Corporate Governance Risk Register is closely linked with the Registrar's Risk Register and focuses strongly on the non-compliance with legislation. Corporate Governance also compiled a risk and compliance register together with KPMG.

16. STRATEGIC THRUSTS

The strategic goals of the Office are aligned with the following Strategic Thrusts of the University of Johannesburg:
* excellence in service delivery;
* resources that enable UJ's fitness for purpose;
* leadership footprint and equivalence on all the campuses.

The Office's scorecard is also closely linked with the Registrar's scorecard and includes:
* the Promotion of Access to Information Act (PAIA) turnaround time of responses: five working days;
* the UJ Annual Report submitted to DHET: 90% King III compliance (integrated reporting and reporting on sustainability);
* the Contract Management Internal Audit Report: at least 80% compliance.

It must be noted that Corporate Governance exceeded all the set targets.

17. RESOURCE MANAGEMENT

Human Resource Management

The Corporate Governance Office consists of 11 employees, i.e. 8 permanent positions, 1 three-year fixed-term position and 2 temporary positions.

18. OVERVIEW OF SUBDIVISIONS

Nominations and elections

Thirty-nine nominations and elections were executed during this reporting year.

The E-Vote system was tested and will be implemented during 2014. This will improve the membership lists of statutory committees and can handle majority and preferential voting. Subsequently, the Policy on Elections and Nominations will be amended to handle electronic voting throughout the University. It will also lead to better environment impact and improve the compliance of membership lists of statutory committees.

Policy development

The policy grids were updated and sent via a circular and emailed to all UJ employees, aimed at informing stakeholders of current and new policies.

The user guide "Corporate Governance introduces you to the policies of UJ" was distributed.

Redrafting of the A-regulations

The A-regulations were substantially revised during 2013. The revised A-regulations were approved at the Senate meeting on 12 September 2013.

Updating of the Senate List

The updating of the Senate List is an ongoing function and must be aligned with the membership status of Senate. The risk remains that the information received from HR is not the most recent information. The Senate voters roll was 98% correct during 2013.

Access to information

UJ has outsourced student enrolment and qualification verifications to Qualification Verification Service (QVS) since 1 January 2010. QVS specialises in the online verification of academic qualifications and student enrolments and offers a fast, secure and cost-effective service. Verification reports can be obtained instantly via the internet.

Workshops were held to promote awareness of the system. QVS requests are handled electronically and only across border requests are posted to alumni as hard copies.

The contract with QVS was amended and the price list fixed for implementation in 2014.

Table 6: Scorecard: access to information

Access to Information types	Execution	Compliance percentage
UJ academic records	2 working days	98%
TWR and RAU academic records	3 working days	95%
UJ transcript supplements	15 working days	92%
TWR and RAU academic transcript supplements	20 working days	90%
Extra-curricular records	40 working days	60%
Internal requests for information	2 working days	99%
PAIA requests	4 working days	95%

The requests for access to extra-curricular programmes remain a risk as the faculties find it difficult to access these records. In certain instances, the old Technikon Witwatersrand (TWR) and Rand Afrikaans University (RAU) records indicate that records are with other institutions and that TWR and RAU were only the certification authority.

Quality control remains important to fulfil the needs and expectations of the requesters. All transcripts must be issued in English and the NQF levels and service and work-integrated hours must be added. These matters are included in the template that is provided to faculties.

Commissioners of Oaths

Services were rendered during the registration period 14 January 2013 to 15 February 2013. Risk was mitigated by the appointment of two outsourced Commissioners of Oaths. Training was provided to all the Commissioners of Oaths before the application and registration periods.

Contract management

Contract management is a top priority to conform to legal requirements and forms part of the good corporate governance strategy of the University of Johannesburg. According to the Contract Management Policy, all signed contracts must be centrally stored and electronically captured and the hard copies must be stored safely to provide evidence for legal proceedings and support audits with compliance checks.

A Draft Contract Workflow System was developed to trace the progression of every new draft contract, from receiving the draft, editing, verifying and approving the draft up to the signing of the approved final document. The contract owners were monitored to ensure that signed documents were forwarded to the Contract Management Office. The contract owners were constantly reminded every two weeks to submit signed contracts and that payment could not be effected if the Contract Management Office did not receive a signed contract. The notes and emails were documented in the contract workflow system as a paper trail for auditing purposes and this was also followed up with telephone calls. This problem poses a risk for the University of Johannesburg because contract owners do not timeously submit signed contracts and therefore do not comply with the UJ Contract Management Policy.

A total of 58 draft contracts, older than 21 days, are still in the "not signed" workflow system and therefore outstanding.

During 2013, a total of 414 new and historical contracts were added to the contract drawer in the EDRMS system:
First quarter: 99 contracts
Second quarter: 160 contracts
Third quarter: 54 contracts
Fourth quarter: 101 contracts

An electronic copy of the contract and a confirmation letter with a reference number were sent to all the contract owners who submitted new contracts. Hard copies of all the contracts were packed in barcoded files and all files were packed in barcoded boxes and these were forwarded to the off-site storage facility for secure and safe storage. The barcode for each contract and storage box was captured on the EDRMS to make retrieval of a specific file quick and easy.

On written request, an electronic copy of a contract was forwarded to the contract owner. If an original document was requested, the document was delivered within 48 hours by the off-site storage facility.

A total of 96 review letters were sent to contract owners six months in advance before the expiry date of a contract. The contract owner must either renegotiate a new contract or confirm that the contract must be moved to the expiry list.

All expired contracts were moved to the expired facility on the EDRMS. The hard copies will be deleted and destroyed after 10 years and the electronic copy will be deleted after 12 years, in compliance with the Policy on Records Management and Retention Schedule.

The EDRMS Tender Workflow System was developed and refined in 2013 by the Corporate Governance System Administrator and since June 2013 all tenders have been channelled through the EDRMS Workflow System. During a workshop on 21 August 2013 with the tender stakeholders, the procedures of service level agreements were discussed. The Tender Office confirmed that not all tenders require a service level agreement. In future, the tender workflow will be split in two parts, those with a service level agreement and those that are exempted. The tender document that requires a service level agreement will not be approved by the Corporate Governance Office if a service level agreement is not attached to the tender document.

The Service Level Agreement will be captured separately in the EDRMS Contract Drawer and all tenders that were awarded and signed will be captured in the Tender Drawer.

Two new patents and various correspondence letters were added to the Patent Drawer.

During the research audit, the KPMG auditors elucidated that a number of research contracts were not available in the three different UJ research/funding offices. After a meeting with Corporate Governance and all stakeholders, it was decided that the research project would be rolled out in 2014 and that all old research contracts would be scanned and captured in the EDRMS. It was clear that the current EDRMS Contract Drawer was not suitable for the data capturing of the research documents. A new Research Drawer will be developed by the System Administrator and more discussions and developments will follow.

The missing research contracts posed a very high risk for the University of Johannesburg and two discussions were held with the research stakeholders in October and November 2013. A total of 74 funding documents were forwarded in October 2013 and a further 43 postgraduate documents, 56 NGS contracts, 6 UJ Strategic Honours degree contracts and 24 CSIR contracts were forwarded to the Contract Management Office in December 2013. They will only be captured after a Research Drawer has been created in EDRMS to suit all the other research stakeholders.

As part of the strategic goals and targets for 2013, the Contact Management Office must reach out and be more visible to stakeholders at the University of Johannesburg.

After conclusion of capturing the contracts on the EDRMS a client service survey (How was our service? Contract Management) was sent out to the contract owners. All responses were excellent and 98% responded (all requests far exceeded the scorecard scores).

After receiving signed originals of contracts from the contract owners, a confirmation letter and an electronic copy were forwarded to the contract owner within 24 hours.

All written requests for an electronic copy of a contract were handled the same day.

The high risk of not receiving signed copies of contracts from the contract owners (58 for 2013), even though they were reminded constantly, impact negatively on the workflow of this Office. The only way to solve this will be to enforce non-payment or delay of payment of invoices if proof cannot be submitted from the Contract Management Office that a signed contract was captured in the EDRMS Contract Drawer.

Legal Services

The Legal Services Unit falls within the ambit of the Director: Corporate Governance, which resides under the portfolio of the Registrar. The Legal Services Unit currently comprises two legal advisors, one appointed to oversee the input and assistance with respect to contracts and the other to assist with all other matters, which includes drafting of policies, furnishing advice and assistance, providing support and managing litigation.

With reference to governance structures, possible risks and quality management, the Legal Services Unit ensures the following:
- Daily administration with regard to new contracts received and input given, as well as maintaining the Risk Register for contracts, is undertaken.
- Daily administration of general legal matters is handed over to external legal representatives, which includes managing of case files, liaising with attorneys and clients and keeping records of litigation matters.

- Regarding quality control, changes to contracts and policies are suggested to improve the quality and reach of the documents.
- The legal advisors meet twice a month for legal meetings.
- The Legal Advisor (Contracts) meets twice a month with the Contract Manager to ensure that the EDRMS workflow of contracts is properly managed.
- The Legal Advisor (Generalist) forms part of the UJ Event Safety and Security Planning Committee.
- Both legal advisors attended meetings regarding the amendment of the 2015 Student Application and Student Registration documents and made several recommendations in order to improve the documents, subsequent processing and legislative requirements thereof.

The Standard Operating Procedure: Legal Services and Charter for Legal Services has been drafted by the Legal Advisor (Generalist) who is awaiting approval thereof. Discussions regarding the possibility of and the need for a Legal Committee have commenced.

The Legal Advisor (Generalist) attended several faculty meetings, Academic Administration Coordination Committee meetings and Event Safety and Security Meetings.

The Legal Advisor (Generalist):
- took over the management of all matters in which UJ was party to a dispute;
- initialised periodic legal newsletters;
- drafted several legal opinions;
- drafted various agreements, policies, standard operating procedures, summaries of various acts;
- compiled a list of relevant acts impacting on UJ;
- initiated an annual wills week;
- compiled a list of preferred panel attorneys;
- attended national and international benchmarking;
- proposed an online discussion forum for institutional legal advisors.

The Legal Services Unit aims to establish an institution-wide footprint by ensuring a presence on all four campuses.

The following initiatives have been implemented:
- POPI and ECTA awareness campaigns included brochures via circulars, emails and discussions at different faculties and departments.
- Various national initiatives have been implemented such as training partners (i.e. QVS) with respect to POPI, Records Management and ECTA.
- National benchmarking and international benchmarking on Ombud, legal services, and functions by the Office of the Registrar, was undertaken.
- Assistance, e.g. assistance with research and report writing in respect of the establishment of a General Complaints Office and/or Ombud for UJ, newsletters and Students Complaints process on ULink was rendered.

An ImageNow workflow system was created for the Legal Services Unit where contracts could be handled; therefore, contracts are now captured electronically.

All input is supplied electronically no matter how many versions of a contract are captured; therefore, no unnecessary paper is wasted. The Legal Services Unit strives to run a paperless office.

The Legal Advisors and Director: Corporate Governance are members of CLASA and the Legal Practitioners' Forum.

More focus will be given to conclude the POPI training on campuses after the signing of the POPI Act on 27 November 2013. The Director: Corporate Governance and the Legal Advisor were tasked to give input into the legal compliance audit of KPMG.

Concepts for consideration in 2014 will include:
- Inter-University Tribunal
- Know your Rights campaigns

- Wills Week
- Movember
- Fraud Risk Register
- Contract Risk Register
- Sick Notes Risk Register
- Graffiti walls

Records Management

The Records Management Department within the University of Johannesburg is a centralised office that renders service and support to all four campuses. Some of the responsibilities of the Records Management Department are (i) creating policies and practices; (ii) conducting consultations with stakeholders; (iii) identifying, classifying, collecting, digitising and storing records; (iv) developing a records storage plan, which includes physical records and electronic documents; (v) coordinating access to records internally and outside of the University of Johannesburg; and (vi) handling the retention schedule and the disposal of records.

ISO and SANS 15489:2001 standards apply to all records management principles within the University as can be seen in the Policy on Records Management where these principles were adapted to ensure implementation within an HEI. The King III Report also refers to the importance of records management and the link it has with the Promotion of Access to Information Act (PAIA) and the newly promulgated Protection of Personal Information Act 4 of 2013.

The overall strategy of the Records Management Department is to aid in the identification, capture, classification and ongoing management of records throughout their life cycle. Records management forms part of good governance at the University of Johannesburg as it provides support within business processes, secure evidence for processes and audits, and assists in the monitoring of performance.

The Records Management Department of the University of Johannesburg manages the life cycle of records in both physical and electronic format.

The goal with the EDRMS is to provide a document management instrument which enables employees to track and view records vital to business. The focus is on sustainability, quality, accountability and compliance with legislation and UJ policies and procedures. This report gives an overview of the events that occurred in 2013 which include strategic and operational matters.

Records Management is governed by the Charter for Records Management Committee. The Division reports to the Corporate Governance Department and the Registrar. The Policy on Records Management was reviewed, adapted and approved in 2013, which is relevant to the entire UJ community, with addendums to the policy being working documents that change as and when required. The latest version of the policy is available on the intranet.

All the requests for the storage, scanning or disposal of records are done through the Records Management Department.

All records are handled in such a manner that their admissibility and/or evidential weight are not compromised.

Access to the EDRMS is not granted until a user has completed the assessment in STT. By doing so, we ensure that users are competent when using the software to ensure quality assurance within the EDRMS system. Technical support is provided to all active EDRMS users. Currently most support is given telephonically or via email. Clients are visited if the problem cannot be resolved in the abovementioned ways. At the end of 2013, there were 907 active EDRMS users.

Business activity reports were distributed on a weekly basis to the following role players:
- Student Applications
- Records Inventory
- Quality Assurance on student documentation

- Procurement
- Tenders
- Human Resources

Import reports are secured for each box imported. As far as quality is concerned, the following steps have been implemented:

- Boxes packed and stored at the off-site storage facility are checked prior to authorising collection. Prior to requesting authorisation for disposal, all the data on the index reports is checked. Record owners have the opportunity to keep records for a longer period.
- A quality assurance process has been included to ensure the correctness of the data capturing and the quality of the supporting records in the Records Inventory Register; quality assurance is built in the different facets of the management and operations of the ERDMS.
- Scanning and indexing quality is monitored for every batch received back from the off-site storing facility; quality issues are addressed and escalated as necessary; auditing of manually indexed documents is done periodically.
- Import quality assurance includes ensuring all files scanned are imported into the ERDMS.
- Quality assurance within the EDRMS includes solutions that adhere to the standards set within electronic records management at UJ; e.g.
  – Single-page tiffs that ensure server resources are used optimally as well as giving the clients the option to annotate documents;
  – Adhering to a stringent document type strategy to avoid documents becoming just a "pile" indexed according to 1 or 2 criteria;
  – Developing workflow processes to resemble the business processes as closely as possible;
  – Using automation, where necessary, to minimise interaction from employees/users as well as to avoid unnecessary mistakes. This includes lookups from Oracle and ITS.

External structures: Original vital records within various portfolios were transferred to an off-site storage facility for storage and the protection thereof. A process of checks and balances was developed to retrieve records from the off-site storage facility whereby only authorised employees will have authority to request retrievals. The records that have reached their retention date will be disposed of by the off-site storage facility after authorisation has been given by the document owner.

During the course of 2013 certain gaps and/or issues were identified prior, during and even after the rollout of records management within specified divisions. In a big and fast-changing environment like UJ, making employees aware of Records Management is the biggest challenge.

Once the general presentation on records management is given, functions request immediate implementation. The resources available within Records Management do not allow immediate implementation, but it is counteracted by the phased-in approach. The lack of completing assessments within the timeframes affects the turnaround time within certain workflows as access to the EDRMS is not granted to users without the passing of these assessments.

Having all the meetings to keep up to date with the project updates and possible interventions required creates a lot of work in following up with either internal stakeholders or external vendors. Due to time constraints, following up might sometimes be neglected.

Records Management is phased in throughout the University and therefore the compliance to the retention schedule cannot be fully monitored to ensure compliance. Record owners who are already part of the records management rollout are more comfortable with the disposing of physical records as there are electronic versions of the said records. However, compliance to electronic retention is a challenge. The most pertinent reason for this is that an audit might require the documents to be available.

Furthermore, clients who are aware of Records Management struggle to become compliant and hence a large amount of change management is required when implementing Records Management within each project as the manner in which record-keeping was done is being challenged and changed.

The nature of Records Management, which requires work to be particularly stringent and meticulous, places pressure on the Records Management team, as the service providers and clients need to execute compliance sustainably.

The collaboration between Records Management and ICS includes advice on best practices, fit-for-purpose infrastructure solutions, as well as access to information on other systems – could be improved.

The Records Management Department would like to initiate communication on records management to UJ that would provide general information and keep this matter "top of mind". This should be done through marketing initiatives.

The possibility of records management updates could be added to the agendas of MEC, MECA and MECO. The purpose of this would be to ensure that compliance is enforced throughout the entire UJ community.

Discussions with Human Resources have also been initiated to have records management as a KPI on each employee's performance contract.

One of the strategic points agreed upon for the Records Management Department is a compliance "audit" done to highlight any gaps in records management compliance throughout the University.

Certain recommendations were made during the rollout of records management within specific divisions. In general the following should be looked at:
• General networking opportunities should be arranged for clients to interact.
• General records management principle workshops for employees need to be implemented to educate and drive compliance.
• A year plan for records management, indicating standard/set matters that are required, needs to be drafted.
• A document solution document, documenting processes, procedures and service-level agreements, will be developed.

The Corporate Governance Risk Register with risks relevant to the Records Management Department (which might not appear on the Risk Register of the Registrar) was updated during the course of 2013.

A risk mitigation strategy should be developed and the implementation of this strategy actively monitored.

Compliance with electronic records management was problematic within the Finance: Expenditure environment. Change management seems to be the biggest challenge and constant interaction with the employees on different levels in this environment was necessary.

Duplication of documents (especially with files for registered students) is a mentionable risk. A strategy for managing duplication is a priority for 2014.

Compliance with the life cycle management of electronic documents is still a challenge, especially for older documents that are up for disposal – this is mainly in the student document and human resource document environments.

A service desk facility will reduce the risk of reported problems being neglected. It will also give management an unbiased idea of the kind of requests and problems that are received, as well as a mechanism to monitor service delivery. Currently no technology is available at UJ to monitor the quality of service.

Based on the decision made by MEC that the implementation of Records Management within UJ would be done through a phased-in approach, the faculties and departments have already, to some extent, implemented record management principles.

The Records Management Department works in an advisory/consultative capacity to assist with the management of paper records and possible inclusion in the EDRMS. The enormous number of requests received for the assistance with records management made the prioritising of projects a requirement.

Listed below are the responsibilities of the Records Management Department as specified in the Records Management Policy and the progress made:

- Creating policies and practices – the Records Management policy was reviewed and approved at MEC in 2013.
- Consultations with stakeholders – various meetings were held with the list of stakeholders mentioned in the table.
- Identifying, classifying, digitising and storing records – document catalogues are used to identify document within a specific environment. The classifying of records are grouped within six categories, namely students, employees, finance, research, operational and governance. In 2014 further classification needs to be done based on PAIA and POPI.
- Developing a records storage plan includes physical records and electronic records:
  – All vital paper records are stored at the off-site storage facility and reviewed by the Records Manager to ensure that vital records are stored and that the retention schedule is adhered to. Historical electronic records, e.g. microfiche and CD/DVD, are kept at the off-site vault to ensure controlled environments acceptable to these electronic media.
  – Safe access to records internally and outside of the University of Johannesburg is the responsibility of the Records Manager. The Records Manager is authorised to request collections or retrievals from the off-site facility as the security around access to the records is high. Handling the retention schedule and the disposal of records are managed via a workflow process within the EDRMS system. A process flow for the disposal of records is also handled within the EDRMS.

Figure 11 (above): Eugene Bascerano, legal advisor and artist, presenting a painting of a street scene in Dublin, to Prof Marie Muller with Elize de Wet from Corporate Governance looking on

Figure 12 (right): Prof Marie Muller and Magdel Duvenage in a street during a study tour in Dublin, Ireland

SECTION D:
UNIT FOR QUALITY PROMOTION

19. OPERATING CONTEXT

The UQP oversees and facilitates the implementation of the UJ Quality Promotion Plan in faculties and academic development, service and support divisions. At institutional level, it supports and continuously improves the UJ Quality Promotion System.

Although the UQP offices are situated on the APK campus, staff members travel regularly to other campuses to conduct workshops, consult with management committees and provide support to individuals or small groups with regards to quality reviews and related matters. Often, UJ staff members prefer attending meetings in the UQP offices as they are a 'safe' environment to discuss confidential matters.

20. RISKS AND MANAGEMENT OF RISKS

Quality reviews are conducted to improve the quality of programmes as well as service and support divisions. The UQP regards itself as the custodian of the quality review processes to ensure credible peer review reports to faculties and divisions. These reports, together with other information, are used to inform decisions in faculties and divisions. The UQP has to constantly guard against practices/approaches that may have a negative impact on the credibility of the review process and ultimately on the peer review report. Factors that may have a negative influence include:

- development of the self-evaluation report (SER), i.e. no real self-evaluation in the SER; lack of evidence; lack of writing skills or not enough staff to develop the SER (e.g. in a service and support division); submitting the approved SER too late to the panel (i.e. not enough time for them to scrutinise the document), no buy-in into the development of the SER;
- peer review panels, i.e. not enough/relevant experts on the panel; no curriculum expert (with regards to programme and module reviews); insufficient transparency of the review process and the department's/unit's interaction with the panel;
- site visit schedule, i.e. insufficient time; interview groups not representative; not enough reflection time for the panel.

The UQP continuously addresses the potential risks by means of:

- A Quality Discussion Forum for faculties that meets regularly (at least three times per year). The purpose is to inform and consult with faculty quality managers on quality matters, including reviews.
- Regular meetings/consultations with faculty quality managers, departments and programme groups.
- UQP staff members who act as critical readers of the SERs and provide extensive feedback as needed.
- Workshops on SER development, evidence management and the logistics of the site visit.
- A Quality Discussion Forum that was initiated (in 2012) for S & S divisions. The purpose is to inform and consult with quality managers/unit representatives on quality reviews.
- Training of UJ staff as chairpersons for peer review panels is an ongoing undertaking. One workshop was presented in 2012, and a second one in January 2013. A total of 20 persons have been trained.

- Training of peer review report writers by means of workshops (16 April and 12 June 2013) and discussions of individual reports.
- Continuous improvement of the processes through research, reflection and benchmarking with other universities (e.g. the identification of key elements in the quality review processes as quality checks by the UQP).
- A questionnaire to determine client satisfaction with UQP services has been developed. A pilot run was done in 2012, while full implementation was undertaken in 2013. The results indicated that 86% of clients rated UQP's support as either 'effective' or 'very effective', while personal support and motivation during the process were specifically mentioned. Information provided by UQP on the process (or certain aspects thereof) was also highly rated.

21. STRATEGIC FOCUS

The UQP goals for 2013 are aligned with UJ Strategic Thrusts. The following should be kept in mind when the UQP goals for 2013 to 2020 are studied.

One of the UQP's two main goals is focused on the implementation of the UJ Quality Promotion Plan. The existing plan expires at the end of 2016. A new plan should be developed, taking the following into consideration:
- the outcomes of the programme reviews conducted up to 2016 (i.e. the main concerns expressed in the peer review reports);
- the University's quality-related needs;
- the focus of the second cycle of institutional reviews (i.e. teaching and learning);
- international trends in the quality domain.

While UQP cannot by itself enhance the quality of teaching and learning, partnerships with other UJ academic staff and support units/divisions will be crucial. Buy-in of staff and leaders is – as always – crucial for the effective implementation of a quality plan/project and the resulting improvement in quality.

The UQP goals up to 2020 (see Table 7 on page 45).

22. RESOURCE MANAGEMENT

The UQP consists of five staff members and two student assistants. All five staff members have permanent appointments.

As far as gender is concerned, the UQP staff component (including student assistants) consists of:
Males: 1 (29%)
Females: 6 (71%)

In terms of race, the staff component consists of:
African: 3 (14%)
White: 4 (86%)

The UQP organises regular in-house capacity development opportunities for its own staff. The following opportunities were conducted in April and May:
(i) Curriculum Design
(ii) Interactive Qualitative Analysis Research Methodology

Development opportunities external to UJ were also utilised. See Stakeholder Engagement (at national level) below.

23. STAKEHOLDER ENGAGEMENT

National involvement

National engagement includes attendance of/visits to:
- A small inter-institutional quality discussion forum (the Garmin Group) – UJ hosted the event in February 2013. Twelve persons attended (see (j) on benchmarking above);

Table 7: UQP goals up to 2020

UJ Strategic Thrusts	UQP goals: 2013-2014	2015 - 2017	2020
UJ Thrust 1: Sustained excellence of academic programmes, research and community engagement	Provides leadership and support with the implementation of the UJ Quality Promotion Plan: 2010 – 2016. This includes support with: i) faculty reviews; ii) programme reviews (including non-subsidised programmes and research-based M and D programmes). iii) quality reviews of service and support divisions/units.	Provides leadership and support with the implementation of the UJ Quality Promotion Plan: 2010 – 2016. This includes support with: i) faculty reviews; ii) programme reviews (including non-subsidised programmes and research-based M and D programmes); iii) quality reviews of service and support divisions/units.	Provides leadership and support with the implementation of the new UJ Quality Promotion Plan. Proposed projects include: i) curriculum design; ii) assessment audit; iii) improving student engagement in quality enhancement.
UJ Trust 6: Leadership that matters in the institution and in civil society	Sustain, support and improve the UJ Quality Promotion System by means of: i) policy development and revision; ii) membership of committees such as the STLC, CE Forum, RPL Working Group, WIL Task Team, etc. iii) research on quality management (i.e. presentations at conferences, etc.).	Sustain, support and improve the UJ Quality Promotion System by means of: i) the development of a new UJ Quality Promotion Plan (see proposed projects below); ii) quality enhancement of teaching and learning; iii) providing support with UJ submissions and presentations as part of the second cycle of institutional reviews ; iv) membership of committees such as the STLC, CE Forum; RPL Working Group, WIL Task Team, etc.; v) research on quality enhancement.	Sustain, support and improve the UJ Quality Promotion System by means of: i) quality enhancement of teaching and learning; ii) providing support with UJ submissions and presentations as part of the second cycle of institutional reviews; iii) membership of committees such as the STLC, CE Forum; RPL Working Group, WIL Task Team, etc.; iv) research on quality enhancement (see Project 3 below).

- A CHE Quality Assurance Forum – attended by Mthu Vongo and Dragana Weistra on 18 March 2013;
- A HESA/SA-EU QA Colloquium from 3 to 5 April in Stellenbosch;
- The annual forum of the Southern African Association for Institutional Researchers (SAAIR) in October 2013.

Internal engagement

Within UJ, staff members of UQP were involved in the following engagement activities:
- One Quality Discussion Forum was held on 12 March, attended by 20 individuals from 7 faculties. A number of quality-related matters were discussed, e.g. HEQSF alignment of programmes, including non-subsidised programmes, programme reviews, etc.
- UQP members serve on a number of UJ committees, task teams and working groups such as the STLC, the PWG, CEAB, the RPL Working Group and the WIL Working Group.

24. ENVIRONMENTAL SUSTAINABILITY

The use of paperless meetings has been cascaded down within the institution and UQP staff members are being encouraged to implement paperless meetings.

Environmental sustainability efforts include full support of UJ's waste management and recycling initiatives by recycling paper, limiting printing to both sides of the page and switching off lights at night.

25. LEADERSHIP FOOTPRINT

Internally, the UQP provides leadership/expertise in a number of areas, such as:

(i)   the development of the framework, Quality Management of Continuing and Professional Development Programmes, in collaboration with a staff member from DIPEM;

(ii) a set of guidelines for academics/staff on the implementation of RPL in faculties;

(iii) the development of a framework for student engagement in quality promotion (in process);

(iv) the development (in consultation with UJ staff members) of the UJ Progress Report II (in response to the UJ Improvement Plan) and the identification of follow-up activities;

(v)   the faculty reviews conducted in 2013, especially with the site visits, SER development, etc.

26. CONCLUSION AND THE WAY FORWARD

The flexibility of the UJ Quality Plan, combined with the decision to review all programmes by 2015, poses an ongoing challenge to the UQP: customising support for the different kinds of reviews (e.g. module reviews, combined programme and departmental reviews, non-subsidised programmes, etc.) and keeping track of the progress in faculties and in the service and support units are ongoing challenges. The UQP remains responsible for the custodianship of the quality review processes. Regular communication with the faculties, more specifically HODs, as a way to address this concern, was initiated in 2012 and was continued and extended in 2013.

**Figure 13: International guests from the Mount Kenya University
with UQP and DIPEM staff**

SECTION E:
HEALTH AND WELLNESS

SECTION E1:
INSTITUTIONAL OFFICE FOR HIV AND AIDS (IOHA)
CORPORATE GOVERNANCE

27. OPERATING CONTEXT, GOVERNANCE AND RISK MANAGEMENT

The Institutional Office for HIV and AIDS (IOHA) forms part of the Registrar's portfolio and is positioned within the Health and Wellness Division, which includes Primary Health Care and Occupational Health Care.

IOHA strives for excellence in delivering a quality service to the UJ community, in collaboration with internal and external partners. The following services are provided by IOHA and services are mainly aimed at students:
- providing a holistic wellness programme for people living with HIV (PLHIV);
- equipping students professionally and personally to address HIV and AIDS within their communities;
- addressing social drivers related to risky behaviour related to HIV, e.g. substance abuse, stigma and gender-related issues;
- promoting and advocating human rights issues related to marginalised groupings like women; people living with disabilities; lesbian, gay, bisexual, transgender and intersex (LGBTI) individuals; and PLHIV;
- preventing new HIV infections by creating an enabling environment at a behavioural, biomedical and social level;
- positioning IOHA among its internal and external stakeholders using strategic and innovative methods of communication.

The IOHA, under the auspices of the UJ Quality Unit, underwent a programme review in October 2013 and its services were rated as excellent by the panel. Recommendations by the panel to expand IOHA services within UJ imply improved resource allocation at both human resource and financial levels. The strategic focus for 2014 to 2025 will remain sustained excellence in service delivery with the focus to mitigate student risky behaviour related to HIV.

IOHA is located on all four campuses of the University of Johannesburg and renders services mainly to students. The Manager acts as the Chairperson of the University's HIV and AIDS Committee which gives direction to the HIV and AIDS programme for the year. The Registrar, the Head of the Institutional Office for HIV and AIDS and the Manager of Primary Health Care act as the Executive Committee for consideration of urgent matters.

The Institutional Office for HIV and AIDS (IOHA) functions within the broader South African National AIDS Council and Higher Education AIDS Strategy frameworks and aligns its work with the UJ Strategic Objectives 2014 to 2025 with specific reference to the UJ Strategic Plan for 2025, the UJ HIV and AIDS Policy (2013) and other health-related policies that govern health and safety. IOHA serves as a member on the HIV and AIDS Committee and submits reports to the Registrar and HIV and AIDS Committee on a quarterly and annual basis, which serve at all UJ Management Committees for noting.

All HIV and AIDS activities at UJ are monitored by the HIV and AIDS Committee, under the auspices of the Registrar, to ensure the quality delivery of services. The University's HIV and AIDS Committee meets quarterly, as reflected in the year programme, and functions within the current professional, ethical, legal, higher education and policy framework of the Republic of South Africa, with specific reference to HIV and AIDS. It formulates and monitors the University's HIV and AIDS strategy, in accordance with the UJ Strategic Objectives (2014 to 2025), Policy Framework on HIV and AIDS for Higher Education in South Africa and with the approval of UJ's Management Executive Committee (MEC).

28. STRATEGIC FOCUS AND TARGETS

IOHA supports UJ's Strategic Objective Four of the revised UJ Strategic Plan (2014 to 2025), namely "an enriching student-friendly learning and living experience". The following strategic initiatives are planned in support of the mentioned strategic objective and the overarching UJ strategic goal to enhance the excellence and stature of UJ:

- joint HIV initiatives with African universities;
- tailored programmes geared towards specific needs of key population groups related to HIV prevention;
- KAPB survey/Stigma index to measure change in perceptions towards key population groups conducted every three years;
- key population sensitivity training for Health and Wellness staff, LINK and other student groups;
- collaborative projects between IOHA and LIBERATI (LGBTI student group at UJ);
- annual Caring Men March;
- a monitoring and evaluation system for all IOHA processes;
- an interactive online module on management of HIV and AIDS in the workplace;
- expanding curriculum integration to all faculties and providing community engagement opportunities for students.

Table 8: Performance targets and monitoring

INDICATORS	TRACKING	TARGET
Client Satisfaction	Client satisfaction surveys Counsellor evaluation forms Event evaluation forms	90% client satisfaction rate in service delivery related to IOHA staff APK: 97% / APB: 96% / DFC:97% / SWC:99% Candlelight event on 10 May: 100% satisfied World AIDS day event on 20 September: 82% satisfied August Stigma Knockout Dialogue: 90% satisfied 85% client satisfaction rate in service delivery related to external service providers HCT Campaigns during 2013: APK: 90% / DFC: 95% / APB: 90% / SWC:90%
Referrals from HCT campaigns/ Primary Health Care into support groups and/ or individual support	Testing data	80% uptake of HIV positive referrals from HCT Campaigns/Primary Health Care (PHC) into support groups 100% uptake from referrals received from PHC at APK, DFC and SWC; 3 referrals received from PHC at APB during the last term. 100% referrals received from HCT testing service providers at DFC; 78% from APK; 67% from APB; 53% from SWC. The low referral rate from HCT service providers are due to no informed consent given by clients. However, IOHA will facilitate a workshop to familiarise HCT service providers with the UJ Wellness programme and internal referral systems.
Number of HCT participants	Testing data	Uptake of 20% for the student population and 5% uptake for the staff population Students: 5 191 / Staff: 69 / Total tested: 5 260 0.56% HIV prevalence recorded HCT arranged by HR wellness aimed specifically at staff; **Challenge**: HCT Service Providers unavailability due to donor change of scope, impacted negatively on testing.

Number of MMC referrals during Mass HCT Campaigns	Referral reports	170 male students referred to off campus accredited medical facilities
Number of condoms distributed per year	Condom monitoring sheets	Condom distribution of 450 000 per year 395 950 condoms have been distributed across campuses this year.
Number of LINK and LINK Network recruited and trained in 2013	LINK and LINK Network Databases	10-15 LINK members for every 10 000 students per campus and an increase of 5% in LINK Network members recruited and trained compared to 2012 LINK: 53 / LINK Network: 2 998
Number of articles, website, facebook and twitter postings and/ or publications published	Articles, publications, website, facebook and twitter postings	**Internal**: UJ FM advertised and promoted the Condom/STI week throughout the campaign (11-15 February); Interviews with IOHA and Primary Health staff were also conducted during this week. An article titled: *What is a sero-discordant relationship* was published in the March edition of the UJ Observer and the U@UJ; Candlelight *Pledge for Life and May Clothing Drive* event 2013 was advertised on the student portal, staff circular, UJ FM and UJ Observer; Clothing drive notification posted on UJ circular throughout May Care month; *What is mother-to-child transmission?* published in U@UJ on 25 April; HIV, AIDS and Religion: An ambiguous relationship published in the May edition of UJ Observer; *Stigma Knockout: HCT August Month* and *UJ World AIDS Day* 2013 were advertised on staff circular, UJ FM and UJ Observer; Problems experienced with postings on student portal as IOHA material are not approved-this impacts negatively on our services; *For a survivor of rape-silence is no benefit: Turn your wounds into wisdom* published in UJ Observer in August edition. **External**: An article on the services provided by IOHA was published in the March edition of the *Leaders in Wellness Magazine*; IOHA participated in the SABC 1 television production titled: *One Day Leader* which was broadcast on 8 March; IOHA participated in the SABC 1 television production titled: *Big Up* which was broadcast on 11 May; This was a joint initiative between Alomdraai residence and IOHA; *Reflexions 2011/12* published and distributed internally and externally; Billboard designed by UJ Graphic Design student, Annika Coskey-placed on the highway at corner Empire and Barry Hertzog-promoting IOHA and UJ Cares; HIV Colloquium covered on 29 September in the Star newspaper: *Higher Education critical in AIDS fight*; Star Africa: *Educator warns of students' AIDS-info overload*; UJ Circular: *Higher Education critical in AIDS fight*. **Postings**: 116 107 postings on the IOHA website was reported this term; 320 followers following IOHA on facebook and 89 followers on the twitter account.
Finance management	Monthly statements	In accordance with the UJ Finance Policy
HR management	Leave Overtime Staff turnover Cultural integration	In accordance with the UJ HR Policy;

2020 targets

Sustained excellence of service on all campuses with a client satisfaction rate of 85%; expansion of LINK network to 2 000 members; significant positive shift in knowledge, attitude, perceptions and behaviour regarding risky student behaviours (as indicated by internal and external surveys); focused quarterly awareness campaigns

run jointly with PsyCaD; incorporating educational material in the induction programmes of the Student Representative Council (SRC), RAG, house committees and societies.

2025 targets

Similar to 2020 targets with the following exceptions, namely: sustained excellence of service on all campuses with a client satisfaction rate of 90%; expansion of LINK network to 3 000 members; programme on risky student behaviour/healthy lifestyles to all students as part of the First-year Experience Programme (FYE).

The Institutional Office for HIV and AIDS aligned its work with the following UJ Strategic Thrusts for 2013:
Thrust 3: Equivalence of all campuses, with dedicated initial focus on SWC and DFC through:
•   equality of services ensured by running similar programmes/services at all campuses;
•   strategies to implement tailormade programmes per campus.

Thrust 5: A brand that identifies UJ with relevant, accessible and excellent higher education which incorporates an internal and external brand campaign related to HIV and AIDS through:
•   positioning IOHA among its internal and external stakeholders using strategic and innovative methods of communication.

Thrust 6: Leadership that matters, in the institution and in civil society through:
•   sustained excellence and trendsetting in HIV and AIDS governance;
•   equipping and empowering UJ students and communities with quality and updated HIV-related information to become active agents of change both within and outside the University context.

Thrust 8: Resources that enable UJ's fitness for purpose, support the achievement of the primary thrusts and facilitate a responsible and responsive institutional citizenship through:
•   delivering a professional, efficient and effective client and office-related service;
•   prevention of new HIV infections by creating an enabling environment at a behavioural, biomedical and social level;
•   providing appropriate resources and referrals for support of people infected and affected by HIV;
•   reducing new HIV infections by innovative and preventative strategies;
•   striving and living up to the UJ values and in this way contributing to UJ's core business of teaching, learning and community engagement.

IOHA's strategic targets are informed by the national directives and are further informed by the Norms and Standards for HIV and AIDS Prevention, Treatment, Care and Support for Higher Education Institutions in South Africa, which was compiled by the higher education sector's HIV ad AIDS programme (HEAIDS) in 2010.

Innovative achievements in 2013

•   UJ was identified as a national benchmark institution for HIV and AIDS programmes, which was confirmed in a programme review held from 15 to 18 October 2013.
•   A LINK Alumni was established by UJ graduates who formed part of the LINK while studying at UJ.
•   The IOHA leadership footprint expanded at national level.
•   An excellent monitoring and evaluation system was established in all IOHA programmes.
•   UJ was one of four HEIs selected by United Kingdom Durex to participate in a safe sex campaign.
•   A national flagship project was the FADA HIV curricula-led initiative with IOHA.
•   An integrated HIV and AIDS, sexually transmitted diseases (STIs) and tuberculosis (TB) strategic plan was compiled and implemented.

Significant strategic challenge in relation to global excellence and stature

Strategic opportunities were created for IOHA to network and collaborate with international universities in relation to HIV and AIDS in order to move from national excellence to global excellence.

Short- and mid-term priorities for 2014 to 2020

•   To effect the recommendations of the IOHA Programme Review conducted in 2013 where feasible.

Figure 14: IOHA Student Peer Educators talking about safe sex

- To achieve the IOHA strategic objectives as outlined in the revised UJ Strategic Plan (2014 to 2025) – refer to strategic focus and targets.

HIV and AIDS Committee

In keeping with the UJ Vision, the HIV and AIDS Committee will achieve and implement a coordinated, comprehensive and integrated response in mitigating and managing the effects of the HIV epidemic, based on the following UJ Strategic Objectives:

Strategic Objective 2
Excellence in teaching and learning, specifically referring to the following goal and KPI:
- intellectually rigorous curricula which respond innovatively to the challenges of the twenty-first century: a curricula that prepares students for active global citizenship.

Strategic Objective 4
An enriching student friendly learning and living experience, specifically referring to the following goals and KPIs:
- support through the student life cycle: mitigating student hunger;
- learning and living communities: health and wellness;
- a responsible and respectful student culture and ethos: students who show respect for human dignity, especially for women, foreigners, gay, bisexual, transsexual and lesbian individuals and people with disabilities.

The UJ HIV and AIDS Programme is discussed at these meetings and is in accordance with the UJ Strategic Plan for HIV and AIDS, STIs and TB (2012 to 2016), which is aligned with the HEAIDS Strategy and Policy Framework on HIV and AIDS for HE Directives, consisting of the following:
- leadership commitment and reporting;
- prevention, care and support;
- a workplace programme;
- curriculum integration, research and community engagement;
- corporate marketing and communication.

Quarterly reports are submitted to the HIV and AIDS Committee by the various faculties/departments/divisions. Reporting includes monitoring and evaluation within each key result area listed above.

Four committee meetings were held in 2013. Matters of significance discussed, considered or noted at the meetings include:
- HEAIDS
- financial expenditure;
- student-driven HIV projects;
- IOHA Programme Quality Review;
- ZAZI Women and Girls Project Launch: 14 February 2014.

29. EMPLOYEE PROFILE

One Project Coordinator was appointed on a permanent basis in May 2013. One Administrative Assistant was appointed on a contract basis in April 2011 and this post will be converted into a permanent position in 2014. The Head of IOHA and the two HIV coordinator posts are permanent positions. The HIV Coordinator responsible for APK and SWC received a scholarship from the Dutch Embassy for enrolment into a skills programme that ended on 31 August 2013. The HIV Coordinator responsible for DFC and APB resigned at the end of March 2013. Interviews for the HIV Coordinator post were conducted on 27 August 2013. The incumbents selected as first and second preferred choice by the Selection Committee, was declined due to the employment equity (EE) target requirements of UJ. Subsequently the post was re-advertised and interviews were held on 26 November 2013, where an appointment was approved. The Head of IOHA resigned at the end of November 2013 and the recruitment process was initiated by HR to fill the post. An interim manager has been appointed to oversee the functions of IOHA and the HIV Committee while awaiting the appointment of the Head post. The staff equity profile comprise: one African (female), one Coloured (male) and one Indian (female). IOHA staff attend training that forms part of their continuous professional development requirements, which in turn ensures that they stay abreast of the latest trends and developments within the HIV and AIDS field.

30. COMMUNITY SERVICE, STAKEHOLDER ENGAGEMENT AND REPUTATION MANAGEMENT

Community Service

- APB and DFC LINK, in partnership with The House for Girls, conducted Basic HIV and AIDS training sessions for 17 girls aged 14 to 18 years on 20 April.
- SWC LINK and APK embarked on a joint community outreach project on 5 May 2012.
- SWC LINK visited the Pimville Children's Home on 17 May where the female LINK mentors and the male LINK mentors facilitated separate information sessions with girls and boys 18 years and older around teenage pregnancy, sero-discordancy and the importance of faithfulness in relationships.
- SWC LINK visited the Carl Sithole Home on 24 May and facilitated information sessions around the importance of delayed sexual debut in HIV prevention. Discussions around career aspirations were also facilitated.
- DFC LINK visited the Ethembeni Babies Home on 1 June.
- IOHA handed over the clothing that was collected during May Care Month to the Carl Sithole Home in Soweto and the I Care Home for Street Children in Auckland Park on 25 July.
- DFC LINK visited the Enthembeni Children's Home on 21 September and attended a performance of the Sharp Project (FADA multimedia HIV project) at the Hillbrow Theatre on 17 September.
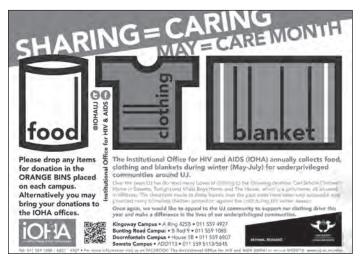
Stakeholder Engagement

Internal stakeholder engagement

Faculties, departments and divisions:
- A workshop on disclosure and ethics was offered to the PsyCaD psychologist interns on 17 January.
- A workshop on HIV counselling and treatment (HCT) was facilitated for Industrial Psychology Master's students in January.

Figure 15: Clothing Donation at iCare in Berea and Carl Sithole Home in SOWETO

- First-year orientation sessions, in the form of interactive theatre, were conducted for 4 044 first-year students across faculties in January and February.
- IOHA participated in the UJ First-year Buzz held on 1 and 2 February. IOHA LINK displayed the services of IOHA and recruited first years to join the LINK Network. An estimated 800 students were reached.
- IOHA forms part of the Wellness Committee and submits quarterly reports to the Chairperson. Meetings were attended on 18 February and 7 May.
- IOHA and PsyCaD's psycho-educational division met on 18 February to discuss collaborative projects planned for 2013.
- IOHA and Student Governance met on 19 February to discuss a possible partnership in the rollout of the Brothers for Life Programme in 2013.
- A meeting with the Academic Task Team of the HIV Committee was held on 19 March to plan for the annual HIV Colloquium scheduled in September during UJ Diversity Week.

- IOHA serves as a member on the UJ Diversity Committee in support of the annual Diversity Week in September.
- IOHA underwent a programme review in October, under the auspices of the Quality Office.
- IOHA conducted a training session on basic HIV and AIDS for 63 Active Citizenship students from the Faculty of Science at APK on 18 April. An 87% satisfaction rate was recorded.
- SWC LINK facilitated information sessions during the HCT week in May. Discussions around condoms and myths were facilitated with student groups.
- APK LINK facilitated a workshop on safe sex and STIs with 34 students at the Law Faculty. The workshop took place on 7 May and 90% client satisfaction rate was recorded.
- DFC LINK launched the Mannequin Project on 17 May to create awareness around HIV and AIDS.
- DFC LINK facilitated information sessions with students around campus related to symptoms of STIs, HIV facts and safe sex. The information sessions took place on 22 April, 24 April and 17 May. __
- IOHA serves as a member on the HIV Committee and submits quarterly reports to the Chairperson. Meetings were held on 5 February, 20 May, 16 September and 12 November.
- PsyCaD, in collaboration with IOHA, Primary Health Care (PHC) and the SRC, hosted a campaign entitled My Body, My Life, My Decision. The aim of the campaign was to reduce risky behaviour among students. The campaign was executed at all campuses from 15 to 22 July 2013.
- IOHA staff attended the Quality Office Conference at the School of Tourism and Hospitality on 15 August. IOHA is due for a programme review from 15 to 18 October.
- IOHA and FADA continued their partnership that was established in 2010 in support of the Policy Framework for HIV and AIDS in HE (2008) that was rolled out at UJ (2010 to 2012). IOHA conducted several interactive training workshops on Basic HIV and AIDS and the Social Drivers of HIV with students in the Departments of Multimedia, Graphic Design, Visual Art, Interior Design and Fashion Design. The following evaluations for the training were received: Fashion Design (94% satisfied), Interior Design (100% satisfied), Visual Art (100% satisfied) and Graphic Design (93% satisfied).
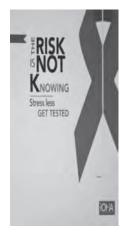
Figure 16: Artwork for the HIV and AIDS awareness campaign produced by FADA students

- IOHA, in partnership with UJ FM, PsyCaD (People Living with Disabilities Division), Central SRC and Liberate collaborated in the Stigma Knockout Challenge in August. The aim of the campaign was to address stigma against minority groupings, in this case: people living with HIV, people with disabilities and lesbian, gay, bisexual, transgender and intersex (LGBTI) people. Radio interviews were conducted throughout the month of August with relevant stakeholders. A survey to assess perceptions of students towards minority groupings was conducted. Four hundred ad twenty-four surveys were collected across campuses. Results indicated that stigma towards LGBTI people is especially high at the Doornfontein Campus. An institutional dialogue to discuss the results and stigma in general was subsequently facilitated at the APK Campus on 30 August.
- IOHA facilitated interactive workshops for the Faculty of Humanities at both APB and SWC throughout the month of September. An average satisfaction rate of 89% and 86% was achieved respectively.

- IOHA, in collaboration with PHC, HR Wellness, UJFM and UJ Arts and Culture, hosted the UJ World AIDS Day on 20 September at APB.
- IOHA facilitated a session with the Occupational Safety Department on 3 September to discuss Universal Precautions Related to HIV and Referrals Related to Occupational Exposure of HIV at UJ.
- IOHA, PHC and HR Wellness held a discussion meeting on 16 September related to the monitoring and evaluation tools proposed by HEAIDS for HIV counselling and testing (HCT) and voluntary medical male circumcision (VMMC). A recommendation report was submitted to HEAIDS.
- IOHA serves as a member on the Risky Student Behaviour Committee (RSB), which strives to address risky behaviours that fuels, among other factors, HIV on campus.
- UJ Operations at all campuses assist IOHA with condom distribution through their respective Cleaning Services. IOHA Coordinators serve as members of the Operational Forums across campuses which meets quarterly.
- A partnership was established with the Research Office to submit quarterly database reports on accredited HIV research published within UJ.
- A partnership was established with Library and Information to submit quarterly database reports on HIV research conducted on postgraduate master's and doctoral studies.
- A partnership was established with Community Engagement to submit quarterly reports on HIV-related Community Engagement initiatives.
- IOHA serve on the Interdisciplinary Forum with Primary Health Care, PsyCaD, HR Wellness and Occupational Health Care to strengthen care and support efforts for students and staff living with HIV.

Residences:
- Orientation sessions, through interactive educational drama, were conducted for an estimated 320 first-year residence students. The play, performed by Themba Interactive, focused on the social drivers of the HIV epidemic, including the contextual risks within residences that fuel the spread of HIV and other sexually transmitted infections. Risks highlighted during the performance: transgenerational and transactional sex, multiple concurrent sexual partners and unwanted pregnancies. The invitation was opened to all residences, however, only the following residences turned out for the performances: Aurum at DFC, Sophiatown at APK and the SWC residences. The matter was raised with the Executive Director: Student Affairs and the Head: Residence Life.
- IOHA, in collaboration with Alomdraai Residence at APK, participated in a television shoot related to HIV and AIDS on 18 April. The shoot was broadcast on Big Up on SABC 1 on 11 May. Mongezi Sosibo, a UJ student who lives openly with HIV, delivers his testimony at different platforms to encourage the youth infected and affected by HIV. Mongezi has subsequently volunteered to act as UJ Ambassador for the HIV and AIDS Programme at the University and has since participated in many HIV activities on and off campus.
- APB LINK facilitated information sessions on 9 and 10 May at the South Point Melridge and Mariston residences respectively. The importance of communication in relationships and safe sex was discussed during the information sessions.
- SWC LINK facilitated information sessions with students at the Hector Peterson residences on 16 May. An Intersexions DVD on the Importance of communication between parents and children and health workers and teens with regards to sexuality was discussed.
- APB LINK conducted mini information sessions at the Panorama Residences around condom usage on 19 May.
- DFC LINK facilitated information sessions on symptoms of STIs, HIV facts and safe sex with students during May for students at residences.
- APB LINK delivered an information session on sexually transmitted infections (STIs) and the importance of testing for residence students at the South Point Building. This session was held on 25 July.
- APB LINK facilitated a workshop titled: I know my status, do you? at the Panorama residences on 6 August.
- SWC LINK facilitated an interactive session with YWCA female students around risky sexual behaviour, STIs and the importance of testing. The session was held on 28 August.
- DFC LINK facilitated information sessions throughout the month of August for off-campus student residences. Topics covered included communication skills, HIV information and UJ support services. An information session about HIV and safe sexual practices was also offered at the Habitat residences.

LINK:

- The LINK is an IOHA student peer education programme that aims to promote social norms and support for adopting healthy attitudes and behaviours by means of peer education. New LINK members are selected and recruited annually. Fifty-three LINK members were recruited in 2013.
- Basic HIV and AIDS training was facilitated for the LINK on 2 February at the Bunting and Doornfontein campuses and on 16 February for the Kingsway and Soweto campuses. A subsequent assessment was conducted with a 75% pass rate requirement.
- A compulsory training week for the LINK took place from 22 to 27 March 2013 and included the election of portfolios per campus. Weekly supervisory meetings are held and the LINK is required to submit their portfolios of evidence (POE) mid-year in order to be certified as competent. LINK POE training was conducted from 5 to 7 February.
- SWC LINK facilitated information sessions with LINK network members on 26 April. An Intersexions DVD on the importance of communication between parents and children and health workers and teens with regards to sexuality was discussed.
- DFC LINK held a campus campaign entitled Prevention of HIV on 18 July.
- All LINK assisted with the collection of data related to the Stigma Survey during July and August.
- All LINK conducted information sessions and condom demonstrations with fellow students during the HCT Campaigns held in August.
- Recruitment for LINK 2014 opened in September and interviews were held in October across campuses.
- APK LINK promoted the Stigma Knockout campaign on campus throughout the month of August and held a campaign entitled "The importance of HCT" on 13 September.

LINK Network:

- The LINK Network is a strategy to maximise the reach and infiltration of the wider student body. The LINK Network provides a pool of students which can be easily reached for invitation to our information sessions as well as other campus events.
- 2 998 LINK Network members were recruited in 2013. Information sessions were conducted with the LINK Network in May.

External stakeholder engagement

Inter-university:

- IOHA, PHC and HR Wellness represented UJ at the HEAIDS Consultation Meeting related to Monitoring and Evaluation on 30 April.
- IOHA and PHC represented UJ at the HEAIDS Consultation Meeting related to voluntary medical male circumcision (VMMC) on 6 June.
- IOHA is a member of the Central Universities Regional Forum (CURF) for HIV and AIDS and attended meetings on 10 April, 11 June and 13 November. The forum seeks to strengthen collaboration between universities in the region and derive best practices related to HIV and AIDS.
- HEAIDS held a National Summit for Chairpersons of the HIV Institutional Coordinating Committees at Universities on 29 and 30 August. The purpose of the summit was to identify priority areas for the Global Fund expected by HEAIDS in 2014, as well as to discuss other national priorities related to the sector. Dr G. Koorsen (Faculty of Science) and Dr S. Rassool Bassadien (Faculty of Humanities) accompanied Ms T. Foster (Chairperson: HIV Committee) to the summit.
- The First Things First HEAIDS Testing Campaign aims primarily to mobilise first-year students at HEIs to voluntarily test for HIV. The campaign is intended to support the ongoing HIV and AIDS mitigation work of the higher education institutions and the National HCT campaign. This campaign was rolled-out at UJ from 9 to 13 September. Due to poor participation from students and other logistical problems experienced at HEAIDS, the campaign had to be rescheduled for mid-October.
- IOHA, in partnership with the Academic Task Team of the UJ HIV Committee, hosted the annual HIV Colloquium on 18 September titled: Driving change in the areas of HIV/AIDS, STIs and TB. The Colloquium

showcased presentations from both students and staff at UJ and was well attended by academics, practitioners and students from UJ, other higher education institutions and NGOs. Dr Ramneek Ahluwalia, Head: HEAIDS, delivered the keynote address.

NGOs:
- IOHA formed new partnerships with the following testing service providers to provide HIV counselling and testing (HCT) services: Foundation for Professional Development at APK, Mothusimpilo at DFC and APB, and Right to Care for the promotion of VMMC at APK, APB and DFC.
- Brothers for Life is a sub-programme of Mothusimpilo that seeks to mobilise the silent majority of South African men to take action and to be outspoken about the norms and values that actually underpin being a man in South Africa. IOHA and Brothers for Life trainers facilitated several discussions with Student Governance and the SRC to drive and own the programme as this will have greater impact if the programme is broadened. Training was supposed to have happened in August but unfortunately it did not materialise. Student Governance made a commitment to introduce the programme to the newly elected SRC for rollout in 2014.
- The Society for Family Health (SFH) and Project Promote (a joint initiative between SABCOHA and NDOH) provides condoms to UJ on a needs basis; 395 950 condoms were distributed in 2013.
- Themba Interactive, in association with Drama for Life (DFL), equips the LINK with methodologies in the form of theatre to creatively address issues related to HIV and AIDS in an interactive manner.
- Positive Convention provides a voice for HIV-positive students at UJ and prepares them for disclosure at home and provides a platform for advocacy for people living with HIV (PLHIV); Positive Convention and Positive Magazine held a round table discussion which focused on students preventing HIV and stigma. Seven universities were represented namely: UJ, VUT, TUT, UL, UFS, WITS and NWU. Nine students living with HIV from UJ participated in the discussions. Reportedly, UJ had the most participation of HIV-positive students at the event.
- Love Life partnered with IOHA to facilitate forums aimed at young people to specifically address risky behaviours related to HIV. Forums were hosted on 19 and 29 July at the Bunting and Doornfontein campuses respectively. The topic covered was HIV and young people in SA.
- Right to Care helps to promote voluntary medical male circumcision (VMMC) at UJ and students are subsequently referred to medical facilities for the surgery to be performed.

Other:
- ABSA and IOHA formed a partnership to strengthen the LINK programme and provide LINK members with experiential learning opportunities in the workplace.
- The Centres for Disease Control (CDC) formed a partnership with UJ to provide training on evidence- based prevention programmes for Health Care professionals and will support UJ in the rollout of the positive health, dignity and prevention for PLHIV in 2014.
- Durex in the UK, in partnership with Giacomo Consulting, sponsored and implemented the Kampus Sutra Safe Sex campaign at UJ on 8 March 2013.

31. RESOURCE MANAGEMENT AND SUSTAINABILITY

The HIV and AIDS Committee budget for 2013 amounted to R 126 000. The budget was specifically allocated for the execution of HIV Committee marketing-related expenses and administration. Eleven per cent of the budget was spent for 2013. The reason for the under expenditure was that claims pertaining to the HIV exhibition were either delayed and/or never processed by the academic departments concerned.

The Institutional Office for HIV and AIDS budget for 2013 amounted to R 3 445 450. Eighty-seven per cent of the budget was spent for 2013. IOHA also accumulated funding in kind for UJ through its strategic partnerships with testing service providers, the Centres for Disease Control and ABSA.

32. ENVIRONMENTAL SUSTAINABILITY

- IOHA initiated a paperless drive within the Department, in support of environmental sustainability.
- IOHA participated in the environmental drive initiated by Occupational Safety in October 2013.

33. LEADERSHIP

- Ms T. Foster attended the HESA HIV and AIDS Strategy Group meeting, where she serves as an elected member and forms part of the Resource Mobilisation Task Team on the committee, on 27 February and 27 June.
- Ms T. Foster serves as Chairperson for the Central Universities Regional Forum for HIV and AIDS.
- Ms T. Foster was selected to serve on the HESA/HEAIDS/AAU task team in support of collaborative partnerships between HEIs in South Africa and universities in Southern Africa;
- Ms T. Foster attended the HEAIDS National Summit on 29 and 30 August. She presented on the HIV and AIDS Programme at UJ in her capacity as Chairperson for the UJ HIV Committee.
- Mr A. Kleinhans received a scholarship from the Dutch Embassy, coordinated by SVUSA/VU University in Amsterdam, for enrolment into a skills programme in Global Health which commenced on 1 September 2012 and ended on 31 August 2013.
- Ms D. Gengan was selected to serve on the HEAIDS reference group for the pilot project aimed at youth development and HIV prevention through campus radio and social media.
- Mr Furrah Simbeku and Ms Nomahlubi Madikgetla presented the following papers respectively at the HIV Colloquium on 18 September titled: *Student support group for people living with HIV at the University of Johannesburg and The UJ LINK Programme: Keeping the Link strong*.

34. CONCLUSION AND WAY FORWARD

The strategic focus for 2014 will be on the following:
- sustaining excellence in service delivery, within the scope of resources available;
- mitigating student risky behaviour related to HIV;
- achieving the IOHA strategic objectives as outlined in the UJ Strategic Plan (2014 to 2025).

The measurable targets for IOHA are as follows:
- client satisfaction rate in service delivery: at least 85%;
- expansion of LINK Network to 2 000 members;
- significant positive shift in knowledge, attitude, perceptions and behaviour regarding risky student behaviours (as indicated by internal and external surveys);
- focused quarterly awareness campaigns run jointly with PsyCaD;
- incorporating educational material in induction programmes of SRC, RAG, house committees and societies.

SECTION E2: OCCUPATIONAL HEALTH PRACTICE

35. OPERATING CONTEXT, GOVERNANCE AND RISK MANAGEMENT

Organisational design

The Health and Wellness Unit within the Registrar's portfolio is home to the Occupational Health Practice. It functions alongside its health peers in the unit, namely Primary Health Care and IOHA.

The Occupational Health Practice is represented at all campuses through the Campus Health Service sites and its model accommodates both the Occupational Health Practice and the Primary Health Care service. Lean resources are deployed relative to the nature and scope of health risk, legal prescription and employee need: the Head of the Practice, one full-time Occupational Health Nursing Practitioner (OHNP) and an Administrative Assistant are situated at APK, at APB one half-day temporary Registered Nurse is appointed and there is a shared full-time OHNP position between DFC and SWC. An Occupational Medicine Practitioner holds the appointment as the UJ Clinic's designated medical officer and he visits one day per week. The Radiation Protection Officer (RPO) forms part of this structure due to appointment by this Practice as independent contractor and reports are assimilated into the reporting structure.

A mix of contractors, employees, students and visitors make up the clientele of this Practice. Legal instruction and Occupational Health offerings such as the Resilience Programme, injury management, incapacity assessment, travel health and medical surveillance predict that employees are the primary target population. As such this patient type comprises 95% of contact.

Governance structures and quality management

In 2005, an application under section 38A of the Nursing Act 50 of 1978 was submitted to the Department of Health (DOH) for a clinic permit. It was granted and UJ was designated by the Director-General as an organisation performing a health service. The Occupational Medicine Practitioner (OMP), in accordance with the designation, authorises OHNPs to perform a service within an organisation with reference to physical examination of any person, diagnosing any physical defect, illness or deficiency in any person, and keeping of prescribed medicines and the supply, administering or prescribing thereof on the prescribed conditions. Professional nurses hold Dispensing Licences for the acquisition, storage, supply and prescription of medication. Medication is procured on this basis and stored in accordance with the license requirements.

The national legal-ethical framework further governs nursing qualifications and registrations, and includes scopes of practice, Codes of Good Practice, SA National Standards such as on spirometry, noise pollution and event medical risk management.

The Occupational Health Nursing Practitioners, the Occupational Medicine Practitioner, the Radiation Protection Officer and the administrative staff report to the Head: Occupational Health Practice. In turn the HOD reports to the Registrar. The strategic and operational core is at APK. From here clinicians at each campus are guided and enabled to attain campus equivalence and accessibility. The structure, through the Occupational Health Committee, provides for institutional accountability.

Membership of professional bodies is closely observed to ensure professional accountability and compliance with codes of competence and ethics.

The RPO is a radiation expert (physicist) and he assumes responsibility for acquisition, waste disposal and monitoring of radio-active sources/practices. The RPO is a legal appointment under the Department of Energy if any institution imports, acquires and possesses nuclear material or radiation equipment. This Practice conducts the radiation medicals to register radiation workers, periodic assessments and continuous monitoring of exposure required by the Department of Health. Radiation incidents and investigations are managed jointly.

The international legal-ethical framework is adhered to, including the relevant conventions, ratifications and recommendations by the International Labour Organization and the Code of Ethics for Occupational Health Services (by the International Commission on Occupational Health).

Self-evaluation is a prime focus of this Practice and the highly positive client experience is evident in client satisfaction surveys and a narrative feedback register.

Clientele are continually offered an opportunity to complete the client satisfaction survey.

A dedicated survey during February was focused on evaluating the Executive Resilience Programme (ERP). The ERP clientele (ELG) were requested to provide their assessment of the programme. The survey items were:
• Contact with this Practice yields effective, expected response;
• Response to email and enquiries occur within 1 to 2 days;
• My health is handled with care and ongoing support is offered;
• Personal feedback after a blood test occurs within 1 to 2 days;
• Professional staff uphold ethical values and client confidentiality.

The response rate was 54%. The scorecard target of 90% client satisfaction rate was exceeded: 100% of the respondents strongly agreed/agreed with the quality of service delivery.

All narrative feedback occurs spontaneously and is directed to us in the form of emails, cards or remarks on the client satisfaction document. All records are archived for reference purposes. Highly positive narrative feedback conveys appreciation for the adaptable, professional, caring service, where solutions are tailormade to clients' needs.

The Occupational Health Committee is governed in accordance with its charter, reporting to the Registrar's portfolio. The head of this Practice is a permanent invitee to the MEC Risk Management Committee. Participation is upheld in the HIV Monitoring and Evaluation task team: input was provided into the HEPF quarterly report and the IOHA document on a Wellness Programme for HIV-infected staff and students. The HEPF strategic plan was supported by attendance of the workshop. Quarterly reports serve as part of the HEPF requirements. The committees for Persons with Disabilities, Risky Student Behaviour and Wellness are supported, as well as all Campus Forums.

Risks and interventions/initiatives to mitigate risks

All occupational health risk is captured and updated on the Occupational Health Risk Register from where risks are selected for the Registrar's Risk Register. The latter is submitted to the MEC Risk Committee.

Legal compliance and risk control is sought and achieved regarding:
• health risk assessment;
• medical surveillance;
• radiation requirements;
• travel health;
• food hygiene auditing;
• event medical risk management.

Table 9: Occupational Health Risk and Strategy

NO	RISK	CONTROL	INTERVENTION
1	Occupational Risks to health present at UJ	Health Risk Assessment	Prioritized risk spaces and practices are audited at legally prescribed intervals
2	Persons at risk of occupational exposures	Medical Surveillance Programme	Persons are assessed clinically in accordance with the Health Surveillance matrix for exposure effects
3	Persons at risk of radio-active contamination	Radiation Risk governance	Baseline medical assessment prior to registration as Radiation Worker. Periodic assessments. Dosimetry. Licensing process in collaboration with RPO.
4	Persons at risk of communicable, destination-bound or endemic disease and air travel risk	Travel Health Programme	Pre-travel medical immunizations. Chemo-prophylaxis. Travel first aid kit. Travel advisories issued to UJ population upon receipt of alerts. Notifications of local travel to Netcare911 to ensure dedicated response and stabilization of patients.

5	Food borne Disease outbreaks resulting in acute incapacity and reputational risk	Food Hygiene auditing	Quarterly external auditing; results are interpreted and relayed to Registrar, Campus Directors, Alchemy Property Management and MEC Risk Management Committee.
6	Medical emergencies and fatalities precipitated by official UJ events	Event medical risk management	Comprehensive event medical risk planning. Netcare911 contracted when indicated; SANS 10366 engaged as guideline to allocate resources. Medical Plan for on-site response. On-site attendance and situation reporting at high risk events. First Aid Rooms equipped and staffed where required. Notification of academic tours to enable remote medical response, stabilizing and transfer of patients as per contract.
7	Disaster medical risk	Triage Plan	Disaster Room equipped and maintained. Basic Life Support training arranged annually for Professional Nurses and medical responders. Two UJ ambulances equipped and stocked. Emergency room at all clinics equipped with emergency trolleys and protocols written.
8	Outbreaks of communicable disease	Environmental scanning	Clinical Management Guidelines obtained and updated from DOH; distribution to Health Care professionals. Continual risk scanning and interpretation in context. Immunization campaigns. National professional network established. Personal Protective Equipment. Post Exposure Prophylaxis to those exposed. UJ Management Plan.
9	Potential delayed response time to medical emergencies at UJ campuses & sports facilities	UJ medical response default plan	Medical response by Protection Services' medical responders and Health Professionals by default. Radio is monitored for response time; control rooms know they could request our assistance when needed. Island Risk Assessment conducted and Risk Action Plan operationalized. Triage plans designed for each campus control room. Netcare911 was informed and shown DFC campus upgrades. First aid room to be equipped at Perskor building.
10	Confidentiality breach	Confidentiality agreement document	Confidentiality agreements signed by all Occupational Health staff.
11	Siyabuswa task team	Meetings; liaison; contact	Health Risk Assessment completed; advisory provided. SLA includes the campus into the UJ contract with Netcare911 for the next four years: five events per annum will receive medical standby
12	Executive and HOD Resilience Programmes	Executive Resilience programme; PA Resilience Programme; HOD Resilience Programme	ELG invited, assessed and supported PA's of the ELG are invited, assessed and supported 50 HOD's on the register are assessed and supported. Full roll-out pending resources.

In principle, pro-active assessment of environments for health risk, early advisories on developing risk, consulting subject matter experts, medical surveillance of employees and site visits are health risk mitigatory initiatives. Current programmes at the Occupational Health Practice aligned herewith include Health Risk Auditing, the Medical

Surveillance Programme, Event Medical Risk Management, Food Hygiene Monitoring and the Travel Medicine Programme. Other related activities include the management of occupational exposures of staff and students to blood, a vaccination service to Health Care professionals, medical responders, travellers and those exposed to sewage and coordination of medical response to incident scenes. The risks associated with radionuclides and X-ray emitting equipment at UJ are controlled in accordance with the legal framework by conducting medical assessments, offering the dosimetry service to monitor exposure and maintaining the appointment of the Radiation Protection Officer. Finally, the Resilience Programme aims to conduct sub-clinical, non-communicable disease screening as a health promoting and risk preventative initiative among UJ leadership.

The programmes are discussed in more detail in subsequent sections.

Occupational Health Risk Audit Plan 2013

An approved audit plan guided annual work. Risk is assessed by priority appropriate to budgetary provision. A mix of external professionals and the clinicians on the team provide for the execution of the plan.

New risk presenting in 2013 warranted additional Health Risk Assessments: the planned 15 units of work have been augmented to 18 units owing to risk at the DFC Health Training Centre.

The Ergonomics survey of the Faculty of Law was executed in February and the report made available to the Executive Dean for rational decision making regarding acquisition of ergonomically sound office furniture.

The FEBE APK Health Risk Assessment was completed in February and reports were interpreted and conveyed to Dr Kimberley Battle's Faculty Exco.

After complaints about ducts were received from occupants at the Health Training Centre at DFC, fungal growth in the ventilation system was suspected, swabs were taken, an Indoor Air Quality Assessment was requested from a service provider and a professional cleaning was ordered. The process was concluded by a final round of swab tests, which proved that the professional cleaning had been efficient. Several memorandums containing recommendations were provided and a meeting was held with the FHS Dean, the Campus Director and operational staff.

The audit plan is always augmented with newly presenting hazard risk, which prompts additional health risk assessments. During the reporting period, the original eleven units of work resulted in seven additional issue-based health risk assessments. The augmented plan therefore included eighteen units of work.

The overall progress on performance of the Occupational Health Practice against its target is reflected in the table below.

Table 10: Cumulative degree of completion of the (augmented*) Health Risk Audit Plan

	Cumulative result	Annual target
Completion of Health Risk Audit Plan consisting of 18 units	**94%** (17/18 units completed)	90%

In 2013, a portion of the annual audits had to be conducted by Approved Inspection Authorities under the Occupational Health and Safety Act 85 of 1993 as amended.

An outsourced audit at the Faculty of Health Science was postponed to mid-2014 when the upgrade should be completed and the divisions are fully operational. The assessment will include the detailed survey where illumination, noise, ventilation, hazardous chemical substances and ergonomics dimensions will be measured at DFC.

Other outsourced audits included Food Hygiene audits by LTL, and the National Health Laboratory Service being contracted to perform a comprehensive Legionella Risk Assessment of high risk hot/cold water systems at UJ.

Ergomax conducted the Ergonomics Survey at the Faculty of Law and Waterlab undertook the water quality analysis of UJ bottled water (and was found safe for drinking water). OCSA was tasked with the FEBE health risk assessment and Indoor Air Quality Survey at the DFC Health Training Centre.

Medical surveillance programme

An approved Health Surveillance Matrix, endorsed by the Occupational Medicine Practitioner, Dr van Zyl, guides the scope and defines the nature of medical screening for groups at risk of shared exposure at work. However, each person has a unique 'fingerprint', being an Occupational Risk Exposure Profile (OREP). The OREP refines screening further to ensure that all exposures are monitored and no untoward health effects occur.

Periodic medicals are conducted on at-risk groups guided by the Health Surveillance Matrix. An external service provider is periodically appointed to conduct large groups of medicals on site where required: the demand is too high for the resources.

A completion of 98% was reached on the scorecard targets for medical surveillance.

Food hygiene

All four rounds of Food Hygiene audits have been completed. The annual results table showed an overall annual average among all UJ Food Providers of 89%, well above the international HACCP benchmark of 85%.

A quality survey on request of this Practice was undertaken to externally verify the LTL results obtained; at APK food outlets with marginal performance were selected for testing and the results were justified.

Benchmarking occurs against the international HACCP food provider criteria; a minimum of an 85% total score should be attained. In the calculation of total scores, Housekeeping and Maintenance and Microbial Count are each weighted as 50% of the score.

Event medical risk management

The Occupational Health Practice has, by virtue of need and legal prescription, adopted the role of medical mediator for official academic and cultural events at UJ. Each event reported to the Head: OHP by an event organiser, is analysed for its medical risk.

In line with contractual provision by Netcare 911, a request for medical assistance on site or a notification is issued, depending on level of risk.

In case of an event, as defined by legislation and the UJ SOP, on site standby is requested and medical plans are generated suited to the nature and scope of risk. Medical response is allocated by Netcare 911 in accordance with the SANS 10366: 2009 standard. Care is taken to ensure that medical responders act within their Scope of Practice and that they are duly registered clinicians with the HPCSA and SANC.

Major projects included the Late Application Walk-in period between 3 and 11 January 2013. We were also involved in the guidance and planning for the Siyabuswa potential Late Application Walk-in period. Other events included the International Legume Conference, RAG Week, the Academic Opening ceremony at SWC and Staff Day. Open Day was categorised as a medium risk event and intensive preparation and planning preceded the event. On site presence was upheld by the Occupational Health team and intermittent situation reports were sent to stakeholders. Discreet collaboration and on site standby was required for the visit to the SWC by US President Obama.

A meeting with the Provincial Commander of the SAPS and the City of Johannesburg's Event Management Forum was attended, during which bilateral briefing occurred. A model of cooperation and understanding on legal requirement was adopted informally.

A total of 85 events, of which 11% were scheduled on the UJ Year programme and 89% unscheduled, were assessed for event medical risk during the year. Netcare 911, the contracted service provider for medical response to UJ, attended to 21 events on site and were notified or alerted to an additional 48 events. At fifteen of the events UJ medical resources were deployed.

Medical disposables, protective personal equipment (gloves, masks) servicing, calibration of equipment and sourcing appropriate disinfecting agents for infection prevention and control in UJ ambulances were upheld.

There is prompt response to calls for assistance for emergency medical incidents. Two-way radio communication is screened during office hours. Medical response is deployed and coordinated at incidents where assistance is called upon. Decisions on Netcare 911's involvement are taken.

Radiation exposure risk management

Monthly dosimeter disks are ordered for radiation workers at UJ. After a four-week wearing period, the batch is couriered to SABS for analysis. The results are evaluated by the Radiation Protection Officer (RPO) and Occupational Medicine Practitioner. Incidents of over-exposure are investigated. Baseline and periodic medical examinations are conducted on prospective and current radiation workers to duly register them at the Department of Health's Directorate of Radiation Control.

The RPO is enabled to audit and execute his duties by being provided with sensitive radiation detection equipment and an office.

Influenza Campaign

The annual Influenza Campaign was held during the month of April and repeated twice in May and June after emerging threats of the H3N2 Influenza virus. Seven hundred doses were procured and a total of 525 vaccines were administered to UJ employees in keeping with the annual uptake for UJ, across all campuses.

Two novel strains of the Influenza virus were investigated: the Avian Influenza (H7N9) appeared in China and was closely monitored for human-to-human transmission, which did not occur. The new strain of the Swine Influenza (H3N2) appeared in South Africa among those who did not receive the 2013 seasonal vaccine. Advisories were sent to UJ employees to inform and recommend precautionary measures.

The annual Influenza Symposium offered by the National Health Laboratory Service was attended and professional networking was upheld. N-95 masks were ordered and are always kept in supply in case the need to curb the spread of droplet-spread respiratory disease arises.

Travel Health

Pre-travel Health Risk assessments were requested from official travellers. They received vaccines, first aid bags and travel medicine. A total of 102 consultations were devoted to travel health.

The novel Coronavirus (MERS-Co virus) appeared in the Middle East and displayed a very high mortality. An advisory was sent to UJ employees to inform and recommend precautionary measures. Two additional travel advisories were issued: in April Avian Influenza (H9N9) emerged again in Taiwan and in June there was an outbreak of Swine Influenza (H3N2v). In both cases the risk was monitored and advisories from the desk of this Practice are reflected in annexures 2.2 and 2.3 respectively.

Needle prick injuries and vaccination programmes

Post-exposure prophylaxis is available to any clinician within one hour after exposure. Cases involving employees will be processed as Injuries-on-duty and is reported to the Workmen's Compensation Commissioner. Four such injuries occurred during the reporting period.

Seven hundred vaccines were administered to food handlers, travellers, Health Care professionals and those exposed to sewerage and hazardous biological agents. The Influenza campaign's 525 vaccinations have been included.

Siyabuswa Task Team

The Head of the Practice was assigned the duty to assess the proposed new site of delivery for health risk, emergency response and medical surveillance of potential employees. A site visit was undertaken, the surrounding health network was assessed and food hygiene standards at the campus were evaluated in view of the norm. Progress reports served at the task team project meetings.

An undertaking was verbalised to provide an ongoing guidance role. A debriefing session by NIHE took place. Recommendations regarding design and activation of the health-related services at Siyabuswa were forwarded

to Mr Thomas Varghese and Gerhard Landman. The Netcare 911 contract extension was negotiated and activated to include the site until 2016.

The task team has been dissolved but oversight remains in place for Health risk.

Executive, Personal Assistant and HOD Resilience Programmes

The three tiers of the UJ Resilience Programmes (RP) are offering ongoing assessment and support to the clientele. Eighty-three consultations were devoted to the three programmes.

The Executive Resilience Programme is devoted to the ELG, the PA-RP programme to the PAs of the ELG and the HOD Resilience Programme (HOD-RP) to the 54 existing clients on the register. Further rollout of the HOD-RP is dependent on further resources, namely the expansion of the APK site into the current graduation gown venue and appointment of additional human resources.

The baseline medical examination is followed by an assessment and evaluation by the Occupational Medical Practitioner. From here prescribing, referral or other interventions are conducted. Year-on-year it provides the client with progress tracking and response to treatment. Clientele are now sponsored to attend UJ gyms at the campus of their choice.

A full presentation on the Executive Resilience Programme was requested by the Vice-chancellor. Trends and impacts were relayed to the clientele at their Kloofzicht breakaway session on 5 March 2013.

A mandate was obtained to repeat the psychometric resilience profile of the ELG after the initial assessment conducted in 2007. PsyCaD was requested to conduct a review of burnout, coping in stressful situations, sources of work stress and quality of life questionnaire. The survey is underway and a final report is expected early in 2014.

Sixteen members of the ELG had completed their annual medical assessments at the reporting date. Genetic testing was requested by three members. The three new members of the ELG were invited and introduced to the programme.

Clientele are continually offered an opportunity to complete the client satisfaction survey.

A dedicated survey during February was focused on evaluating the Executive Resilience Programme (ERP). The ERP clientele (ELG) was requested to provide their assessment of the Programme.

The survey items were:
• Contact with this Practice yields effective, expected response
• Response to email and enquiries occur within 1 to 2 days
• My health is handled with care and ongoing support is offered
• Personal feedback after a blood test occurs within 1 to 2 days
• Professional staff upholds ethical values and client confidentiality.

The response rate was 54%. The scorecard target of 90% client satisfaction rate was exceeded: 100% of the respondents strongly agreed/agreed with the quality of service delivery.

All narrative feedback occurs spontaneously and is directed to us in the form of emails, cards or remarks on the client satisfaction document. All records are archived for reference purposes. Highly positive narrative feedback conveys appreciation for the adaptable, professional, caring service, where solutions are tailormade to clients' needs.

Adverse clinical effects

No adverse clinical effects presented at interventions by this Practice during the reporting period.

36. STRATEGIC FOCUS AND TARGETS

Strategic objectives aligned with the UJ Strategic Plan 2025

The Practice's strategic plan is aligned with the UJ Strategic Objectives numbers one, three, four, five and six found expression in various ways.

UJ Strategic Objective 1: Excellence in research and innovation

The Occupational Health Practice (OHP) has created awareness within high-risk environments, such as the Faculty of Science and the Faculty of Health Sciences, on undergraduate and postgraduate research risks. Hazardous chemical substances may present physical, health and environmental hazard class risks. Health risk assessments and chemical risk assessments are conducted on new processes as soon as the OHP receives notification or is informed during site visits. In the event of an incident, medical response and case management is done. Injuries on duty are reported if an employee is injured or exposed to hazards.

UJ Strategic Objective 3: An international profile for global excellence and stature

International staff health risks will be assessed by compiling an Occupational Risk Exposure Profile of persons and prescribing appropriate medical surveillance and biological monitoring to prevent or screen risks to health.

UJ Strategic Objective 4: An enriching student friendly learning and living experience

The contribution to a safe teaching and learning environment for international and resident staff and students was achieved by continual assessment of occupational health risk in laboratories, medical surveillance of research staff and provision of emergency medical services. Food providers on campus are audited for compliance with food hygiene markers, yielding quality food and mitigating the risk of food poisoning.

UJ Strategic Objective 5: National and global reputation management

A welcoming, caring and service-orientated Practice was evidenced by narrative feedback for the quarter, which displays appreciation for the service at 100% positive feedback.

UJ Strategic Objective 6: Fitness for global excellence and stature

Legal and ethical compliance found expression in professionalism and in the efficient execution of legal roles. Risks uncovered from observation, assessment or auditing were admitted to the Risk Register through governance structures.

Occupational Health Practice strategic direction, goals and targets

KPA – KPI – Tracking – Target

The focus for 2014 includes a triage simulation exercise, in-vitro clinical sessions and execution of core health risk assessments. The current in-depth master's study on the use and management of hazardous chemicals at HEIs should be followed by continuation into doctorate studies and journal publications in the medium term. Evacuation exercises in major buildings will be motivated.

It is envisaged that in the medium term up to 2016, the HOD of this Practice will publish articles on academic laboratory safety and mobilise internal resources to conduct evacuation exercises of major buildings. The retention of OH team members will require consideration to sustain the dynamic nature of the Practice.

Table 11: Occupational Health Practice Scorecard

KPA	KPI	Tracking	Target		
Strategic objective 6: Fitness for purpose			Current position	Floor	Target
KPA 3.1 Welcoming, caring and service orientated environment for staff students & visitors	Positive narrative feedback received	e-mails (on file), campus forum meetings, telephonic feedback	97% positive feedback: 2013	90% positive feedback	95% positive feedback
	Client Satisfaction	Client satisfaction survey	ELG survey: 100% agree or strongly agree	85% agree or strongly agree	90% agree or strongly agree

KPA 3.2 **Efficient conduct of UJ business**	Sound finance management	Budgeting, budget management Annual utilisation	11% unspent for 2013 (risk dictates)	Spend within 10% variance of budget	Spend within 5% variance of budget
KPA 6.1 Legal and ethical compliance	Legally compliant Medical Surveillance Programme	Quarterly reports Medical Surveillance matrix	101% uptake of annual Medical Surveillance Programme	85% uptake of annual Medical Surveillance Programme	90% uptake of annual Medical Surveillance Programme
	Legally compliant Occupational Health Risk Auditing	Occupational Health Risk Audit Plan executed	94% of plan executed in 2013	80% of Audit Plan executed p 49	90% of Audit Plan executed
KPA 6.2 Risk management and mitigation of risk	Well governed occupational health risk environment	Occupational health risk assessment reports. Updated operational and risk registers. Emerging infectious disease screening & alerts.	All OH risk made known through organisational structures as it presents	Most OH risk made known through organisational structures as it presents	Most OH risk anticipated early through organisational structures
	Nil adverse clinical events	Quarterly/ Annual reports	0% adverse events	0% adverse events	0% adverse events
Strategic objective 5: Reputation management					
KPA 5.2 Results realising and collegial leadership approach	Values-driven staff	Staff performance ratings	Average of 4	Average of 3.5	Average of 4
Strategic objective 4: Student, staff; visitor experience					
KPA 3.5 A safe and secure environment	Occupational health risk exposure prevention and control in the teaching and learning environment	Occupational health risk assessments OH risk register Mitigation consultancy	0% occupational disease	0 % occupational disease	0% occupational disease

37. EMPLOYEE PROFILE

The OHP reports to the Registrar's portfolio via the Health & Wellness Division. The strategic and operational core is at APK. From here clinicians at each campus are guided and enabled to attain campus equivalence and accessibility. Professional nursing practitioners at APK, APB and a shared position for DFC and SWC deliver an accessible programme to UJ employees and those at risk on UJ premises.

An Occupational Medicine Practitioner attends the OHP one day per week and in accordance with the legal provisions of the clinic permit.

A radiation expert (physicist) was appointed as the UJ Radiation Protection Officer. He assumes responsibility for acquisition, waste disposal and monitoring of radioactive sources/practices. This Practice conducts radiation medicals to register radiation workers, periodic assessments and continuous monitoring of exposure. Radiation incidents and investigations are managed jointly.

An administrative assistant and one student assistant provide logistical support.

Eight positions are associated with the OHP: four permanent, one independent contractor and three temporary positions as reflected in table 6 below.

The population group equity profile of the Occupational Health Practice is aligned with the national African figure of 73.5% and the geographical figure of 76.1%.

Gender equity is understood in context of the 2012 national gender profile for professional nurses, which reflects a 1:9 ratio of male to female nurses.

Table 12: Occupational Health Practice employee profile

Black	White
3 (75%)	1 (25%)
Male	**Female**
0	4

Appointments, resignations, deceased succession planning

The staff complement has remained stable except for the one professional nurse who left UJ in March to further her career. The new incumbent commenced employment on 1 July 2013.

It should be noted that the shared position for DFC and SWC prohibits full-time access to the service at the two campuses. DFC requires 80% of the attention and time of the OHNP. In addition, the recent DFC upgrades have further enlarged the nature and scope of the OHNP's work and in future this will have to become a full-time position, while retaining the current shared post.

No vacancies exist currently.

Staff development initiatives and progress, qualifications of staff and staff engaged in study

All nursing professionals are in possession of Dispensing Licences. One professional nurse has commenced her B.Cur et Admin study at UJ. The Head of this Division is nearing submission of a dissertation for a Master's in Nursing Science through Unisa.

Other applicable information

The nature and scope of service delivery is highly adaptable to UJ need and risk. In addition, new research and adapted processes result in continual health risk assessments with varying client bases. The DFC reconstruction project has also enlarged the physical area of responsibility.

The Practice has, since inception, only been able to address Occupational Health Risk by priority due to low human resources capacity.

The UJ ratio *OHNP*: FTE staff is 1:2409* while the industry norm is 1:500. Every possible effort is dedicated to attain optimum service delivery despite the shortfall.

* OHNP = Occupational Health Nursing Practitioner.

38. COMMUNITY SERVICE, STAKEHOLDER ENGAGEMENT AND REPUTATION MANAGEMENT

Community service

In the light of lean resources, clinic permit requirements regarding the scope of work and clientele, no professional service can be delivered to the community. This Practice, however, fully supports Mandela Day initiatives annually.

Stakeholder engagement

Internal stakeholder engagement reports/initiatives

- Protection Services
- Primary Health Care
- Occupational Safety Department
- PsyCaD
- Unit for Quality Promotion
- Biokinetics Clinic APB
- SMEs

Protection Services are first responders to medical emergencies on site and may consult us if required. Daily transport of patients to and from hospitals is taken care of. Collaborative Event Risk planning and co-ordination at all official academic and cultural events exist. Ambulances are provided with medical disposables, oxygen and monitoring/defibrillating equipment. The OHP recruits medical responders for the annual Basic Life Support (BLS) Course to keep clinical skills updated in accordance with SA Resuscitation Council protocols and the HPCSA Scope of Practice.

The Primary Health Care colleagues share space with this Practice at the Campus Health clinics, e.g. the dispensary, reception area and emergency room. The Occupational Health Practice provides emergency equipment, drugs and Medical Management Guidelines. Annual BLS training is facilitated for PHC and OHP professional nurses.

The Occupational Safety Department are regularly briefed on safety risk findings resulting from formal Health Risk Audits. The Department is consulted where overlap occurs during process planning, incidents and risk assessments. Collaboration exists regarding injuries-on-duty: the OHP manages acute medical interventions and completes documentation to refer the patient to a hospital, and the Safety Department takes care of the processing of documentation.

PsyCaD delivers a service to employees who are referred to them for exposure to distressing occupational stressors. In acute incidents, PsyCaD works hand-in-hand with this Practice to ensure the best outcome for acute emotional trauma.

The Biokinetics Clinic at APB supports members of the UJ Resilience Programme with assessments and exercise facilities.

Subject matter experts are freely consulted; Dr Amina Nel provides valuable interpretation of water quality analyses.

External stakeholder engagement reports/initiatives

- Occupational Hygienists
- National Institute for Occupational Health (NIOH)
- Netcare 911
- City of Johannesburg Events Management Forum, Environmental Health Division, Disaster Management Forum's Health Subcommittee ad Public Health Department
- National Institute for Communicable Diseases (NICD)
- LTL Food Hygiene Auditors
- Department of Health: Communicable Diseases Division, Directorate Radiation Control and National Laser Centre

- SA Society of Travel Medicine
- FIDDSA (Infection Control body)
- Discovery Health
- International SOS
- Centres for Disease Control (CDC)
- World Health Organisation (WHO)

Occupational Hygienists are auditors of health risk at UJ.

The NIOH is a national research body on Occupational Health and assist us in analyses of water.

Netcare 911 is contracted to deliver medical standby for events and dedicated, priority response to medical emergencies at all campuses. Annual training is provided as per UJ contract and American Heart Association standards.

The City of Johannesburg's (COJ) Event Management Forum is consulted in event risk planning in accordance with the Safety at Sports and Recreational Events Act. This Practice also serves on the Health Subcommittee of the COJ's Disaster Management Forum, at which an approved collaboration exists, namely, the availing of SMEs, UJ's disaster room, psychological services and residences in case of disaster. The COJ Environmental Health Department made contact with us after inspections to food premises and their Public Health Department during a localised outbreak of meningitis.

The NICD advises on medical guidelines in disease outbreaks, while receiving throat swabs from UJ as part of the Viral Watch Programme.

LTL conducts four rounds of Food Hygiene auditing per annum at all UJ food outlets.

The Department of Health's Communicable Diseases Division would be the contact point for notifiable diseases, the Directorate of Radiation Control in case of radiation inspections or incidents and the National Laser Centre in case of emergencies or enquiries regarding lasers at the Photonics Laboratory.

The SA Society of Travel Medicine provides professional and medical guidelines, travel alerts and case studies, and FIDDSA keeps us in touch with Infection Control developments.

Discovery Health and the International SOS were collaborators during a medical casualty evacuation of a student.

The Centres for Disease Control and World Health Organisation are frequently accessed for international trends in disease outbreaks, travel safety and International Health Regulations, which govern Yellow Fever requirements internationally.

39. RESOURCE MANAGEMENT AND SUSTAINABILITY

Finance management

Expenditure occurs within the two budgets allocated. Eighty-three per cent of the operational Occupational Health budget and 95% of the operational Executive Resilience budget had been spent by December 2013. An average expenditure of 89% occurred against both budgets. It should be noted that both cost centres involve, other than planned cost, a discretionary approach with expenditure, governed by emerging need or health risk.

Environmental sustainability

Environmental sustainability efforts include full support of UJ's waste management and recycling initiatives, by conscientious use of utilities and ensuring that medical/biohazardous waste derived from clinics and the ambulance are disposed of correctly. Recommendations on correct disposal of hazardous chemical substances and radioactive waste are advised and effected where required, e.g. after spillages or incidents.

At the clinics, we recycle cartridges, paper and batteries, limit printing, print on both sides and switch off the lights and PCs at night.

40. LEADERSHIP

Local/national stakeholders

Local involvement with the City Council's Disaster Management Forum has resulted in formal collaboration. Extensive contact and bilateral liaison occurs regarding event risk management, public health threats and food safety.

Networking continues with colleagues at other HEIs including UKZN, UCT, US, NMMU, the University of Venda, Tshwane University of Technology and Monash SA.

The SA Society of Occupational Health Nursing Practitioners appointed the head of this Practice to lead the Hazardous Chemical Substance regulations re-writing project on behalf of the society.

Dr Dazme Mavunda (UJ Radiation Protection Officer – appointed on contract) is supervising two Physics Master's students.

International stakeholders

The Institution for Occupational Safety and Health (IOSH), which is UK based with a global footprint, invited HEIs to participate in raising the professional profile of health and safety practitioners in South Africa. UJ attended, gaining valuable insight into global trends from the round table discussion.

Dr Dazmen Mavunda has been approached by the International Atomic Energy Agency (IAEA) to serve on its panel of radiation experts in Africa. He holds nominated chairpersonships for the Advisory Committee for Industrial Physics at TUT and for e-learning at the African Radiation Protection Association (ARPA).

41. CONCLUSION AND WAY FORWARD

Summary of portfolio performance

- The balanced scorecard targets of the Occupational Health Practice have been reached or exceeded despite lean human resources (only four permanent positions). Dedication to UJ and colleagues, the addition of external resources and temporary appointments has, however, yielded a rich result.
- Additional targets, as prompted by untreated risk and legal requirements have been adopted to encompass full accountability.
- The essence of UJ's Occupational Health Risk profile is understood. Risk is audited by priority and is relative to resources to conduct assessments.
- UJ's legal duty to conduct Health Risk Assessments and execute Medical Surveillance is taken care of. Additional value is gained from an array of programmes to create a safe and healthy environment for the employee and go beyond, as reflected in strong client satisfaction.
- Benchmarking and positioning within the U21 group is underway, with contact among peers in the Health Sciences sub group.

Key targets and initiatives in the short, medium and long term

Short term

- tuberculosis proofing of Health Care professionals at UJ clinics and students at FHS: awareness campaign, meeting stakeholders to introduce fit testing for personal protective respirators and introducing a system to avail N-95 respirators to students;
- progress with training of UJ stakeholders in medical response at all campuses in accordance with medical triage plans.

Medium term

- keeping track and participating in the safe implementation of license specifications to handle, store, use and transport natural uranium for Geology and Physics;

- enabling the establishment of a UJ chemical inventory which will assimilate hazardous chemical substances (HCS) used at every division and linked to spillage and emergency procedures;
- feedback to Chemistry Department of the master's study on the use and management of HCS at a chemistry department undertaken in their environment.

Long term

- conduct further research on management of HCS (PhD) and publish in accredited journals;
- expanded national and international networking and collaboration, focusing on U-21.

SECTION E3: PRIMARY HEALTH CARE

42. OPERATING CONTEXT, GOVERNANCE AND RISK MANAGEMENT

Introduction

Primary Health Care Service is one of the Health and Wellness divisions, reporting to the Registrar. The function of the Primary Health Care (PHC) service unit is guided by the Charter for PHC and operates under the Core Standards for Primary Health Care, as directed by the National Department of Health (NDoH). A PHC practice is available on all four campuses and comprises of Primary Health Care Nurse Practitioners, Administrative Assistant/s and an HIV/AIDS Counsellor. A minimum of two nurses is available at each clinic. The medical doctor is employed on a sessional basis and is available on specific days at each campus. The clinic primarily focuses on student health, but staff, contractors and visitors are attended to when in need.

A fully functional PHC practice exists on all four campuses. Services rendered are:

- Primary Health Care;
- HIV and TB counselling and testing (HCT);
- reproductive Health Care;
- travel medicine to students;
- medical support (Netcare 911) at UJ Sports events;
- provision and maintenance of first-aid kits to UJ Sports clubs;
- vaccination programmes as required and according to risk assessment;
- supporting the management of HIV/AIDS patients;
- emergency medical care at the facility.

Governance

The Head of PHC is a member of several University committees. She is a member of the HIV/AIDS Committee, the Wellness Committee and the Primary Health Care Committee. All committees meet on a quarterly basis. A forum called the Risky Student Behaviour Forum meets on a need basis and members report on their activities that respond to risky behaviours students engage in. The PHC Committee is headed by the PHC Manager, operates under the PHC Charter and comprises of the PHCNPs, Health Clinic Manager, a representative from PsyCaD and a manager from UJ Sport. From the committee, several policies and standard operating procedures such as those for pap smears have been put in place. On an ad hoc basis, staff such as the Head of the IOHA Office will be invited when there is a need for intervention that requires their expertise.

The Division focuses on student health regarding maintenance of healthy lifestyles, prevention of disease, management of identified illnesses and health awareness campaigns. A minimum of four major campaigns is held annually to respond to the health needs of the students. One of the major campaigns focused on was the sexually transmitted infections (STIs) and Condom Use Awareness Week. Risks include the repeated incidences of STIs presenting at the clinic, unplanned pregnancies, emergency contraceptives and the potential for HIV infection in these groups. The risk is mitigated by treating those diagnosed, providing contraceptives at all times and providing the "morning after" medication on request. Condom use is promoted at all times.

Potential for tuberculosis infection is standard for health facilities. The installation of ultraviolet lamps was done to reduce the possibility of clients being infected by undiagnosed TB patients. Good ventilation and booking patients has proved successful in avoiding overcrowding in the clinic space.

Outbreak of communicable diseases is an ever present risk and mitigation is done by immunising against those that are prevalent and giving health information on the prevention thereof. The challenge regarding the access to students is that not all students are reached. Improvements for the future include active participation in the Orientation Committee and having sessions with students in a broader context.

43. STRATEGIC FOCUS AND TARGETS

In 2013, the PHC service aligned their strategic focus with the following strategic thrusts:

Thrust 5: A brand for UJ that identifies it with relevant, accessible and excellent higher education. This was achievable by:
• providing quality Primary Health Care Service to employees, students and visitors of the University;
• establishing relationships with national and international institutions through our relationship with the South African Association of Campus Health Services (SAACHS);
• recognition and participation of Primary Health Care Practitioners at national and international conferences;
• making use of UJ marketing in health promotion campaigns.

Thrust 6: Leadership that matters, in the institution and civil society. This is achievable by implementing the following:
• taking a leadership role in Primary Health Care matters within the UJ community;
• ensuring efficiency of our service by monitoring the client satisfaction survey on a quarterly basis;
• effective use of resources aimed at reducing costs yet providing quality Health Care;
• following the institutional culture of collegiality and being ethical in the management of patients in our care.

Thrust 8: Resources that enable UJ's fitness for purpose, support the achievement of the primary thrusts and facilitate a responsible and responsive institutional citizenship. This possible by:
• employing appropriately qualified PHC practitioners with dispensing courses/licences;
• applying for the dispensing licence for all Primary Health Care practitioners;
• providing an opportunity for staff to obtain specific training in their respective area of excellence.

The performance of the service was focused on the following targets:
• Focus on HIV counselling and testing (HCT) to increase the uptake among students and staff by 10%. The total number of clients tested for HIV was 3 637. The 10% increase was not achieved as envisaged. This could be attributed to the low numbers of students willing to be tested. With this realisation, new interventions regarding more involvement with residences are planned in the year 2014.
• The satisfaction survey across all clinics had an average of 86%. This is adequate considering the number of clients seen at the clinic. The compliments ranged from "keep up the good work", "a professional service" and many more aspects that indicated appreciation for the service offered. Complaints came in the form of more services being required in the clinic, problems with the booking system and requests for sick notes. Other complaints that related to improving the system and friendliness of staff were attended to in staff meetings. Individual complains were addressed with specific individuals.
• Reports on adverse medical events were maintained at 0%. This relates to proper history taking and correct prescription of medication to prevent further complications.
• Continuous professional development for all staff members was ensured in the form of attendance of conferences by PHC practitioners and the HCT counsellors, in particular the sixth SAAIDS conference that was attended by the Manager, PHC Practitioner and two counsellors. The conference pointed out the low rate of HIV testing among the adult males in South Africa. One counsellor and two PHC practitioners attended the ICASA conference focusing of HIV/AIDS, sexually transmitted infections and tuberculosis in Africa. Administrative staff attended in-house training offered by the Human Resource Department.
• Increased awareness and focus on pap smears and TB testing for HIV-positive patients. This project has improved immensely as the referral system of diagnosed HIV-positive clients is monitored for development of opportunistic infections and referred appropriately. The challenge is that students can opt not to use the clinic for further management and the likelihood of 'losing' them in the system is increased. It is envisaged that with use of the electronic recording, we can trace them and follow up on their well-being.
• The upgrading of the DFC clinic has not commenced yet. The process has been slow as there is still no finality regarding the movement of the current occupants of the identified space for the clinic. The plan for the new clinic has been approved but construction has not commenced yet.
• Sustainable health education programmes in partnership with student organisations. This has been

achieved in conjunction with stakeholders such as SRC, PsyCaD, IOHA and peer educators attached to the HR Wellness Division. Several campaigns were implemented and attendance by the students was good in that an increase in enquiries and consultations was observed. Awareness campaigns included the STI/Condom Week, sexual health awareness, drug and alcohol abuse, TB Month and Breast Cancer Month.

The number of patients consulted at all our clinics amounts to 27 536. This includes staff, students, contractors and visitors. It is noted that more females make use of the service in comparison to males. The same trend is also observed in the HIV testing service. APK also indicates that there are more clients using the facility; this is in line with the student registration numbers across the University. The challenge of shortage of staff has improved, hence the increase in consultations. A locum PHC nurse is used at the Soweto Campus for two days a week to meet the demand of increasing student numbers on the campus. The strategic objective is to have an additional nurse for a full five days per week. Another PHC nurse is currently working four days at APB and one day at SWC. The objective is to place her at APB for five days a week.
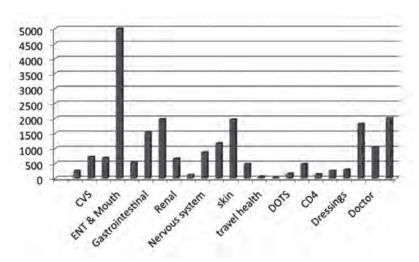

Figure 17: Common conditions treated at Primary Health Care

The incidence of respiratory and ENT conditions is high within the University. The management is done according to the Standard Treatment Guidelines of the National Department of Health, as indicated by the World Health Organisation. According to the HEAIDS Strategic Plan, we have to manage HIV-positive clients in our facilities as far as possible. The University of Johannesburg is currently providing preventative care and support to HIV-infected patients. CD4 count levels are monitored twice a year and when indicated at no cost to the client. Pap smear tests are done annually at no cost as well to HIV infected patients. HIV-positive patients are provided with influenza vaccinations to prevent or reduce the possibility of having respiratory diseases due to a compromised immune system. A total of 79 flu vaccines were administered to vulnerable students at no cost to them. The strategic objective is to provide influenza vaccination to all students at a low cost so as to reduce the incidence of upper and lower respiratory conditions as observed in the graph above.

Table 13: Reproductive Health Services at UJ

Campus	HCG -	HCG+	TOP	EC	STI	FP
APK	398	128	65	70	525	3 733
APB	274	83	48	52	256	1 620
DFC	130	50	12	37	347	1 069
SWC	331	115	39	73	425	1 363
TOTAL	1 133	376	164	232	1 553	7 785

Table 13 indicates the use of Reproductive Health Service at all four clinics. The rate of pregnant students is high as indicated in the HCG+ column. The TOP column refers to students referred to private and public health centres offering medical surgical termination of pregnancy. Patients are referred to PsyCaD for counselling during the period where they choose to keep or terminate the pregnancy.

Sexually transmitted infections remain a challenge among the population using our services. Treatment and education is offered by PHCNPs and partners are also encouraged to get treatment at the nearest health centre or our clinic if they are students or staff. The challenge can be attributed to partners not being treated for the STI, hence reinfection occurs. Clients are also encouraged to do VCT/HCT after consulting with the sister. The sexual health awareness campaign was held in conjunction with PsyCaD, IOHA and the SRC with the aim of reducing the prevalence of STIs. Students needing family planning methods do not have to book an appointment. It is a walk-in service. Priority is also given to emergency contraceptives. There is a dedicated nurse at APK who attends to family planning clients. In other campuses, FP is incorporated with PHC service. The STI/Condom Week campaign is one of our efforts to bring awareness to students about prevention strategies.

The STI/condom week campaign was successfully held at all four campuses with HCT counsellors taking the lead at providing health education. The PHCNPs also took turns at the gazebos to encourage participation and in the question and answer sessions. In that week the APB PHCNP represented the clinic by giving information on STIs at the UJFM radio station. The session indicated that more needs to be done to encourage safe sex practices.

**Figure 18: George Boyce (HCT Counsellor) teaching students
attending the STI/Condom week campaign**

The month of October was dedicated to breast cancer awareness to follow the national health calendar. Our staff, together with the RAG committee, embarked on a joint venture to support the Ithemba Walkathon. This is a marathon walk to raise awareness and funds towards the care and treatment of breast cancer in South Africa. We also had free breast cancer screening sessions for both staff and students provided by Sure Touch. The purpose of the electronic device used to screen is to identify abnormal masses on the breast tissue. Clients with abnormal tests were referred to the hospital for more in-depth testing such as mammograms and ultrasonography.

Health education sessions were held at all the Campus Health Service clinics. The PHC staff embarked on an annual strategic planning session that was held at Amakoekoe conferencing venue. Presentations by clinic managers were done by highlighting the achievements, challenges and opportunities for each facility. This was followed by identification of new projects for the future as indicated in our strategic focus from 2014 to 2020. The Health-One Electronic Patient Information Recording System was introduced to the staff members and is in the pipeline of being implemented in 2014.
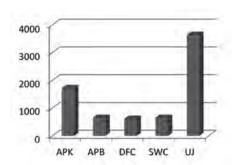

Figure 19: Annual HIV testing at UJ Campus Health Service 2013

Table 14: Comparison of HCT from 2009 to 2013

	2009	2010	2011	2012	2013
Male	987	807	1 223	1 245	1 319
Female	2 034	1 752	1 850	2 409	2 318
Total	3 021	2 559	3 073	3 654	3 637

A total of 3 032 clients have tested for HIV in the period January to September 2013. Only 58 have tested positive. That is a prevalence rate of 1.6% for the UJ community that has used Campus Health's HCT services for HIV testing. Those who test positive are referred to a support group that is run in conjunction with IOHA and PsyCaD. Campus Health has had support from PsyCaD with the provision of intern psychologists to do pre- and post-HCT counselling. This is done on all campuses except SWC as the numbers did not warrant extra personnel. The strategic objective is to add an additional counsellor to increase awareness and to ensure campus equivalence. The HIV-positive students were advised to come in for vaccination against the prevalent Influenza virus for free with funding from the HIV Committee and Primary Health Care's budget. This is another measure to promote optimum health in students infected with HIV.

Strategic Objectives 2014 to 2025

The strategic focus of PHC is aimed at supporting the students in their living experience within the University. This is in support of the UJ 2014 to 2025 Strategic Objectives.

- Strategic objective four: An enriching student friendly learning and living experience.
  - Campus Health Service supports this objective by aiming to provide excellent primary Health Care according to the standards determined by the National Department of Health.
- Strategic objective five: National and global reputation management
  - The objective is supported by stringent risk identification and mitigation thereof within the medical management of patients, therefore eliminating risk of injury to patients.
- Strategic objective six: Fitness for global excellence and stature
  - This is achievable by ensuring good governance in relation to human and financial resources to ensure sustainability of the service, while taking care of the environment locally and globally.

Strategic objectives and targets for the period 2014 to 2016

- Acquire and implement the Medemas-HealthOne Patient Electronic Management System and have paperless documentation within the next 12 to 18 months.
- Participate in the departmental quality review. The objective is to identify areas of excellence and to improve on areas of weakness.
- Maintain a 0% rate of medical events.
- Achieve a 5% increase in HIV counselling and testing.
- Engage with residences to upscale health awareness, including HIV testing.

- Maintain a high client satisfaction rate of 85% and above.
- Commence as down referral site for anti-retroviral mediation in conjunction with Right to Care and the Crosby Clinic as starting points.
- Facilitate a referral system for voluntary medical male circumcision (VMMC) by creating partnerships with local sites approved by the DOH such as Khula Ndoda based at Chris Hani Baragwanath Hospital.
- DFC Clinic to be compliant with NDoH requirements. The building and relocation of the Campus Health Clinic will ensure appropriate management of patients and facilities that are conducive for a university with global stature.
- Ensure a minimum of two PHCNPs at each campus clinic by motivating for a new position so as to meet the demand brought on by increasing student numbers.
- Become a member of the International Student Support Services Association with the aim of participation in sharing expertise and best practice.

Targets for 2020

- These will be the continuation of the achieved targets with an addition of a full-time medical doctor to consult with patients on a daily basis.
- Focus on diseases of lifestyle in response to the disease profile in South Africa. This includes a consulting Nutritionist to curb the nutritional deficiencies of malnutrition.

Employee profile

The manager and six PHC nurse practitioners are on permanent appointments, with two practitioners on temporary positions. The manager is an African female; seven PHCNPs are African, one is Indian and one is white. One PHC nurse is on a contract basis from the Unique Nursing Agency; she is Indian. The service makes use of the Unique Nursing Service agency to source nurses when there is a need such an absence due to illness or for training purposes. Five administrative assistants are female; with one being coloured and four Africans. All administrative assistants are permanent staff members except one who is on a three-year contract. Four HCT counsellors are on permanent positions, of whom two are female and two are male. There are no vacant posts in the division. Positions of administrative assistants for APB and DFC were filled as of 1 June 2013.

The manager, in consultation with the Human Resources Department, is planning a motivation to retain the nurses on temporary positions as there is a permanent need for their expertise. The service provided is essential to the strategic objective of excellence and stature in providing PHC to students and staff.

All PHCNPs have attended at least one national conference according to the divisional skills plan. Three counsellors attended the HIV and TB conferences with the administrative assistants attending in-house programmes as provided by the Human Resources Division within UJ. The manager has attended the Implanon NXT Sub-Dermal Contraceptive Device Training provided by NDoH, for implementation in 2014. Two PHCNPs have registered for their Master's degree in Nursing, focusing on primary Health Care. One PHCNP presented her proposal at the Health Sciences Nursing Research Forum. The manager and one PHCNP have successfully completed Research Methodology with the UJ Nursing Department; this is a requisite before progressing to register for a research project.

44. COMMUNITY SERVICE, STAKEHOLDER ENGAGEMENT AND REPUTATION MANAGEMENT

Internal stakeholder engagement

- The Primary Health Care Service works closely with IOHA, the Wellness Division, Occupational Health Practice, PsyCaD, Student Affairs and Sports.
- A close relationship between Occupational Health Practice and Primary Health Care Service is an essential one. Efforts to strengthen the relations have been achieved by having regular meetings that are aimed at ironing out aspects that are related to improving service delivery.
- The Campus Health Service, IOHA, PsyCaD and Dr Pieter Els form the Prevention, Care and Support component of the Institutional HIV Policy Rollout Framework Plan.

- From the strategic planning session held by the HIV Committee, Primary Health Care has committed to specific clinical interventions to support the infected patients. The report is done quarterly.
- HCT counsellors have formed part of the Peer Educators, which is run by the HR Wellness Division. They aim to be champions of health awareness programmes in their units. They attended a four-day training session aimed at improving access to their peers related to health problems.
- Intern psychologists from PsyCaD assist Primary Health with HCT daily at APK and at DFC and APB campuses only on Tuesdays. This has been increased to four days a week at APK. This has resulted in a slight increase in the total number of patients testing for HIV at the PHC clinic. We are currently looking at the possibility of including an additional intern for SWC in the third term.
- Campus Health and IOHA held the STI/Condom Week Campaign in February to promote the use of condoms and educate about sexually transmitted infections. The campaign was successful because more students reported to the clinic with symptoms of sexually transmitted infections.
- The Corporate Governance Department presented an information session for Campus Health Service staff on the Protection of Personal Information Bill, which is aimed at improving and protecting sensitive information within our Department.
- The campaign that was done in collaboration with PsyCaD, the SRC, IOHA and PHC was aimed at raising awareness regarding drug and alcohol abuse and to promote safe sexual relations among all. It was called "My life, my body, my decision. Most stakeholders supported the campaign, which was evident by the good turnout.

External Stakeholders

- CHS has established a reputable and sustainable working relationship with the local authority clinics as well as the Gauteng Department of Health. We receive medicine supplies, HCT testing kits, condoms, educational materials etc. from them. These are provided on a monthly basis with the number of HIV tests done at the Service.
- HIV coordinators from the City of Johannesburg receive monthly HIV statistics from Campus Health in order to determine the rate of HIV-positive patients in the region.
- UJ campus clinics support the Local Authority clinics in providing directly observed treatment support (DOTS) to students and staff of the University who are treated for TB. There are currently four patients on DOTS at APK and APB campuses.
- Other stakeholders include Thembalethu Clinic, Chris Hani Baragwanath Hospital, the Hillbrow Community Health Centre and Garden City Clinic for anti-retrovirals and treatment of other HIV-related illnesses. Thembalethu has established a youth friendly service held once a month to cater for young HIV-positive clients. This service is used optimally by referring students and staff as they receive specialised care by health professionals.
- Milpark and other Netcare hospitals, together with UJ Sports and Campus Health expertise, give special attention to students with sporting injuries.
- The NHLS has agreed to collect blood samples from the Soweto Campus and the Doornfontein Campus for laboratory testing.
- The NHLS has granted PHCNPs access to obtain blood results directly from the laboratory. The process still has challenges that are being resolved by the laboratory.
- A relationship has been forged with IPAS, a non-profit organisation focusing on reproductive health and the right for women to choose methods of contraception.
- The DOH has offered training to nursing staff on nurse initiated anti-retroviral therapy (NIMART) for HIV-positive students. Further training is envisaged for the year 2014.
- GSK Aspen provided an information session on the prevention of cervical cancer through vaccination. Future projects are planned, particularly focusing on HIV-infected female students and staff.
- IPAS provides continuous support in reproductive health matters.
- Health for Men provides specific support on male-to-male sexual matters. They provide condoms and lubricants at no cost.
- Crosby Clinic remains in support of the UJ Primary Health Care Service and that has been maintained throughout.

The referral of students needing ART and to shorten their time away from lectures has been maintained.

- HEAIDS launched a voluntary medical male circumcision drive under the leadership of the Minister of Health. The manager attended the session. The University of Johannesburg supports the programme fully by continuing to encourage circumcision in partnership with local providers.
- Primary Health Care supported the Department of Health's initiative to provide HCT during the Gauteng Premier's visit to the University. The HCT was not as successful as there was a concurrent HCT campaign led by IOHA that was being implemented at the same time.
- In celebration of Mandela Day, PHC staff, in conjunction with the Office: People with Disabilities, engaged with Helen Joseph Hospital's Audiology Department to do free hearing tests for staff and students.

45. RESOURCE MANAGEMENT AND SUSTAINABILITY

Financial Governance

- The division operates a budget set at four cost centres, which reflects the clinics at UJ's four campuses. The combined operational budget allocation for the four cost centres is R7 713 280.02. Ninety-one per cent of the operational budget was used. Some of the equipment could not be sourced as was budgeted for. This relates to the DFC Clinic that did not materialise in 2013 as initially envisaged.

Environmental sustainability

In accordance with best practice, Campus Health Service has embarked on the following activities to reduce the carbon footprint:
- awareness among staff members to reduce the usage of paper, avoid non-essential printing of documents and ensure printing is done on both sides;
- communicating via email instead of printing out hard copies;
- recycling of cartridges, paper and batteries;
- eco-friendly fridge at APK;
- clinic lights are switched off over night and over weekends to reduce power usage;
- the correct disposal of hazardous and non-hazardous waste; medical waste disposal is managed by an accredited medical waste company (Budget Waste).

46. LEADERSHIP

- All PHCNPs belong to the South African Society for Travel Medicine. Practitioners have access to the latest Travel Health and communicable diseases information.
- PHCNPs also belong to SAACHS. They have a publication called In Corpore Sano, where members can write about any activities at their campuses/clinics that can be shared with their colleagues at all other universities countrywide.
- Promotion of the University is also done during orientation. In the month of September, orientation was also done to prospective nursing students and parents. Here we sell our service and the University.
- Participation in the yearly event of UJ Open Day.
- First-year Buzz took place at different campuses at different days. PHC Service took an active role in the orientation sessions. The purpose is to inform the first-year students about the services we have at our clinics
- The manager held a session with the PsyCaD interns before they commenced with their duties at different clinics. The purpose was to give basic information about the HIV testing process and the expectation the clinic has of them.
- The DFC PHCNP was also invited to address the Health Sciences students regarding the role played by the clinic in the care of students in general and them in particular. She also presented a paper on Research Day hosted by the Nursing Department. The paper was part of her research that investigates the level of knowledge students have on contraceptives when they come into the University.
- Visible medical support for the UJ Varsity Rugby Cup games played at the UJ stadiums was provided. Support is also offered to other sporting codes.

- The manager was invited by both IOHA and Student Affairs to be interviewed as a stakeholder in the divisional quality review process. The purpose was to express the relationship between the departments regarding areas of excellence and those that needed improvement.
- The manager hosts international students invited by the International Office for a session on the service UJ offers regarding health matters, with focus on regional disease profile and the prevention thereof.
- PHC contributed an article to the 2013 Reflextions publication by IOHA, highlighting the contribution the service has on HIV/AIDS.
- The manager was trained on the administration of the Implanon NXT sub-dermal contraceptive device, which will be introduced in 2014. This is aimed at reducing the incidence of unplanned pregnancies among female students.

47. CONCLUSION AND WAY FORWARD

In 2014, the objective is to engage with the students on various health campaigns to improve awareness of challenges regarding their wellbeing; in particular the residence programmes to be involved in campus health's awareness campaigns. Another objective is to recruit students to be health ambassadors among their peers and take an active role during our campaigns.

The successful evaluation of our services in the quality review process under the guidance of the Unit for Quality Promotion is planned for. Implementation of the electronic patient recording system (HealthOne) will be rolled out at all clinics. The challenge of relocating the DFC Clinic is expected to be resolved by the end of the year.

The service continues to focus primarily on the wellbeing of students and ensuring that current challenges of risky behaviour are reduced. Maintaining a client satisfaction at 85% remains at the core and increasing the HCT by 5% annually and getting residences involved in health awareness programmes remain a priority. The rate of unplanned pregnancies will be curbed by implementing the new contraceptive device offered for free at all Campus Health Clinics. This is inserted once every three years.

**Figure 20: Prof Marie Muller, Registrar and
Prof Ihron Rensburg, Vice-Chancellor and Principal**

VC and Executive Deans at the extended Call Centre

The extended UJ Call Centre

The extended UJ Call Centre

Prof Marie Muller

**Prof Marie Muller, Eugene Bascerano
and Magdel Duvenage at the
University College Dublin**

**Eugene Bascerano, Magdel Duvenage and Prof Marie Muller
at the Hong Kong University of Science and Technology**

**Prof Marie Muller and Magdel Duvenage at the
Hong Kong University of Science and Technology**

Appendix 1

ABBREVIATIONS, INITIALISMS AND ACRONYMS

ADAPT IT	Student System Vendor
AIDS	Acquired Immune Deficiency Syndrome
APB	Auckland Park Bunting Road Campus
APK	Auckland Park Kingsway Campus
ARPA	Africa Radiation Protection Association
ARS	Application Rating System
CAA	Central Academic Administration
CDC	Centres for Disease Control
CEP	Continuing Education Programme
CHE	Council on Higher Education
COJ	City of Johannesburg
DFC	Doornfontein Campus
DHET	Department of Higher Education and Training
DOTS	directly observed treatment support
EDRMS	Electronic Document and Records Management System
EE	employment equity
ELG	Executive Leadership Group
ERP	Executive Resilience Programme
FADA	Faculty of Art, Design and Architecture
FEBE	Faculty of Engineering and the Built Environment
FEFS	Faculty of Economic and Financial Sciences
FHS	Faculty of Health Sciences
FYE	First-year Experience
HCS	hazardous chemical substances
HCT	HIV counselling and testing
HEAIDS	higher education sector's HIV and AIDS Programme
HEDA	Higher Education Data Analyser
HEI	higher education institution
HELM	Higher Education Leadership Management Fellowship
HEMIS	Higher Education Management Information System
HEQC	Higher Education Quality Committee
HEQF	Higher Education Qualification Framework
HESA	Higher Education South Africa
HFAs	Heads of Faculty Administration
HIV	Human Immunodeficiency Virus
HOD	Head of Department
IAEA	International Atomic Energy Agency
ICS	Information and Communication Systems
IEB	Independent Examinations Board
iEnabler	Web-based Adapt IT Systems for Applications and Registration
Integrator	Student System
IOHA	Institutional Office for HIV and AIDS
IOSH	Institute for Occupational Safety and Health
ITS	Integrated Tertiary Software (Student System)
LGBTI	lesbian, gay, bisexual, transgender, intersex
LU	Language Unit

MAMS	Management of Marks System	**SFH**	Society for Family Health
MEC	Management Executive Committee	**SME**	small medium enterprise
MECA	Management Executive Committee: Academic	**SRC**	Student Representative Council
MECO	Management Executive Committee: Operations	**STI**	sexually transmitted infection
		STT	Systems Training Technology
MIS	Management Information Systems	**SWC**	Soweto Campus
NDOH	National Department of Health	**TB**	tuberculosis
NICD	National Institute for Communicable Diseases	**TUT**	Tshwane University of Technology
		TWR	Technikon Witwatersrand
NIOH	National Institute for Occupational Health	**UCT**	University of Cape Town
		UFS	University of the Free State
NMMU	Nelson Mandela Metropolitan University	**UJ**	University of Johannesburg
		UKZN	University of KwaZulu-Natal
NSC	National Senior Certificate	**UL**	University of Limpopo
NWU	North West University	**Unisa**	University of South Africa
OHNP	Occupational Health Nursing Practitioner	**UQP**	Unit for Quality Promotion
		US	University of Stellenbosch
OMP	Occupational Medicine Practitioner	**VMMC**	voluntary medical male circumcision
OREP	Occupational Risk Exposure Profile	**WHO**	World Health Organisation
PAIA	Promotion of Access to Information Act	**WIL**	work-integrated learning
		WITS	University of the Witwatersrand
PLHIV	people living with HIV		
POE	portfolio of evidence		
POPI	Protection of Personal Information Act		
PsyCaD	Centre for Psychological Services and Career Development		
PwC	PricewaterhouseCoopers		
QVS	Qualification Verification System		
RAU	Rand Afrikaans University		
RPO	Radiation Protection Officer		
SAACHS	South African Association of Campus Health Services		
SAAIR	Southern African Association for Institutional Researchers		
SANC	South African Nursing Council		
SAPS	South African Police Services		
SEC	Student Enrolment Centre		
Senex	Senate Executive Committee		
SER	self-evaluation report		