



Registrar's Portfolio ANNUAL REPORT 2017





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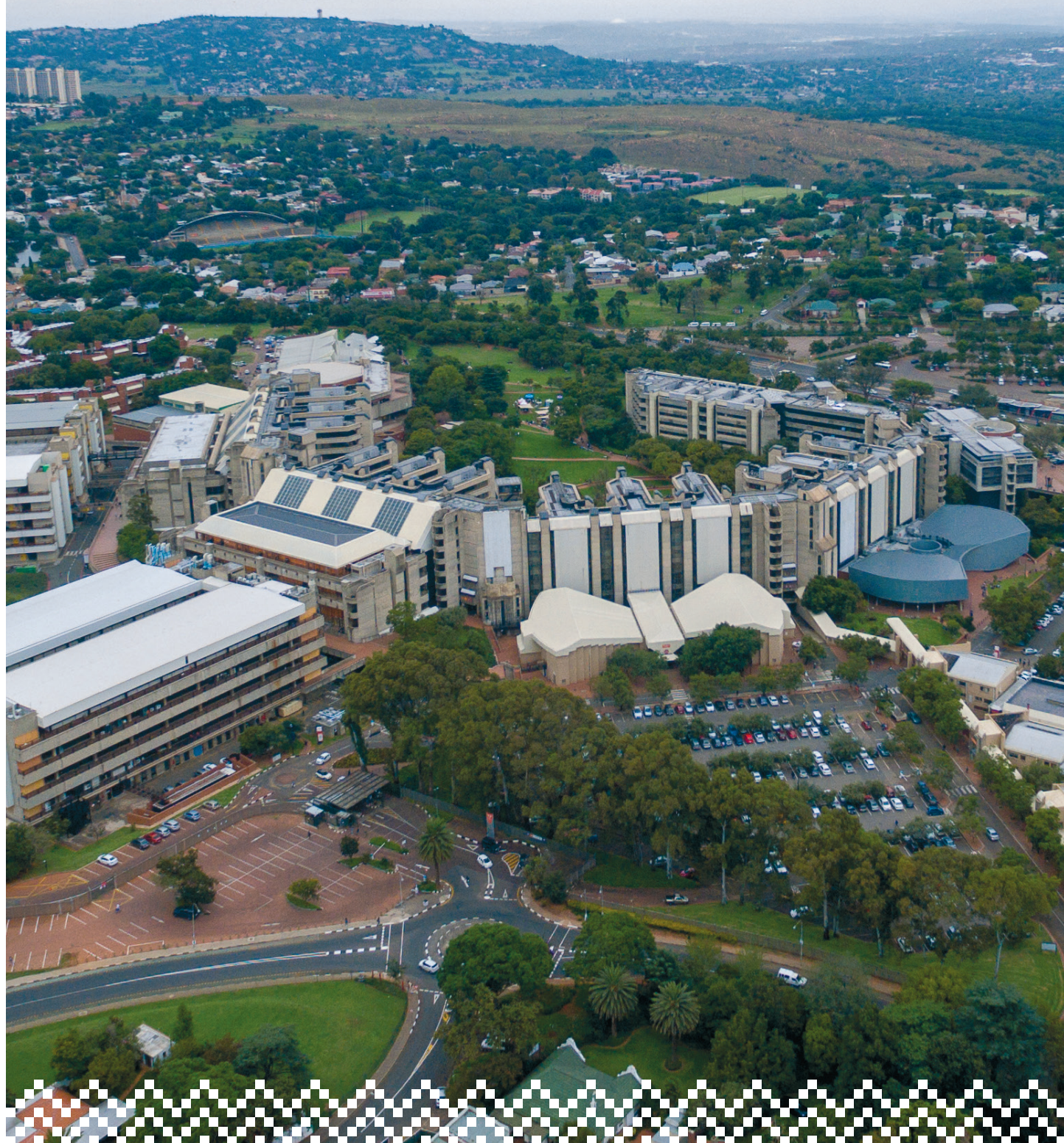





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REGISTRAR'S PORTFOLIO

Executive Summary



The Registrar's portfolio consists of the following divisions: (Central) Academic Administration (CAA), Central Administration, Corporate Governance, the Occupational Health Practice (OHP), Primary Healthcare (PHC), and the Institutional Office for HIV and AIDS (IOHA). The Registrar's Executive Committee (comprising the Heads of the six units) oversees the governance within the portfolio and meets monthly.

The primary focus of the diverse units that form the Registrar's Portfolio is on Strategic Objectives Four and Six: an enriching and student-friendly living and learning experience; and fitness for global excellence and stature. The units contribute to these objectives, on the one hand, through a focus on the health and wellness of students as a precondition to their academic and personal fulfilment as members of the UJ community; and on the other, through ensuring aspects of the quality underpinning an excellent academic experience. The latter contribution ranges from the quality of institutional governance, through the administration of the student life cycle to the operational quality of support units.

Beyond these two core strategic objectives, the units under the Registrar's stewardship also impact, in most cases rather less directly, on the other strategic goals of the University. In addition, increasing numbers of staff in these units are contributing research papers to national and, on occasion, international conferences. In short, the work of these units is focused on and underpinned by a strong commitment to the institutional strategic goals, and to the overarching goal of global excellence and stature.

Amendments to the UJ Statute, which was approved by Council in 2016, saw a reduction in the number of the members of Council – from 30 to 21. This revised Council composition was implemented in 2017, with Council approving the proposals of the University Secretariat on: (1) the principles for revising the composition of Council committees in line with the reduced Council composition, and (2) the proposed assignment of external Council members to serve on committees.

Identified risks from the various divisions are taken up in the Registrar's Risk Register and, where high risk is identified, ultimately in the Institutional Risk Register. The Registrar's Risk Register is assessed on a monthly basis at the Registrar's meeting with the heads of the various divisions. In light of the possibility of continued student protest actions in 2017, the register was revised, in particular with regard to the potential impact of such unrest on registration, examination and graduation processes.

The Registrar's portfolio comprises 129 permanent and fixed-term staff, of which 72,1% are from the designated groups. Seven new appointments were made during 2017 of which 100% were from the designated groups; and six members resigned in 2017; of the six, three members were from designated groups and three from non-designated groups.

Staff use the various opportunities for staff development, e.g. in-house and external programmes for skills development and participation in conferences. In addition, several staff are engaged in further studies, including master's and doctoral studies.

The entire portfolio is committed to transformation matters and a number of employees serve as transformation facilitators.

The operational expenditure for 2017 was 86,41% against a budget of R30 864 267.00.

In 2018, the portfolio focus will be on:

- Further enhancements of systems and processes to improve the security and effectiveness of our application, selection and registration processes, particularly in view of the likelihood of ongoing volatility in the HE system.
- Ensure system readiness for the continued successful roll-out of the online programme offerings.
- In collaboration with faculties, revision of rules that may contribute to barriers in students' progress and to dropout rates.
- Continuation of work pertaining to the evolution of statutory committees.
- Closing the gaps regarding compliance with UJ regulations and policies: enhancing awareness, training and monitoring, in the academic and support environments.
- Continuation of raising student awareness of risky student behaviours and their possible consequences, and further enhancing inclusiveness in our diverse student body.

In the following, progress and notable achievements as well as some future priorities are reported in summary format per division. More detail is provided in the attached reports from the various divisions.

CENTRAL ACADEMIC ADMINISTRATION

Applications

The University again promoted the use of the online application system by means of the No Application Fees Policy. A total of 96% of applicants applied online as opposed to 95% in 2016, 87% in 2015 and 11% in 2014, following on the introduction of the No Application Fees Policy. Applicants received an automated response (acknowledgement of receipt) after the submission of the application. Furthermore, the pre-screening of applicants against their Grade 11/12 results listed the qualifications for which the candidate qualified. Although applicants were still allowed to select any qualification of interest, this new pre-screening function gave applicants an early warning where they did not meet the minimum entrance requirements. Nevertheless, the number of headcount applicants rose from 172 666 in 2016 to 182 031 in 2017. A database of unsuccessful yet qualifying applicants was developed to use as a potential pool of applicants in case enrolment targets were not met.

The ID information of applicants was successfully verified electronically, which resulted in increased efficiency and cost saving. Only applicants whose IDs could not be verified were requested to submit a paper copy. The Call Centre software was also upgraded to provide UJ with the functionality of recording calls for legal purposes, like payment agreements before students were unblocked for registration, and to facilitate communication via an integrated live online chat client. A semi-automated selection programme was developed for undergraduate international applicants and implemented on 1 April 2017. Training was done and the system was handed over to the International Office for use. A separate landing page for RPL inbound and outbound applications was also successfully developed and implemented. These systems will be enhanced even more and promoted for use by all faculties in 2018.

To mitigate the risks related to late applications/walk-ins, the University did not allow any physical walk-ins during the week following the release of the Grade 12 results. 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. Furthermore, a dedicated application enquiry system,

accessible by means of mobile devices with Internet connection, was again utilised for late enquiries/applications. Applicants without Internet access could access information by means of an extended call centre or online chat facility. Immediately after the release of the NSC results, UJ calculated 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 by means of an SMS of their final admission status. The application statuses were also available on the UJ home page.

Registration

Given the potential for disruption of registration, comprehensive risk mitigation strategies were put in place, with an enhanced focus on online services. Over the past few years, Central Academic Administration (CAA) has made excellent progress with the implementation of online registrations and is considered a national leader in this domain.

- Only online off-site registrations were accepted. (Assisted on-site registrations decreased from 40% in 2015 to 15% in 2017.)
- More online services were introduced, e.g. for F7 appeals and special assessment applications.
- Strict access control at campus entrances was implemented, with security vetting stations to assist with enquiries.
- An extended call centre and online chat facility assisted with off-site registration.
- A student satisfaction rate of 85% (compared to 86% in 2016) was reached for registration.
- The academic record module on Integrator 3 was enhanced to include GPA rankings to enable the international conversion of results. This development was fully implemented in the first semester of 2017 and also included more information, like NQF levels.

UJ launched four online programmes at the end of 2017 and extensive system developments were made to facilitate the online registration model of six intakes a year. In 2018, several other online programmes will also be launched, and CAA will continue to develop and integrate systems to streamline and improve our online services.

Timetables

The Celcat timetable optimisation software, which was implemented in 2012, has been utilised for the optimisation of the DFC, APB and SWC lecturing timetable over the past three years. The re-optimisation of the assessment timetable for the period 2016 to 2018 was successfully completed for all campuses. Dynamic e-forms were implemented to facilitate timetable change requests. The re-optimisation of the APK lecturing timetable was postponed to 2018 due to system issues and resource constraints.

Assessment

The Management of Assessment Mark System (MAMS), as fully implemented in 2015, was enhanced in 2016 for semester and year modules. This system has increased the governance regarding marks significantly, and a central repository has been established to assist with the early identification of at-risk students.

Examination security

The biometric scanning of students in selected assessment venues on all campuses has been implemented. This system verifies the identity of the student and registration data against the student system. The system acts as a deterrent against examination transgressions. To enhance the integrity of assessments further, surveillance cameras were installed in large venues where the layout of the venue inhibits physical invigilation. Towards the end of 2016, it became clear, however, that the requisite technical support for this system was inadequate, and CAA investigated new service providers to support the function.

CCTV cameras have also been installed and are active in A Ring G01, G02, B Les 100 and B Les 101 to monitor and record the proceedings of assessment opportunities. Recorded material may be used as evidence in assessment transgression cases.

The installation of cameras in the remaining main assessment venues is under investigation. Cameras have also been installed in all the assessment printing venues. In 2017, MEC also approved the centralisation of the assessment printing and storing function under CAA. This function will be staffed by staff in the Postal Division and will be fully taken over from the faculties during 2018.

Students who for religious reasons could not sit for assessment opportunities scheduled on Saturdays were accommodated: they could either write a deferred assessment or write during the supplementary assessment period in July and November 2017.

Graduations and certification

More than 12 000 students graduated at almost 80 centrally coordinated graduation ceremonies. A student satisfaction rate of 86% was reached. UJ's new advanced security certificates not only protect the University's certificates from fraud, but also preserve the reputation of the institution and the integrity of qualifications. Certification printing software was acquired in 2016 and was fully installed in 2017, which will further enhance the security aspects associated with issuing certificates. Software was also successfully installed in 2017 to provide the functionality of ordering replacement certificates and verifying qualifications on the UJ website. The qualification verification functionality will be activated in 2018.

Mortar boards (hats) were included for use at graduation ceremonies and the graduation gowns were re-designed to have a unique UJ look and feel, which showcased the UJ multi-cultural community with a strong African identity. New graduation musical items were introduced and graduates were given a trinket (key chain) to wear on top of their hats at the ceremonies. Graduates could keep these key chain gifts, which were UJ branded and stated that the graduate was a proud UJ alumnus.

In addition, external auditors performed the annual compliance audit. No exceptions were recorded, as has been the status quo for a number of years now.

Central Academic Administration's strategic objectives for 2018

- Turnaround times and student satisfaction rates will be sustained or enhanced.
- Admission and registrations: The current successful uses of technologies for selections, registration and security will be further enhanced to improve, inter alia: selection of undergraduate international applicants and centralised electronic selection of honours and taught master's degree students; and online registration for mobile devices.
- Timetables: re-optimisation of APK lecturing timetable; full implementation of dynamic e-forms.
- Assessment: further roll-out of biometric scanning during assessments on all campuses.
- Graduation: Sustained student satisfaction rate of above 85% for graduation.

CENTRAL ADMINISTRATION

The success of the UJ Strategic Plan 2025 presupposes an excellent support service that creates a welcoming and caring environment with a strong service orientation for staff, students and visitors. This is the mandate of Central Administration in its several units: Director's Office, UJ Graphics Design Studio, Postal Services Unit and the University Secretariat. The different subsections within the directorate have performed admirably and have provided excellent service with regard to committee administration, the collection and distribution of post, support to employees in the design and preparation of graphic material, ensuring the efficient use of the Madibeng conference venues, and assuming an appropriate governance role for graduation ceremonies.

Committee governance and University Secretariat

The workload of the University Secretariat staff increased significantly in 2017, specifically because of the 86 special MEC meetings. Nevertheless, the University Secretariat has continued to function exceptionally well. Their main achievements in 2017 were as follows:

* Servicing 242 statutory committee meetings, with very positive feedback from all parties concerned.

- Updating schedules of business of the Council committees, using the following cross-cutting directives: strategy, policy, performance, risks, innovations, sustainability and transformation.
- Publishing quarterly Senate Newsletters, focusing on the discussion and decisions taken at Senate and its committees.
- Implementing the revised Council composition, with the Council approving the proposals of the Secretariat on: (1) the principles for revising the composition of Council committees in line with the reduced Council composition, and (2) the proposed assignment of external Council members to serve on committees.

CORPORATE GOVERNANCE

The function of the Corporate Governance Office includes the legislative and compliance framework within Records Management, Corporate Governance (compliance) and Contract Management.

Records management

Recommendations from the Gap Analysis Report with regard to born-digital documents were implemented with regard to mark change requests, University timetable changes, and historical data changes, which incorporated digital signatures in solutions within workflow. The pilot projects to secure vital documents within faculties were completed, and in 2018 this Division will commence with the outline of a UJ File Plan.

A further focus of Records Management was to prepare the development of the UJ File Plan, the institutional retention schedule of records within all faculties, as well as the classification of records. Good progress was recorded through pilot projects. This project will stretch over three years.

The Electronic Document and Records Management System upgrade to Perceptive Content 7.1.5. was implemented successfully for the new application cycle 2017-2018.

E-forms were implemented for the sign-off of mark changes, historical data changes and University timetable changes.

The workflow for four online programmes was implemented. In 2017, the total rebuild for online programmes was developed and implemented. Academic Regulations for online programmes were compiled and posted on the Intranet, Web, uLink and the Student Portal.

The contract drawer clean-up project was concluded and a naming convention for UJ contracts was drafted.

UJ Corporate Governance established and hosted the first Records Management Forum for higher education institutions in South Africa.

Access to information

During 2017, this office handled a total of 5 777 requests in terms of qualification verification, PAIA and POPI requests and internal requests for information.

Policy development

The User Guide on how to access Governance documents was updated and communicated. The Policy Grid was revised and sent to all the stakeholders to revise their specific grid. Newly developed and revised policies this reporting year amounted to 119.

B-BBEE certification

The compilation of all the data and the application for UJ's B-BBEE certificate were completed, and the B-BBEE certificate was issued.

Contract management

Contracts were secured as vital records, with easy access to information to make informed decisions. The contract naming conventions were developed. The clean-up of the contract drawer was completed. The

number of contracts managed in the Electronic Documents and Records Management System (EDRMS) amounted to 3 940.

Environmental sustainability

The Division focused on the roll-out of technology implementations to handle processes and record-keeping electronically as far as possible, and strongly discouraged printing of documents. Examples included web-based requests for information and the Electronic Documents and Records Management System (EDRMS). Contracts were developed and managed within the EDRMS.

Focus areas for 2018

- Securing all the vital documents within faculties.
- Developing a UJ File Plan.
- Implementing Business Intelligence in the EDRMS.
- Developing an encompassing application workflow for online programmes.
- Closing POPI gaps as per Gap Analysis Report.

HEALTH AND WELLNESS

Three units contribute to the institutional health and wellness portfolio: the Occupational Health Practice (OHP) (with a focus on staff), the Primary Healthcare Service (PHC) (focusing on students), and the Institutional Office for HIV and AIDS (IOHA). The three units collaborate closely, and services are available on all campuses, free of charge.

Occupational Health Practice

- **Medical surveillance** of at-risk employee groups was completed at a rate of 253% of the scorecard target. (This unusually high rate of completion is ascribed to more than 500 baseline medical assessments that had to be done on insourced cleaning staff – above annual targets. The OHP was able to accommodate these additional requirements despite budgetary constraints.)
- **Health Risk Assessments:** In total, 87 health risk assessments were carried out by the OHP prompted by existing or emerging risk. The completion rate is at 107% compared to the scorecard target.
- The biennial **Water Quality Audits** (Occupational Hygiene Surveys) were conducted, in fulfilment of the Hazardous Biological Agents Regulations under the Occupational Health and Safety Act 85 of 1993. These comprised: Legionella risk assessment and quantitative survey (with recommendations), UJ bottled water survey, and municipal water survey.
- **Event medical risk management** was completed for 80 academic and cultural events.
- **Radiation dosimetry results** displayed no deviations beyond reference ranges – thus no occupational overexposure of radiation workers at UJ.
- The annual **Influenza Campaign** reached 503 employees across all campuses.
- The annual **Movember Campaign** aimed at promoting men's health (early detection of prostate cancer) benefitted 94 clients, who each had a complimentary blood test, evaluation and feedback or referral as indicated.
- **Food Safety auditing:** The state of food safety at UJ was audited against 90% compliance to HACCP standards. UJ, after steady growth since 2011, achieved an annual average total Food Safety score of 87% in 2017. This status prompted certification for HACCP compliance (in alignment with the International Standards Certification) at four UJ food vendors, namely Madibeng Lounge, STH Main Kitchen, Design Café, and Johannesburg Institute for Advanced Study (JIAS). The certification audit took place in September 2017 and full certification was achieved: a first for an HEI in South Africa.

Focus areas looking ahead

- The baseline assessments on the 586 insourced members of the cleaning staff resulted in only 62% being able to receive a Medical Certificate of Fitness for employment. It is anticipated that the OHP will need to devote considerable resources to monitoring associated health issues.

- Surveillance for emerging communicable disease, e.g. such as Listeriosis (focus on food safety is therefore underscored).
- Radiation Protection Control System: A survey among UJ stakeholders is planned for February 2018 to assess the current operational system.
- The input by the Technical Team on the Potentially Disrupted Healthcare Services due to Protest Action document will be finalised and submitted to MEC.
- Centralised Chronic Medicine Dispensing and Distribution (CCMDD): The pilot project to provide chronic medicine to and monitoring of employees with chronic conditions at DFC will be completed in liaison with the Department of Health.
- Work-integrated learning for Occupational Health and Environmental Health students will be overseen, in liaison with the Dean of the Faculty of Health Sciences (February 2018).
- Strong bilateral collaboration with equivalent peers.

Primary Healthcare Service

Clinic performance

The annual utilisation of services of 27 681 consultations was similar in comparison with 2016. In total, 25 131 patients were students and 2 532 were staff members. This is a 28% decrease in staff consultations in comparison to the previous year, following MEC approval that only students and staff at lower Peromnes levels, i.e. P17-P15, should access the clinic services. A client satisfaction of 89% was attained.

Reproductive health

This year was the first of a three-year contract cycle with DOH enabling us to provide family planning (FP) at UJ. Various methods of FP were provided to 9 585 clients, which is a 12,7% increase from last year. A total of 1 306 pregnancy tests were done. Of all diagnosed pregnant, 31% opted to be referred for Termination of Pregnancy (TOP). In total, 169 patients accessed the 'morning after' pill, which is a drop from 2016.

Sexually transmitted infections (STIs)

After a 30% drop in the previous year, there was a 12% increase, to a total of 1 296 in patients treated for various forms of STIs. Although these clients were encouraged to bring their partners for treatment to avoid re-infection and spreading the infection, very few patients actually reported to the clinic with the referral letter.

HIV Testing Services: A total number of 4 776 clients tested for HIV (a 17% increase), of whom 85 tested positive. The prevalence rate of this group remained constant at 1,7%. This increase is attributed to shortening the testing session to 15 minutes and also using Social Work and Psychology interns in the HIV testing programme.

Travel health

The service was offered to a total of 387 students, which is a very significant increase from the 118 who consulted the previous year, and an almost 70% increase in the budget allocated for travel health medication. This was as a result of the Internationalisation Office increasing the number of students going on excursions out of the country.

Health promotion and campaigns

A series of campaigns was held during the year. These included: Condom/STI Month, which focused on sexual reproductive health programmes (February); Tuberculosis Awareness Month (March); the annual vaccination drive (April); Drug and alcohol abuse (May); Gender-based violence (August); Breast cancer (October); and Men's health (November). These activities were undertaken in collaboration with the Library, IOHA, Student Affairs, SRC, UJFM, residences and day houses. External partners included DOH, Right to Care-Themba Lethu Clinic, SANCA, City of Johannesburg, Wits HIV Clinical Research Unit, and Foundation for Professional Development.

Focus areas for 2018

- Restructuring of the APK Clinic to add an additional consulting room.
- The PHC Clinic to be on the District Health Information System (DHIS) for accurate record keeping and future resource allocation by the DOH.

- The *MySOS* app contract to be re-evaluated and a new way forward indicated.
- The Service Level Agreement and Memorandum of Agreement to be reached with the DOH.
- Continued collaboration with student leadership.

The Institutional Office for HIV and AIDS (IOHA)

The Institutional Office for HIV and AIDS (IOHA) coordinates the HIV/AIDS programme at UJ. It facilitates the implementation of prevention interventions and strategies aimed at reducing new HIV infections and providing holistic service for PLHIV (People Living with HIV) within the UJ community. The core operational functions include HIV prevention through sexual and reproductive health, peer education, community engagement, mass HIV counselling and testing, and care and support for people living with HIV.

- HIV counselling and testing: IOHA and the campus clinics have collaborated in mobilising for mass testing as an option to test. Mass testing campaigns were successfully undertaken in March, May and August, and during the second semester wellness initiatives were taken to residences and student gyms. In total, 10 879 students and staff were tested compared to 8 847 in 2016, an increase of 22%. 100 clients tested HIV positive. Institutional prevalence remained at 1%, which is below the 3,4% prevalence average for HE in South Africa, and substantially below the estimated 12,6% national prevalence. Of those testing positive, 66 consented to join the Care and Support programme, and 47 are on treatment and adhering to it.
- The condom distribution process at campuses, residences and Campus Health has been maintained. More than one million male condoms and fifty thousand female condoms were distributed, which is an increase of 4% and 9% respectively from 2016. Distribution of lubrication was started across campuses during testing campaigns.
- To transform and adapt to current trends around the peer educator training, UJ is integrating and implementing the programme into an e-learning platform. A total of 121 students participated in the programme, compared to a target of 65. The longterm plan is to formalise the programme through the Faculty of Education, i.e. to issue a certificate of competence instead of attendance to participants.
- Awareness was enhanced through strengthened partnerships and collaboration between the Library, residences, PHC, faculties, Student Affairs, UJ Sport, HR Wellness and PsyCaD. Campaigns were often linked to international commemorative days and included the following: First Things First Testing Campaigns during February, May and August 2017; TB and HIV screening during March; Zero Discrimination Day; May Care Month; AIDS and LGBT+ candlelight memorial in May (which marked the start of events associated with the Safe Zones project); and the IOHA Annual High Tea for ladies in August. In addition, focused attention was paid to reaching incoming students during first-year orientation.
- New materials relating to the Care and Support programme were made available on the IOHA website. These included educational materials ('Steps to follow when you test positive', 'Disclosure and side effects of ARVs'), and the booklet 'Destined to Survive'. IOHA's Facebook page and Twitter page are attracting increasing numbers of visitors.
- IOHA, in partnership with SAYWHAT Zimbabwe and the University of KwaZulu- Natal (UKZN), hosted a successful second annual Southern African Regional Student Youth Conference on Sexual Reproductive Health and Rights in Gauteng from 13 to 15 July 2017, under the theme: Building a business case for a solid future: Promoting access to youth sexual reproductive health and commodities.
- IOHA and Campus Health, in partnership with Social Work, provided a mentorship programme for some of their fourth-year students, and assisted the Department in initiating a fourth-year research module on students' safe sex empowerment. IOHA also hosted student interns from the Department of Sociology, Community Development, Social Work and Marketing.
- The HIV/AIDS Committee continued to monitor and supervise the response of University faculties and departments to the HIV pandemic. Additionally, the focus has now shifted to addressing the social determinants of HIV, which are fuelling it, such as relationships, gender-based violence (GBV),

risky student behaviour (RSB), the Sugar Daddy phenomenon, etc. Training and capacity building workshops were facilitated in six faculties, i.e. Education, FADA, FEFS, Health Sciences, Humanities, and Management, which shows an encouraging willingness by faculties to acknowledge the importance of issues around sexual reproductive health in active citizenship.

- The overall client satisfaction rate during HCT testing campaigns increased to 95% (from 90% in 2016), while feedback from capacity building workshops and training remained at 85%.

Focus areas for 2018

- Strengthening of care and support through better coordination and streamlining of services among IOHA, PHC and PsyCaD. This will include improved linkages to care processes, to ensure that no clients are lost in follow up.
- Addressing the social drivers to the spread of HIV and AIDS, including risky student behaviour.
- Further improving curriculum integration, with the goal of achieving the active participation of all faculties.
- Reviving the regional forum in partnership with surrounding HEIs.

CONCLUSION

The Registrar's Portfolio has clearly developed a considerable strength in the development and use of online, technological and automated approaches to academic administration and governance (primarily in Central Academic Administration and Corporate Governance), and is increasingly considered to show national leadership in this field. These approaches have been proven to be essential in ensuring that the academic programme can continue in the current climate of student unrest. The portfolio intends to build on these strengths further. Continued international liaison, for instance, with other U21 universities, will be likely to give even more impetus to this expertise.

Prof Kinta Burger
Registrar



Registration
Venue

(Central) Academic Administration (CAA)

The term academic administration refers to the management and governance of the academic life cycle 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 institutional Academic Administration Coordination Committee (chaired by the Registrar) oversees the governance of Academic Administration and meets regularly. The following other specialised committees are operational: Admission Committee, Assessment Committee, Registration Committee, Timetable Committee, and Graduation Committee, all chaired by the Registrar. In addition, various specialised operational committees exist within Academic Administration to attend to operational matters.

The Director: Central Academic Administration (CAA) 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. The current student data system is Integrator 3 from Adapt IT. Academic Administration governance is divided into the following units: Faculty Coordination, HEMIS Coordinator (including the Academic Structure), Registration Logistics, Student Enrolment Centre, Timetabling, Assessment 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 charter approved by Senex.

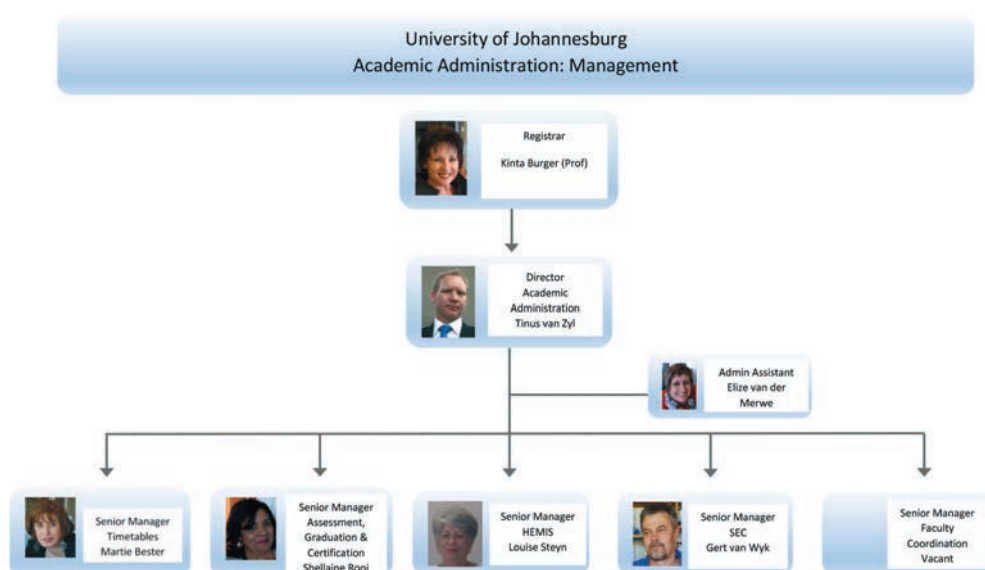
Organisational design

The organisational design follows the academic administration life cycle process and is as follows:

Registrar: Prof IC Burger
Academic Administration
Director: Mr MP van Zyl
Student Enrolment Centre
Senior Manager: Mr G van Wyk <ul style="list-style-type: none">• Contact Centre (Ms M Alwar)<ul style="list-style-type: none">- Application enquiries- Call Centre• Biographical data: Applications (Ms J Kemp)<ul style="list-style-type: none">- Capturing of applicants' biographic information- Update Grade 12 status- Biographic data quality• Biographic data: Current students (Ms J Kemp)<ul style="list-style-type: none">- Update of biographic information- Biographic data quality

<ul style="list-style-type: none"> • Selections (Ms A Mphahlele) <ul style="list-style-type: none"> - Selection of applicants - Admission documents - Electronic routing of applications - Admission statuses - Admission communication • Supervisor SEC systems and processes (Mr G Kotze) <ul style="list-style-type: none"> - Management of application and selection processes - Application and selection process solutions
Faculty Coordination
<p>Senior Manager: Vacant</p> <ul style="list-style-type: none"> • Registration (Mr L Fourie) <ul style="list-style-type: none"> - Planning and coordination of registration logistics • Study record management (Ms Chana Fourie) <ul style="list-style-type: none"> - Integrator access control - Integrator system problem-solving - Faculty coordination by means of meetings and work schedules
Assessment, Graduation and Certification
<p>Senior Manager: Ms S Rooi</p> <ul style="list-style-type: none"> - Planning and coordination of assessment opportunities (on-site and off-site) - Planning for adequate assessment invigilation - The management of the publication of marks and results • Off-site Assessment Centres (Ms K Letsoalo) <ul style="list-style-type: none"> - Identification of off-site assessment venues - Appointment of off-site invigilators - Coordination of assessment papers and answer sheets • External invigilators (Mr E Vuyk) <ul style="list-style-type: none"> - Selection and appointment of external invigilators - Training of external invigilators - External invigilator timesheet management • Graduation (Ms F Moola) <ul style="list-style-type: none"> - Planning and coordination of graduation ceremonies • Certification and verification (Mr G du Preez) <ul style="list-style-type: none"> - Issuing of degree/diploma certificates for subsidised and non-subsidised programmes (Continuing Education Programmes (CEP)). - Verification of certificates.
Timetables
<ul style="list-style-type: none"> • Senior Manager: Ms M Bester <ul style="list-style-type: none"> - Planning and coordination of lecturing and assessment timetables - Optimisation of lecture venue usage - Ad hoc venue bookings • Assessment Timetables (Ms G Language) <ul style="list-style-type: none"> - Compilation of assessment timetables including supplementary and special assessments - Assessment venue optimisation • Lecturing Timetables (Ms E Hand) <ul style="list-style-type: none"> - Compilation of lecturing timetables - Lecture venue optimisation • Test Timetables & Ad Hoc Venue Bookings (Mr N Marubini) <ul style="list-style-type: none"> - Supervising ad hoc venue booking functions of the Division for all campuses. - Centralising and optimising SAO (semester test) timetables. Implementing CELCAT Roombooker – a centralised self-help-service for ad hoc venue bookings.

HEMIS
<ul style="list-style-type: none"> • Senior Manager: Ms L Steyn <ul style="list-style-type: none"> - Managing of data quality for students, HR and Space - Submission of HEMIS reports to DHET • Data Quality Officer (Ms F Sass) <ul style="list-style-type: none"> - Support the management of data quality for students, HR and Space - Support the process of Submitting of HEMIS reports to DHET • Academic structure (Ms E Barkhuizen / Ms H Shaik) <ul style="list-style-type: none"> - Maintenance of the Academic Structure of subsidised and CEP programmes - DHET Compliance and Qualification Data Quality



Organogram of CAA Management Structure

2. RISKS AND MANAGEMENT OF RISKS

A risk mitigation strategy for academic administration, focusing on the academic life cycle of the student, was 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 above. The academic administration risks are listed below. Their impact on the institution and the effectiveness of the mitigation strategies are reviewed on an annual basis.

A register reflecting the conflict of interests declared by employees (e.g. family members registered at UJ) is compiled annually, and applicable internal controls are in place to mitigate risks related to assessment marks on the student data system.

2.1. Disruption of lectures and assessments due to student unrest

Despite the general climate of unrest, very few of the scheduled teaching sessions for the year on all campuses were affected. Where this was the case, tests were rescheduled and additional teaching sessions were scheduled to make up for lost academic activities.

In this situation of unrest, the following active risk mitigation measures were put in place, specifically to ensure that assessments were not disrupted.

- Students to arrive at least one hour prior to the start of the assessment session.
- Strict access control at entrances to campus with security vetting stations to assist with enquiries.

- Improved governance in terms of safekeeping venues and the “no bags” rule in the assessment venues.
- Improved access control at assessment venues by means of exam timetable verification at the entrances.
- De-activation of access cards after the students’ last assessment date; for students in residences, after 48 hours.

These arrangements proved successful and assessments ran without any disruption.

2.2. Large number of late applications/walk-ins

The University of Johannesburg (UJ) has a legacy practice of late applications/walk-ins on 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 again decided not to allow any physical walk-ins during the week following the release of the Grade 12 results.

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.

Furthermore, a dedicated application enquiry system, accessible by means of mobile devices with Internet connection, was again utilised for late enquiries/applications. Applicants without Internet access could access information by means of an extended call centre or online chat facility.

Immediately after the release of the NSC results, UJ calculated the final admission status of applicants as well as of declined applicants whose Grade 12 results had improved. Applicants in all categories were informed by means of an SMS of their final admission status. Application statuses were also available on the UJ home page. All four UJ campuses were closed during the period 2 to 5 January 2017, and students were only allowed on campus for, among other reasons, supplementary assessment sessions.

2.3. Registration

A medium-risk classification was again assigned to provide for heightened visibility and responsiveness by Public Order Policing. Once again, strict access control measures to all campuses were in place during the period following the release of the Grade 12 results in January 2017, while at the same time adequate support was ensured for entrants who wished to submit late applications, register online and off site, and have queries answered.

Comprehensive risk mitigation strategies were put in place for registration, with a focus on online services. CAA has made excellent progress with the implementation of online registrations and is considered a national leader in this domain.

- Only online off-site registrations were accepted. (Assisted on-site registrations decreased from 40% in 2015 to 15% in 2016 and 2017).
- More online services were introduced, e.g. for F7 appeals, course changes after registration and special assessment applications.
- Strict access control at campus entrances was implemented, with security vetting stations to assist with enquiries.
- An extended call centre and online chat facility assisted for off-site registration.

3. STRATEGIC FOCUS AND TARGETS

Realisation of goals and targets in 2017

3.1. Applications

The University again promoted the use of the online application system by means of the No Application Fees Policy. 96% of applicants applied online as opposed to 95% in 2016, 87% in 2015 and 11% in 2014. Applicants received an automated response (acknowledgement of receipt) after the submission of the application. Furthermore, the pre-screening of applicants against their Grade 11/12 results listed the qualifications for

which the candidate qualified. Although applicants were still allowed to select any qualification of interest, this new pre-screening function gave applicants an early warning where they did not meet the minimum entrance requirements. The number of headcount applicants in 2017 was 182 031 compared to 172 666 in 2016. A database of unsuccessful yet qualifying applicants was developed to use as a “selection list” in case enrolment targets were not met.

The ID information of applicants was successfully verified electronically, which resulted in increased efficiency and cost saving. Applicants who's IDs could not be verified were requested to submit a paper copy for verification. The Call Centre software was also upgraded to provide UJ with the functionality of recording calls for legal purposes, like payment agreements before students were unblocked for registration, and to facilitate communication via an integrated live online chat client. A semi-automated selection programme was done for undergraduate international applicants and implemented on 1 April 2017. Training was done and the system was handed over to the Internationalisation Office for use. A separate landing page for RPL, inbound and outbound applications, was also successfully developed and implemented. These systems will be enhanced even more and promoted for use by all faculties in 2018.

3.2. Registration

A student satisfaction rate of 85% (compared to 86% in 2016) was reached for registration. The academic record module on Integrator 3 was enhanced to include GPA rankings to enable the international conversion of results. This development was fully implemented in the first semester of 2017 and it also included more information, like NQF levels.

UJ launched four online programmes at the end of 2017 and extensive system developments were made to facilitate the online registration model of six intakes a year. In 2018, several other online programmes will also be launched, and CAA will continue to develop and integrate systems to streamline and improve our online services.

3.3. Timetables

The CELCAT timetable optimisation software, which was implemented in 2012, has been utilised for the optimisation of the DFC, APB and SWC lecturing timetable over the past three years. The re-optimisation of the assessment timetable for the period 2016 to 2018 was successfully completed for all campuses. Dynamic e-forms were implemented to facilitate timetable change requests. In 2017, the re-optimisation of the APK lecturing timetable was postponed to 2018 due to system issues and resource constraints.

3.4. Assessment

The Management of Assessment of Marks System (MAMS) was fully implemented in 2015 and enhanced in 2016 and 2017 for semester and year modules. This system has increased the governance regarding marks significantly, and a central repository has been established to assist with the early identification of at-risk students.

The biometric scanning of students in selected assessment venues on all campuses has been implemented. This system verifies the identity of the student and registration data against the student system. The system acts as a deterrent against examination transgressions. To enhance the integrity of assessments further, surveillance cameras were installed in large venues where the layout of the venue inhibits physical invigilation. Unfortunately, towards the end of 2016, it became clear that the requisite technical support for this system was inadequate, and CAA investigated new service providers in 2017 to support the function.

CCTV cameras have also been installed and are active in A Ring G01, G02, B Les 100 and B Les 101 to monitor and record the proceedings of assessment opportunities. Recorded material may be used as evidence in assessment transgression cases.

The installation of cameras in the remaining main assessment venues is under investigation. Cameras have also been installed in all the assessment printing venues. In 2017, MEC also approved the centralisation of

the assessment printing and storing function under CAA. This function will be staffed by the staff in the Postal Division and will be taken over fully from the faculties during 2018.

Students who for religious reasons could not sit for assessment opportunities scheduled on Saturdays were accommodated; they could write either a deferred assessment or during the supplementary assessment period in July and November 2017.

3.5. Graduations and Certification

More than 12 000 students graduated at almost 80 centrally coordinated graduation ceremonies. A student satisfaction rate of 86% was reached. UJ's new advanced security certificates not only protect the University's certificates from fraud but also preserve the reputation of the institution and the integrity of qualifications. Certification printing software was acquired in 2016 and was fully installed in 2017, which will further enhance the security aspects associated with issuing certificates. Software was also successfully installed in 2017 to provide the functionality of ordering replacement certificates and verifying qualifications on the UJ website. The qualification verification functionality will be activated in 2018.

Mortar boards (hats) were included for use at graduation ceremonies and the graduation gowns were re-designed to have a unique UJ look and feel, which showcased the UJ multi-cultural community with a strong African identity. New graduation musical items were introduced and graduates were given a trinket (key chain) to wear on top of their hats at the ceremonies. Graduates could keep these key chain gifts, which were UJ branded and stated that the graduate is a proud UJ alumnus.

In addition, external auditors performed the annual compliance audit. No exceptions were recorded, as has been the status quo for a number of years now.

4. EMPLOYEE PROFILE

4.1. Employee profile per employee type

Registrar: Academic Administration: Per Employee Type							
Employee Type	Timetables	Assessment	Faculty Coordination	HEMIS	SEC	AA	Total
FT Contract	1						1
Permanent	10	9	2	4	36	2	63
Vacant		1	1		1		3
Total	11	10	3	4	37	2	67

4.2. Employee profile per peromnes level

Registrar: Academic Administration: Per Peromnes Level							
Peromnes Level	Timetables	Assessment	Faculty Coordination	HEMIS	SEC	AA	Total
P5						1	1
P6	1	1		1	1		4
P7				1	1		2
P8	3	3	1	2	3		12
P9	4						4
P10		3			7		10
P11	3	2	1	0	24	1	31
Vacant		1	1		1		3
Grand Total	11	10	3	4	37	2	67

4.3. Employee profile per age

Registrar: Academic Administration: Per Age							
Age	Timetables	Assessment	Faculty Coordination	HEMIS	SEC	AA	Total
20s	2		1		10		13
30s	3	4	1	1	13		22
40s	2	2		1	10	1	16
50s	2	2		2	3	1	10
60s	2	1					3
Vacant		1	1		1		3
Grand Total	11	10	3	4	37	2	67

4.4. Employee profile per job grade

Registrar: Academic Administration: Per Peromnes Level							
Peromnes Level	Timetables	Assessment	Faculty Coordination	HEMIS	SEC	AA	Total
P5						1	1
P6	1	1		1	1		4
P7				1	1		2
P8	3	3	1	2	3		12
P9	4						4
P10		3			7		10
P11	3	2	1	0	24	1	31
Vacant		1	1		1		3
Grand Total	11	10	3	4	37	2	67

4.5. Employee profile per Job Grade, Race and Gender

Peromnes 5

Peromnes Level	Race	Gender	Timetables	Assessment	Faculty Coordination	HEMIS	SEC	AA	TOTAL
P5	White	Male						1	1
		Female							0
	White Total								1
	African	Male							0
		Female							0
	African Total								0
	Coloured	Male							0
		Female							0
	Coloured Total								0
	Indian	Male							0
		Female							0
	Indian Total								0
P5 Total		Vacant						1	1

Peromnes 6

Peromnes Level	Race	Gender	Timetables	Assessment	Faculty Coordination	HEMIS	SEC	AA	TOTAL
P6	White	Male					1		1
		Female	1			1			2
	White Total		1	0	0	1	1	0	3
	African	Male							0
		Female							0
	African Total			0	0	0	0	0	0
	Coloured	Male		1					1
		Female							0
	Coloured Total			1	0	0	0	0	1
	Indian	Male		0					0
		Female							0
	Indian Total			0	0	0	0	0	0
Vacant					1				1
P6 Total			1	1	1	1	1	0	5

Peromnes 7

Peromnes Level	Race	Gender	Timetables	Assessment	Faculty Coordination	HEMIS	SEC	AA	TOTAL	
P7	White	Male					1		1	
		Female							0	
	White Total						1		1	
	African	Male							0	
		Female							0	
	African Total								0	
	Coloured	Male							0	
		Female					1			1
	Coloured Total						1			1
	Indian	Male								0
		Female								0
	Indian Total									0
Vacant										
P7 Total			0	0	0	1	1	0	2	

Peromnes 8

Peromnes Level	Race	Gender	Timetables	Assessment	Faculty Coordination	HEMIS	SEC	AA	TOTAL
P8	White	Male		1	1				2
		Female	2			1			3
	White Total		2	1	1	1	0	0	5
	African	Male	1		0	0			1
		Female		1			2		3
	African Total		1	1	0	0	2	0	4
	Coloured	Male							0
		Female							0
	Coloured Total		0	0	0	0	0	0	0
	Indian	Male							0
		Female		1		1	1		3
	Indian Total		0	1	0	1	1	0	3
Vacant									
P8 Total			3	3	1	2	3	0	12

Peromnes 9

Peromnes Level	Race	Gender	Timetables	Assessment	Faculty Coordination	HEMIS	SEC	AA	TOTAL
P9	White	Male		1					1
		Female	1						1
	White Total		1	1	0	0	0	0	2
	African	Male	1						1
		Female	2						2
	African Total		3	0	0	0	0	0	3
	Coloured	Male	0						0
		Female	0						0
	Coloured Total		0	0	0	0	0	0	0
	Indian	Male	0						0
		Female	0						0
	Indian Total		0	0	0	0	0	0	0
Vacant				1					1
P9 Total			4	2	0	0	0	0	6

Peromnes 10

Peromnes Level	Race	Gender	Timetables	Assessment	Faculty Coordination	HEMIS	SEC	AA	TOTAL
P10	White	Male							0
		Female					2		2
	White Total		0	0	0	0	2	2	2
	African	Male					2		2
		Female		1			2		3
	African Total		0	1	0	0	4	5	5
	Coloured	Male							0
		Female		1			1		2
	Coloured Total		0	1	0	0	1	2	2
	Indian	Male							0
		Female							0
	Indian Total		0	0	0	0	0	0	0
Vacant							1		1
P10 Total			0	2	0	0	8	0	10

Peromnes 11

Peromnes Level	Race	Gender	Timetables	Assessment	Faculty Coordination	HEMIS	SEC	AA	TOTAL
P11	White	Male			1		3	1	0
		Female							5
	White Total		0	0	1	0	3	1	5
	African	Male	1				3		4
		Female (*)		2			10		12
	African Total		1	2	0	0	13		16
	Coloured	Male					1		
		Female	1				5		
	Coloured Total		1	0	0	0	6		7
	Indian	Male							
		Female					2		
	Indian Total		0	0	0	0	2		2
Vacant/Temp			1						1
P11 Total			3	2	1	0	24	1	31

66% of CAA employees are from designated groups.

4.6. Employee profile per gender

Registrar: Academic Administration: Per Race and Gender									
Race	Gender	Timetables	Assessment	Faculty Coordination	HEMIS	Training	SEC	AA	TOTAL
African	Female	2	4				15		21
	Male	3					5		8
African Total		5	4	0	0		20		29
Coloured	Female	1	2		1		6		10
	Male						1		1
Coloured Total		1	2	0	1		7		11
Indian	Female		1		1		3		5
	Male								0
Indian Total		0	1	0	1		3		5
White	Female	5		1	2		4	1	13
	Male		2	1			2	1	6
White Total		5	2	2	2	0	6	2	19
Vacant			1	1			1		3
Grand Total		11	10	3	4	0	37	2	67

Registrar: Academic Administration		
Per Gender	Total	%
Female	49	70
Male	15	27
Vacant	3	3
Total	67	100

5. APPOINTMENTS, RESIGNATIONS, AND SUCCESSION PLANNING

5.1. Appointments

Mr MP van Zyl was appointed as the Director: Academic Administration from effect 1 January 2017 and Ms S Rooi in the position of Senior Manager: Assessments started duty on 1 February 2017.

5.2. Vacancies

The disestablishment of the Senior Manager: Faculty Coordination position and the upgrading of some staff member's Peromnes levels was not approved at MEC.

A proposal was made that the Job description of the Senior Manager: Faculty Coordination be re-evaluated. One of the risks identified was that Ms René Genis is currently the specialist in the systems field but are not

solely seconded to CAA therefore the need for an IT systems support orientated person. This position would be responsible for all CAA Systems as well as the training function of these systems.

The Senior Manager: Faculty Coordination position was advertised in October 2017 and interviews took place in November 2017. The successful candidate was appointed to start early in 2018.

Future vacant positions would be re-evaluated for possible change, split or combined with other positions or kept as is.

Ms A Estherhuizen, employed in Timetables at the Doornfontein Campus, retired at the end of December 2017. Her position was advertised internally and Mr T Ramafoko previously worked in Timetables APK was appointed as the Administrative Officer, DFC with effect 1 January 2018.

There has also been a small number of resignations and appointments made within the operational environments of CAA.

5.3. Restructuring

The following minor restructuring took place within the CAA environment for operational improvements:

HEMIS

Ms E Barkhuizen and Ms H Shaik will reside within the HEMIS division and report to the Senior Manager: HEMIS: Ms L Steyn from 1 January 2018.

Assessment, Graduation and Certification:

Ms F Moola of Graduation and both Mr G du Preez and Ms V Hlongwani from Certification reports to the Senior Manager: Assessment, Graduations and Certification: Ms S Rooi from April 2017.

Incorporation of Postal Division Staff Members into Assessment, Graduations and Certification Division

Institutional benchmarking indicated that the centralisation of the printing of exam papers are the best way forward to mitigate the risk of fraud and better control can be applied within a centralised area.

Twelve staff members from the Postal Division would be incorporated with Assessment, Graduation and Certification (AGC) Division to assist with the central assessment printing process. The consultation process with staff members started at the end of 2017 and will continue in 2018 in conjunction with Human Resources and the Unions.

Succession Planning

One of the identified risk factors was the retirement of Mr G du Preez in the Certification Division. Multiple allocation within the department will reduce the risk. Ms Gladness Hlungwani and Ms Ferial Moola will do job shadowing to prevent certification to come to a halt if Mr du Preez is not available for whatever reason.

Multiskilling of CAA Staff

Multiskilling of staff between divisions was focused on in 2017. The aim was that it could have a positive impact on both staff and the department for the following reasons:

- Understanding the nature and focus of the different divisions;
- Empower employees for possible future promotion; and
- Ensure that business continuous, where some staff are able to fill in for absent employees.



6. STAFF DEVELOPMENT PROGRAMMES AND INITIATIVES

6.1. Team Building

A successful Team Building, facilitated by The Dream Team Catalyst was held in June 2017. The day started with a discussion on the past successes and possible future improvements, where after Ms Ronelle van Wyk (Human Resources) addressed the group on conflict management.

The main teambuilding event of the day was team drumming. Every staff member had to take-up a musical instrument and within 90 minutes, (following instructions from the leader and participating as a team) a giant percussion band formed with each person playing their part in time and on cue.

6.2. Conflict Management Sessions

All CAA staff members attended a Conflict Management Session, facilitated by Mr M Guni from Century Business Academy on 13 and 14 September 2016. Three, four-hour sessions were scheduled for those two days.

6.3. Corporate Social Responsibility

Platelet Donation and Christmas Shoe box initiative

As part of our Corporate Social Responsibility, CAA staff members started donating platelets to help patients suffering from Cancer/Leukaemia who needs a bone marrow or organ transplant and patients suffering from Aplastic Anaemia. This was not only a 67 minutes for Mandela Day project but an ongoing commitment from CAA (donating every six weeks). This project kicked off in June after a screening process. Some, who was not approved for platelet donation committed themselves to donate blood.

Christmas Shoe Box Initiative

CAA staff members decided take-up the challenge to do something special for children less fortunate by collecting and donating clothes and toys for children in need.

The following two institutions were identified for the Christmas Shoe Box initiative:

- **Just in Time Baby Sanctuary** (Randfontein) is a place of safety for abused and abandoned babies from newborn to 2 years. It is a registered Non-profit and Non-government Organisation.
- **Baby Moses Sanctuary** is a non-profit organisation, providing a residential facility, caring for abandoned, abused and neglected children and youth ranging from birth to 18 years of age.

A total of 31 gifts were delivered on 1 December 2017 between these two facilities.

6.4. Strategic Planning Session

A Strategic planning session was held in October 2017 with Senior Management within CAA. The Strategic Planning Session was held to assess performance, processes and goals within each division of the Central Academic Administration division. Strengths and weaknesses were identified and the improvement goals were set for departments.

To sustain good governance and excellent service the following strategic goals were proposed for the Central Academic Administration Division:

Two Year timeline

- Life cycle workflow mapping and gap analysis;
- Development of systems for integration, monitoring and reporting;
- CAS implementation– Staff and structure impact;
- International and PG student focus;
- Combining Committees (Assessment and Graduations, Applications and Registration);
- Centralising Assessment printing and calculation criteria; and
- Incorporation of the Student Marketing and Alumni Division.

Five Year timeline

- System requirement reviews and evaluations;
- Integration of systems: Blackboard, ITS, HEDA, CELCAT, MAMS, Perceptive Content;
- Smart Campus (venue usage and control);
- Virtual Invigilation;
- International and PG student focus; and
- Registrar's IT support section.

Ten Year timeline

- Possible new Student System/s;
- 20 000 online students and online support;
- Stronger International and PG student focus;
- More government driven services (NSFAS and CAS); and
- Supporting a different "breed" of student who is technologically advanced and has instant needs.

A similar strategic planning session would be arranged for senior and middle management early 2018.

6.5. The following employees were registered for formal qualifications:

CAA	
Employee Name	Qualification
MP van Zyl	PhD (Management)
Faculty Coordination	
L Fourie	Diploma in Logistics Management
<i>One Year Course: Certificate in Project Management</i>	
C Fourie	Advanced Certificate in Project Management
HEMIS	
F Sass	Masters in Information Management (proposal)
Assessment	
F Moola	Diploma in Office Management & Technology (UNISA)
S Rooi	MBA (Wits)

Timetables	
P Somgede	Master Distance Learning Programme Business Systems
SEC	
J Madonsela	BTech in Management Services part-time
J Kemp	BAHons in Public Management & Governance
D Chauke	Bachelor of Laws with UNISA.
D Maluleke	National diploma in transportation management CEP
Q Mogoai	BSc Informatics, Unisa
D Sekgale	M-Tech Operations Management
S Tshabalala	MPhil: Engineering Management
T Segami	BSc Information Technology
G Kotze	Diploma in Logistics Management

6.6. Summary of CAA employee qualifications

Employee qualification profile

	Timetables	Assessment	Faculty Coordination	HEMIS	SEC	AA	Fixed Cpmtract	Total
Qualification	Number	Number	Number	Number	Number			Number
< Grade 12	1							1
Grade 12	1		3	1	9		1	15
Post-school Certificate	2	1			5			8
Diploma	2	3	2		5	1		13
B Degree	4	1	2		11			18
Honours		2			3			5
Master's				1	2	1		4
Doctorate								0
Vacant		1	1		1			3
TOTAL	10	8	8	2	36	2	1	67

Approximately 62% of the CAA employees have a three-year and higher qualification.

6.7. Long Service Awards

The following staff members received a long service award:



20 Years

Charmaine Nagel

(Call Centre) (Left)

Blessing Segwagwe

(Biographics) (Right)



15 Years

Mary Ferreira

(Call Centre) (Left)

Conny Mhou

(Biographics) (Right)



10 Years

Shellaine Rooi

(Assessment, Graduation & Certification) (Left)

Nadine Sutherland

(Biographics) (Right)



7. STAKEHOLDER ENGAGEMENT AND REPUTATION MANAGEMENT

7.1. Internal stakeholders

The most important internal stakeholder 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 were 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:

7.2. Student satisfaction survey

Student Satisfaction Rate						
Activity	2015		2016		2017	
	Participation Rate %	Survey Satisfaction Rate %	Participation Rate %	Survey Satisfaction Rate %	Participation Rate %	Survey Satisfaction Rate %
Registration	11.08	86	19.59	90.6	21.27	85
Assessment	8.1	86	10.4	86	3.66	95
Graduation	21.94	98	25.4	99.8	10.3	86.2

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 worked well, not only in the interest of good governance, but also in the interest of integrated stakeholder communication, teamwork and collective leadership.

7.3. External stakeholders

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

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

The qualification Verification System (QVS) was the service provider for the verification of qualifications and servicing of alumni when academic transcripts were requested. Investigation on a new qualification verification system was done. MIE (Managed Integrity Evaluation (Pty) Ltd) performed a demonstration on their background screening process. CAA will in future also use MIE to verify qualifications for post graduate and international applicants.

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

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

The Celcat Software (UK-based company) was utilised for the construction of lecturing and assessment timetables. Adapt IT was the sub-Saharan African Product supporter for Celcat.

IDSC was the provider of the Higher Education data analyser (HEDA). This system provided software for the validation of approximately 400 different data elements. IDSC also provided the Application Rating System (ARS) for the final selection of applicants.

8. RESOURCE MANAGEMENT AND SUSTAINABILITY

8.1. Financial Sustainability

Expenditure for 2017 was within the required variance of a 5% budget range.

The following donations were received:

Official graduation photographer: Gordon and Harris Photography: R 56 070 and R50 000 from Dippenaar & Reynecke the official graduation attire supplier.

The donations from both Gordon & Harris Photography and Dippenaar & Reynecke were utilised to improve the facilities for Graduations.

9. LEADERSHIP

The following leadership development programmes were attended:

Seminar	Name
29 th Annual ITS User Group Conference – 2017	T van Zyl L Fourie
Celcat Usergroup	G Language M Bester E Hand N Marubini
SAAIR, HEMIS Institute	L Steyn, E Barkhuizen
HEDA Usergroup	L Steyn
HEFAF	K Mamabolo
	P Ntuli
	M Daniels
	N Hlongwane
SAAIR, QUALITY FORUM	E Barkhuizen, H Shaik and F Sass

A heightened awareness of global excellence in academic administration was created based on continuous benchmarking and university engagements. UJ's Academic Administration compared favourably nationally and internationally with the following systems: online applications and registrations; electronic selections, security features on graduates' certificates, timetabling as well as the process initiated for the centralisation of printing papers.

10. CONCLUSION AND WAY FORWARD

Academic Administration reached most of its performance targets and achieved an 85% in the registration student survey and an 86% in the graduation survey. The selection of undergraduate students, including the partially electronic selection of applicants, was executed successfully. The development of software for the electronic selection of undergraduate international students was implemented in 2017. The risk of walk-in late applications was effectively mitigated by means of the 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. Further enhancement of the interface between CELCAT and Adapt IT is needed and will be addressed in 2018.

The Management of Assessment of Marks System (MAMS) was successfully implemented in 2015 and further enhancements were done in 2016 and 2017. Sustained excellence in data quality was achieved in 2017 and the assessment processes were successfully completed without any major disruptions. More than 12 000 qualifications were awarded at almost 80 centrally coordinated graduation ceremonies held in March, April, May, June, September and October 2017.

No certification risks were identified or reported during 2017, with the annual external audit in November also reporting no exceptions. Two quality reviews were undertaken on assessments (including certification) and applications (including selections). The panel reports were very positive with a small number of general recommendations that will be considered for implementation in 2018.

Additional measures put in place to minimise potential disruptions occasioned by the “#FeesMustFall” movement (and by the higher NSFAS eligibility threshold of R350 000 combined family income) prevented any significant disruptions of academic activities.

Academic Administration successfully performed and completed all life-cycle processes. We look forward to 2018 with confidence, to take our processes further online and to successfully address any new challenges that may arise in Central Academic Administration.

Mr MP van Zyl
Director: CAA





Central Administration

OPERATING CONTEXT, GOVERNANCE AND RISK MANAGEMENT

Governance structures and quality management

Central Administration is comprised of different units namely:

- Director's Office
- Graphic Design Studio
- Postal Services Unit and
- University Secretariat.

The core business of the University Secretariat is to render professional support to the following statutory committees of the University of Johannesburg:

- 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 being rendered to the selected statutory committees, the Secretariat also offers support to employees responsible for committees by assisting with agenda compilation and minute writing sessions upon request by the environment concerned.

Secretariat risk register and risk management interventions/strategies

Risk	Intervention
Load shedding	Arrangements have been made with the PAs at Madibeng to temporarily use open offices that have back-up power.
Committee members not disseminating committee decisions	Where possible, reminders are sent to members and to non-members to take appropriate actions.
Submissions to a statutory committee not clearly stating its purpose	A submission template has been developed and is circulated to a non-member to assist them when compiling a submission to a statutory committee (they can adjust as required).

- Quality control is an on-going exercise in the Secretariat, with the draft minutes being reviewed for style and content, where required, prior to being submitted to the Chairperson for sign-off;
- The quality of submissions is also reviewed if time allows, and submissions are referred back to the author should it be unclear or not 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 Graphic Design Studio is the in-house design studio for the University. The studio's key function is to conceptualize 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 utilized

to create, design and transform into a visually pleasing, printable end product that satisfies the client as well as communicating the intended message.

In terms of quality-management the designers strive for excellence in keeping up to date with the latest global design trends, as well as attending the annual Design Indaba in Cape Town, which is the best design and creativity conference in the World.

Client satisfaction is measured by an electronic feedback form which is available on the intranet.

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.

Accidents cause delays in delivering and collecting of mail, in areas such as delivery of agendas and internal mail. Official mail would be affected as we would not collect from the Post Office.

In terms of machinery and equipment Postal Services has 2 Franking machines worth at least R200 000.00 each, and numerous computers and printers. Fire could destroy this equipment.

The biggest risk, however relates to Courier Services/Post Offices. If these service providers are on strike, no mail goes out, with delays to University mail. However, we can receive incoming mail to the University from courier services and the South African Post Offices.

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 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.

STRATEGIC FOCUS AND TARGETS

Central Administration contributes to the following UJ 2025 Strategic Plan:

Strategic objective 1: Excellence in research and innovation

Excellent student experience and support;

Positive student survey results;

Strategic objective 5: National and global reputation management

Dynamic brand;

Established global excellence;

Strategic objective 6: Fitness for global excellence and stature

A welcoming and caring environment with a strong service orientation;

A welcoming and caring for staff, students and visitors;

A service orientation for staff, students and visitors;

Efficient conduct of university business;

Fitness for purpose and efficient structures/committees.

- Agendas for meetings to be circulated one week prior to the meeting, and in the case of MEC meetings, at the latest on the Friday prior to the meeting on Tuesday.
- Minutes to be distributed at least ten working days after the meeting, with exceptions allowed.
- The quality of the agendas and minutes is of extremely high standard and the staff members are continuously complimented in this regard. The individual and collective effort of the staff of the University Secretariat ensures that it makes a valuable contribution towards "enhancing the excellence and stature at UJ".
- The University Secretariat serviced a number of additional special meetings during 2017, including 86 special Management Executive Committee meetings.
- Quarterly Senate Newsletters, focusing on the discussion and decisions taken at the Senate and its committees, were published.
- Induction packs: Committee-specific induction packs were provided to new members and permanent

invitees of Council and Council committees, Senate and Senate Committees and MEC and MEC committees. These gave an overview of the following:

- Overview of the committee;
 - Functions of the committee;
 - Composition of the committee;
 - Charter for the committee;
 - Rules for Effective Meetings;
 - Officers of the committee (Chairperson and Secretariat);
 - Minutes of the last four meetings of the committee;
 - Meeting schedule for the year;
 - Relevant policies (where applicable).
 - Positive feedback has been received from all the parties concerned.
- Performance management: Employees in the University Secretariat completed and signed their respective performance contracts in February 2017. Year-end performance assessments took place in October 2017.
 - The revised Council composition was implemented during 2017, with Council approving the proposals of the Secretariat on: (1) the principles for revising the composition of Council committees in line with the reduced Council composition, and (2) the proposed assignment of external Council members to serve on committees.

The cumulative total of the meetings serviced by the University Secretariat for the year stands at 242.

The Graphic Design Studio processed a total of 679 projects which included 5 960 designed pages (which may be posters, brochures, placards, cover pages, advertisements, stickers, transparencies, certificates, promotional material etc.). They met and in many instances exceeded the agreed delivery dates.

The Graphic Design Studio generated huge savings for UJ by designing in-house instead of outsourcing design. The Studio contributed to UJ's Global Excellence and Stature by designing academic and research posters for presentations at national and international Conferences. The Studio also designed marketing material for conferences organised and hosted by UJ.

The Postal Services Unit is doing very well. A total of R318 106 was spent on mail in the year. Courier services to the value of R3 868 403 were processed. Two hundred-and-eight circulars were posted. However, it must be borne in mind that the amount of post being handled is decreasing rapidly; for example, at the beginning of last year 69 bags of post were received, while only 4 were received this year.

The Director's office ensures the efficient and effective use of the different Madibeng conference venues, which has resulted in the optimum utilization of these venues. The improved sign-posting has made it much easier for visitors to Madibeng to find their way to the relevant venues. The Director's office played a significant role during the 65 graduation ceremonies, where 12 770 students received their qualifications.

EMPLOYEE PROFILE

All of the 25 employees within central administration are permanent and full time. The equity profile of Central Administration is currently acceptable, as in the following table.

African Female	Coloured Female	White Female	African Male	Coloured Male	Indian Male
3	2	9	9	1	1
11.5%	7.7%	34.6%	34.8%	3.8%	3.8%
Female			Male		
14			12		
53.8%			46.2%		
Black			White		
17			9		
65.4%			34.6%		

COMMUNITY SERVICE, STAKEHOLDER ENGAGEMENT AND REPUTATION MANAGEMENT

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, with advice being given on agendas and minutes, as well as engagement with employees who provide support to the functioning of statutory committees, e.g. the audio visual unit, maintenance etc.

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

The Graphic Design Studio is involved, on a design level, in the activities of the Transformation Unit, Campus Health Services, Institutional Office for HIV and AIDS, the Community Engagement Unit, PsyCaD and the HR Wellness Office. The studio also partakes fully in the UJ Staff Day, Mandela Day and Diversity Week.

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, which speaks of line managers who monitor their budgets very closely. The following expenditures are checked by each staff member on a monthly basis: telephone costs and copying/printing costs (Konica Minolta).

- Paperless meetings:
 - Introduced for all statutory committees including, from 2015, the Senate. Where external committee members are involved, the meetings packs are also distributed to the members on a CD or via email;
 - Exceptions are made for the chairpersons of some committees, e.g. Council, who are provided with hard copies of agenda packs;
 - 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 the UJ.
- Waste management:
 - Environmental sustainability efforts include full support of UJ's waste management and recycling initiatives by recycling paper, limiting printing and printing on both sides, and switching off all lights at night.
 - All artwork done by the Graphic Design Studio is now digital and transferred via the WWW to clients and service providers, e.g. Print-houses. Printing is done selectively, and all the paper used in the Studio is recycled, as well as plastic, tin and other re-cycleable material.
 - The Graphic Design Studio is the in-house design studio for the whole of UJ. Clients pay a small (internal) design fee for each project; these funds contribute to the needs of the studio. Each year-end the surplus funds go back to UJ. The Studio has the latest design hard- and software – Apple Macintosh Computers and licenced Adobe Software. It also has an 8KVA UPS for power supply so that production can continue in case of power failures or load shedding.
- Provision of meeting packs to the UJ Archives:
 - The University Secretariat provides meeting packs to the UJ Archives in electronic format (CD).

LEADERSHIP

- Internal leadership impact of the Secretariat:
 - Engagement with committee members on all aspects of statutory committees;
 - Engagement with non-committee members who prepare submissions for statutory meetings;
 - Engagement with employees who are responsible for faculty/departmental meetings to advice on agendas and minutes;
 - Engagement with employees who provide support to the functioning of statutory committees, e.g. the audio visual unit, maintenance.

- National/International leadership impact of the Secretariat:
 - Engagement with peers at other higher education institutions to provide and/or receive advice on committee functioning.

The Graphic Design Studio contributes to UJ's Global Excellence and Stature by designing academic and research posters for presentations at national and international Conferences. Marketing material for national and international Conferences are also developed.

Postal Services has two of its employees trained as Wellness Champions and as HIV and AIDS counsellors. The entire section has adopted Hotel Hope in Melville and regularly buys food for the children there.

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. 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. In this regard two very successful climate survey drilldown workshops were attended by a number of employees within the portfolio. Follow-up action regarding these workshops is currently being planned.

CONCLUSION AND WAY FORWARD

The University Secretariat is generally acknowledged of one of the leaders in South Africa, and a number of our peer departments engage with us on processes and procedures. Further benchmarking will be undertaken with leading peer institutions, specifically in Universitas21, in order to identify areas of improvement.

The support and cooperation received from the chairpersons and members of statutory committees has been excellent.

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.

Dr Basil Rhodes

Director: Central Administration

Corporate Governance

1. OPERATING CONTEXT, GOVERNANCE AND RISK MANAGEMENT

The Corporate Governance Division forms part of the Registrar's portfolio. The Division includes the following units:

- Compliance and Governance Management;
- Records Management;
- Contract Management.

The alignment of Corporate Governance with the UJ Strategic Objectives

The strategic goals of the Division are aligned with the following strategic objectives of the University of Johannesburg:

- Excellence in research and innovation;
- National and global reputation management;
- Fitness for global excellence and stature.

The Division's scorecard is linked with the Registrar's scorecard.

The progress of each unit with reference to the targets will be noted under the heading of each unit.

2. RESOURCE MANAGEMENT

Human Resources

Employee profile

This Division consists of 13 UJ employees of whom eight are permanent full-time employees, one on a three year fixed contract, two on a temporary basis and one student assistant. Mr Moboko has a dual function within ICS and Corporate Governance.

Table 1: Employee profile

EMPLOYEE	FUNCTION	PROFILE
De Wet, Elize	Director: Corporate Governance	Permanent full-time
Jackson, Mercedes	Admin Assistant	Three-year fixed term from 1 April 2017
Kekana, Lwazi	Admin Assistant	Temporary employee
Lekalakala, Phemy	Senior Records Management Officer	Permanent full-time
Mabaso, Hlengiwe	System Administrator	Permanent full-time
Maboko, Matete	System Administrator/Developer	Within ICS with dual function in CG
Mathe, Masegou	QVS Administrator	Permanent full-time

EMPLOYEE	FUNCTION	PROFILE
Nephawe, Faith	Admin Assistant	Permanent full-time
Olivier, Nicolette	Records Manager	Permanent full-time
Schlechter, Marieta	Admin Assistant	Permanent full-time
Stewardson, Hendrina	Admin Assistant	Temporary employee
Zungu, Sane	Admin Assistant	Permanent full-time
Gobv, Terera	Student Assistant	Student Assistant

Skills development

- Mrs N Olivier enrolled for the Bachelor Degree in Information Science at the University of South Africa.
- Mrs M Jackson is currently studying towards an N4 qualification in Business Management at Oxbridge Academy.
- Mrs F Nephawe enrolled for a bridging course in Policy Development.
- Ms M Mathe enrolled for the Bachelor of Accounting Sciences in Financial Accounting at the University of South Africa.
- Mrs N Olivier and Ms H Mabaso attended a three day training session on STT Assima from 2 October to 5 October 2017.
- Mr M Maboko, attended iScript training from 12 – 15 November 2017.

Appointments

Interviews to fill the position of Director Corporate Governance and Compliance took place, and Ms L Govender was appointed from 1 February 2018 in this position.

Financial management

The financial management of the Corporate Governance Division posed no deviations during the year of 2017.

3. ACHIEVEMENTS OF THE COMPLIANCE AND GOVERNANCE MANAGEMENT UNIT

Nominations and elections

During the year, 57 nominations and elections took place.

Convocation

Verification of Convocation members took place during November, but the AGM was postponed.

Access to Information

Access to information types	Execution	Compliance
UJ academic records	2 working days	99% compliance, confirmation letters are included in each request, the QVS system is running 24 hours.
TWR and RAU academic records	3 working days	98% compliance. Some of these records are not on our archive system, or records found on the system are too blurry to read. Confirmation letters are drafted where records are not found or blurry. 99% of these requests are in Afrikaans and content still need to be translated.
UJ transcript supplements	20 working days to 18 working days	95% compliance. Faculties delay compiling these requests and wait for reminders before working on a request.

TWR and RAU transcript supplements	20 working days	92% compliance. Faculties struggle to find content for most of these requests; content is in Afrikaans and still needs to be translated. Incomplete supplements are sent to alumni in most cases.
Extra-curricular records	40 working days	60% compliance. Faculties struggle to find records for the third-stream income programmes of the previous institutions. Programmes were offered by departments, and the records were kept by departments as well.

Requests for Access to Information 1 January to 31 December 2017:

Requests for information	Requests received
Internal requests	1 180
PAIA and POPI requests	292
QVS requests received	4 126
Total requests received	6 802

Progress on Qualification Verification Services (QVS)

- Total of all requests completed **3099**
- Total of all requests pending **277**
- Total of all requests denied **20**

Challenges

1. Transcript supplements and old academic records do not contain all the information required.
2. Academic records with a financial or library block require interventions to execute and are time consuming.
3. Faculties take longer to complete requests and wait until after the scorecard turnaround times. They need to execute requests as soon as they receive them.
4. Alumni records that could not be found on the system still pose risks. This normally involves the third-stream income programmes of previous institutions.
5. In cases where alumni obtained different qualifications from different faculties, Corporate Governance struggles to obtain the content from faculties.
6. The new format of the Academic record has contradictory information. For instance, it includes a sentence of good financial standing as well as a sentence indicating that the results have been retained due to outstanding financial obligations.

Service to alumni

All transcript supplements must be issued in English, and the content and spelling must be checked by the faculties for correctness before they are sent to Corporate Governance. The transcript supplements must be issued in the agreed-upon template that was provided. NQF levels and credits must be added to the supplements as well as work-integrated learning and practical hours. They must be issued on UJ letterheads and must be in Arial 12. In summary, quality control measures must be implemented by faculties.

In conclusion: QVS administrators are taking too long to complete requests. HFAs should try to follow up with QVS administrators at faculties where requests were not completed within the agreed turn-around time.

Policies

The information contained below provides an update with regards to policies:

- 121 policies were uploaded on the Intranet, Electronic Document and Records Management system (EDRMS), and where applicable, on Digispace, uLink and the Student Portal.

- All the UJ Policies received were posted on the intranet.
- Policies relating to students were posted on Digispace and uLink.
- All the policies received were secured in the EDRMS.
- All divisions were notified of Policies that need to be reviewed.

Policies, Charters, Organograms and Rules updated during the year

- The User guide on how to access Governance documents was updated and communicated.
- The policy grid was revised and sent to all the stakeholders to revise their specific grid. Where applicable, a protection of personal information clause/s must be inserted.

Academic Regulations 2018

The Academic Regulations and the Online Academic Regulations for 2018 were finalised, proofread and posted on the Web, Intranet, Digispace, the EDRMS and ULink.

BBBEE information gathering

The gathering of information was completed and provided to the supplier. The first draft report was provided, but Expenditure indicated that they wished to source more information. This led to the Certificate not being issued at the beginning of August. The BBBEE certificate was issued only at the beginning of 2018.

In future, the process should be steered by the MEC members in order to provide valid information for the next year. Employees do not understand the importance of the Certificate and do not take ownership of their environments.

4. ACHIEVEMENTS OF THE CONTRACT MANAGEMENT UNIT

With the establishment of the Office of Legal Counsel, contract development is no longer a functionality of Corporate Governance. Corporate Governance is now responsible for the maintenance and management of the contract drawers in the EDRMS. The Policy on Contract Management needs to be adapted, now that the Legal Counsel has developed a Policy on Contract Development to enable the splitting of the functions that previously resorted under Corporate Governance.

After signature of the contracts, Corporate Governance captures the contracts into the EDRMS and prepares the original contract for storage. Thereafter the contracts are managed until the end date or renegotiation period of a contract. The contracts then move automatically to the inactive stage for storage of 10 years, in accordance with the retention period of contracts.

During 2017 a clean-up project of the contracts drawer in the EDRMS was initiated and completed, as well as alignment with the naming convention. A total of 349 signed contracts were taken up in the contract drawer. 407 contracts were approved by Legal Counsel, but did not reach the Contract Office.

Challenges

Contract owners bypass the contract management process at times by not sending the original contract in hard copy to the Contract Office directly after signature, which increases potential risks. Contract owners do not adhere to the periods specified in the Policy on Contract Management. This places undue pressure on the Corporate Governance Office, and audit findings also alluded to this fact.

Projects and commitments related to environmental sustainability

Legal input and the management of contracts are managed within the EDRMS, which limits printing and improves environmental impact.

Conclusion

- The implementation of POPI and the regulation of processing personal information remain challenges in contract management.
- Non-adherence to the Policy on Contract Management also poses risks.

5. ACHIEVEMENTS OF THE RECORDS MANAGEMENT UNIT

The objective of the Records Management Division is to establish and implement an effective and efficient records management programme to ensure that the correct information is available in compliance with the POPIA Acts.

Performance highlights

- Two employees attended Assima Training to develop and design training processes and training manuals. A system administrator attended iScript training with Lexmark.
- The 2014 Tenders were scanned, imported and quality assured in the EDRMS by end of February 2017.
- All Faculty yearbooks were scanned and captured in the EDRMS by end of February 2017.
- A milestone was reached with the upgrade of ImageNow 6.7 to Perceptive Content 7.1.5. UJ went live with the new version on 1 April 2017.
- The RPL workflow process was successfully implemented, tested and signed off by internal clients.
- Meetings were held with all nine Faculties regarding the Records Survey Project.
- The solution design and implementation for External Holding Companies was completed.
- The Nursing Records were scanned and imported into the EDRMS.
- The quality assurance on the microfiche was completed.
- The Records Management Unit received ad hoc disposal requests of 24 610 kilograms.
- Scheduled records were identified and 25 200 kilograms were disposed of during the 2017.
- An additional resource assisted with reviewing and digitisation of Continuing Educational Programmes' records. This solution design must still be developed and built in the EDRMS.
- 2626 Student Mark Change e-forms were submitted on the system during the 2017.
- 482 Historical Data Changes e-forms were submitted on the system.
- Information sessions were held with UJ employees who utilise the services of off-site service providers regarding the new service provider Iron Mountain.
- Records Management implemented the AP Online workflow in the EDRMS.
- At the strategic breakaway, projects for 2018 were discussed, and the UJ Records Management Strategy was compiled.

Challenges

- Facilitating and monitoring two off-site storage facilities and ensuring that documents are stored, scanned and imported on the Electronic Document and Records Management System (EDRMS).

Suggestions for improvement

All governance documentation, such as projects, solution designs, processes and procedures, must be captured in the EDRMS. This will improve business continuity within departments and faculties.

- Monthly progress reports must be provided to all internal clients.
- A review of the Records Inventory Register solution must take place to assist the physical records section of the Records Management Division in reviewing, monitoring and managing tasks in a more efficient and effective manner.

Improvements made

- Forensic Auditors from ICA Consulting conducted an audit on HR Employee files.
- Employees are currently using electronic e-forms for mark changes, historical data changes and UTC, thus limiting the impact on the environment.
- Employees within the University make use of the EDRMS to view documents and make informed decisions.
- The Records Management Unit manages a huge number of support calls on a daily basis assisting employees with queries relating to the system.
- Employees are now aware of the Records Management Unit and the role of records management at UJ.
- About 4 800 employees use the system, and support is offered on four campuses. Some employees capture records on the system, other employees use the web application to view and process records.

- Two new system administrators joined the Corporate Governance Division to enhance the service delivery offered to clients,
- Inactive employee files were digitised to eliminate costs of physical records storage.

6. RESOURCE MANAGEMENT AND SUSTAINABILITY

The Records Management Unit conducted site visits of the physical records for the following clients:

Town and Regional Planning

Applied Chemistry

Payroll

Department of Nursing

Faculty of Engineering and the Built Environment

Utilities and Quantity Surveying Departments

Operational meetings were held with Human Resources, Faculty of Management,

Faculty of Economic and Financial Sciences, Tenders and External Service providers (Iron Mountain and Metrofile, including Inbox Filing Solutions).

Three new accounts were opened at Iron Mountain for Payroll, Examinations and Student Debtors and Bursaries. Four information sessions were conducted.

Tender records for 2015 were packed by Iron Mountain for scanning and safe storage off-site.

7. LEADERSHIP FOOTPRINT

- The first Records Management Forum for Higher Education Institutions in South Africa was established and hosted by UJ in October 2017.
- The Records Management Unit conducted benchmarking at the University of Pretoria.

8. HIGH PRIORITY SUGGESTIONS AND RISKS TO BE MITIGATED

- Ongoing awareness campaigns must focus on the role of the Records Management Unit throughout the institution.
- Records Management will conduct workshops with the existing clients on the value of records management within the University, including awareness of Policies and Procedures.
- The Records Management committee will make strategic decisions on the way forward in securing vital records of UJ.
- Records management responsibilities should be included in the KPIs of all employees.
- Destruction of records, both electronic and paper, must be actioned in accordance with the signed-off retention schedule of UJ and in accordance with the legal, policy and business framework.
- The lack of historical student data and results of pre-merger institutions in formal and CEP programmes still poses risks.

9. CONCLUSION.

The Corporate Governance Division has impacted on various stakeholders within the University. The Governance and Compliance Unit within Corporate Governance has played a critical role and provided services to both internal and external clients. The services residing under this unit include nominations and elections, access to information, protection of personal information, policy grids as well as policy uploads and the University Academic Regulations. A successful higher education records management forum was initiated and hosted by Corporate Governance, creating awareness of the importance of this function and opening the channels of communication between institutions. A gap was identified within UJ with regards to a central business classification system; this project was embarked on by Corporate Governance in 2017

for implementation 2019. The University records management system which resides under Corporate Governance was upgraded to enhance service delivery. Contract Management services and responsibilities were restructured with the establishment of Legal Counsel within UJ; this resulted in Corporate Governance overseeing the life cycle of contracts within the Electronic Document Records Management System. The Corporate Governance Division continually strives to close the gaps that have been identified within the areas of Compliance and Governance Management, Records Management and Contract Management, and to enhance the service that it offers to the various stakeholders.

Mrs Elize de Wet

Director: Corporate Governance



Occupational Health Practice

1. OPERATING CONTEXT, GOVERNANCE AND RISK MANAGEMENT

1.1 *Operating context*

The Registrar's Portfolio is home to the Occupational Health Practice (OHP). The OHP is represented at all campuses through the Campus Health service sites (the clinic model accommodates both the OHP and the Primary Healthcare Service).

The OHP was founded in 2004 – with one staff member. Innovative programmes were custom built, consistent with legal and institutional demand. The Practice, today, has established itself as a matured service consisting of a team of nine persons. An Occupational Medicine Practitioner holds the appointment as the designated medical officer and visits the OHP periodically. The Doctor authorizes Professional Nurses to execute their independent clinical work. The UJ Radiation Protection Officer (RPO) forms part of this structure due to appointment by this Practice as Independent Contractor, and therefore radiation reports are assimilated into the reporting structure.

The risk-based approach of the OHP incorporates wide collaboration and consultation with the Occupational Safety department, risk management and event risk management internally, and with external peers in healthcare, food safety, travel medicine and agencies such as the World Health Organization and the International Commission on Occupational Health.

Employees are our principal clientele; however, contractors, students and visitors further may be converted to clients of this Practice in case of injuries on site or exposure to occupational health risk. Legal instruction and programmes such as occupational health risk assessment, the resilience programme, injury management, incapacity assessment, travel health, food safety monitoring and medical surveillance are therefore chiefly intended for the UJ employee.

1.2 *Governance structures and quality management*

1.2.1 *Governance structures*

Designation as an 'organisation performing a health service'

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 said designation, authorises Occupational Health Nursing Practitioners (OHNPs) under section 56(6) of the new Nursing Act 33 of 2005 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 therefore hold Dispensing Licences to conduct these roles. Medication is procured on this basis and stored in accordance with the license requirements.

Institutional structure and professional accountability

The Occupational Health Nursing Practitioners, the Occupational Medicine Practitioner, the Radiation Protection Officer and the administrative staff report to the Head: OHP. 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. Memberships of professional bodies are closely observed to ensure professional accountability and compliance with codes of competence and ethics.

Radiation Protection Officer

The RPO is a radiation expert (physicist) who assumes responsibility for the acquisition, waste disposal and monitoring of radio-active sources/practices. The RPO is a legal appointment under the Department of Energy, valid for any institution that imports, acquires and possesses nuclear material or radiation equipment. Applications to the Department of Health to use radio-active nuclides for research at UJ are facilitated by the RPO, as are any imports of such equipment or sources. This Practice conducts the required radiation medicals to register radiation workers, periodic assessments and continuous monitoring of exposure together with the Department of Health. Jointly, radiation incidents and investigations are managed.

Regulatory frameworks

The regulatory framework further governs nursing qualifications and registrations, and includes scopes of practice, Codes of Good Practice, SA National Standards such as on Spirometry, Audiometry, noise pollution, and event medical risk management.

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).

1.2.2 Quality Management

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.

Committees

The Occupational Health Committee is governed in accordance with its charter, reporting to the Registrar's portfolio. The Head of this Practice is a member of the Graduation Committee and a permanent invitee to the MEC Risk Management Committee. Participation is upheld in the HIV/AIDS Monitoring and Evaluation task team where quarterly reports serve as part of the Higher Education Peer Framework requirements. The Committees for Persons with Disabilities, Risky Student Behaviour and Wellness are supported, as well as all Campus Forums.

Policy reviews

In accordance with the cyclic review of policy documents, policies and procedures were reviewed

Reports

OHP reports serve at the MEC Risk Management Committee, Registrar's Exco, MEC, MECO/MECA and the PRCC.

1.3 Risk Management

This section of the Report encompasses the essence of an Occupational Health service, and, in summary, includes:

1.3.1 Risk management fundamentals, legal mandate; focus areas

1.3.2 Emerging/potential health risk identification

1.3.3 Occupational Health Risk Auditing 2017

- a) Occupational Health Risk Audit Plan 2017
- b) Legal/professional auditing of the Occupational Health Practice
- c) Advisories regarding travel risk
- d) UJ Occupational Health risk profile

1.3.4 Occupational Health Risk prevention and mitigation

- a) Completions in relation to OH risk assessments
- b) Detailed discussions on completed health risk assessments per campus
- c) Outsourced Occupational Hygiene audits for the period

1.3.5 Medical Surveillance

- a) Medical Surveillance mandate and plan
- b) Completion rate of Medical Surveillance against scorecard target
- c) Client contact sessions

1.3.6 Food Safety Auditing

1.3.7 Event medical risk management

1.3.8 Emergency medical response

1.3.9 Radiation exposure risk management

1.3.10 Water Quality health risk assessments

1.3.11 Influenza campaign

1.3.12 Movember campaign

1.3.13 Travel Medicine

1.3.14 Needle stick injuries

1.3.15 Vaccination Programmes

1.3.16 Executive-, PA- and HOD Resilience Programmes

1.3.17 Mental Health management

1.3.18 Business Continuity

Each element is next described in detail.

1.3.1 Risk management fundamentals, legal mandate; focus areas

Fundamentals

Risk management is fundamental to the Practice. Safe work and occupational health are constructs regulated by the International Labour Organization and the International Commission on Occupational Health.

National law prescribes that the employer 'shall provide and maintain, as far as is reasonably practicable, a working environment that is safe and **without risk to the health of his employees**' (Occupational Health and Safety Act 85 of 1993, as amended) (OHSA). The OHSA further recognizes the unique clinical roles of the Occupational Medicine Practitioner (Dr) and the Occupational Health Nursing Practitioner (Professional Nurse specialized in Occupational Health Nursing Science).

Legal mandates

At UJ, the OHP takes care of the two legal mandates directed to the occupational medical and nursing staff, in service of an organization acting on behalf of the employer, being:

- Medical Surveillance Programme
Any employee exposed to hazardous chemicals, biological agents, noise, asbestos and lead must be assimilated into the medical surveillance programme as designed and executed by the occupational health team;
- Health Risk Assessment Programme
The employer shall ensure that such programme determines whether any employee might be exposed to hazardous substances by any route of intake.

Focus areas

Focus areas have been established around UJ occupational health risk, to achieve optimal cover for risk assessment and risk control. The philosophy is 'early identification, anticipation and control'.

The eight focus areas of the UJ OH portfolio are therefore indicators of risk assessment and -control programmes and consist of:

- Health Risk Assessment (legal mandate)
- Medical Surveillance (legal mandate)
- Food Safety monitoring
- Executive Resilience Programme
- Event medical risk assessment and resourcing
- Medical response to disaster
- Travel Health governance
- Radiation Control

1.3.2 Emerging/potential health risk identification

1.3.2.1 Health risk assessment

Occupational health risk is identified either through the planned programme of two-yearly outsourced assessments by Occupational Hygienists or by the UJ OH team during site visits. The audit intervals occur in accordance with the Occupational Health and Safety Act, 85 of 1993, as amended, and its regulations. Emerging risk is, however, assessed in addition to the annual audit plan – as it arises.

Risk assessments may be tailored as *qualitative* risk assessments, as reflected in the heat maps that have been developed for each campus and for UJ as an entity (see *Quantitative* surveys are added to measure general ventilation rates, ergonomics, levels of chemical/biological agents, illumination, noise and extraction ventilation. Audit reports provide substantiated risk rankings, advisories on training, signage and suggested medical surveillance for vulnerable (exposed) groups.

Table 1 provides an overview of all Occupational Health risks identified to date, as well as controls and mitigation strategy.

Table 1 Overview: Occupational health risk and controls

No	Risk	Control	Control action plan
1	Occupational Risks to health present at UJ	Health Risk Assessment	Prioritized risk spaces and practices are audited at legally prescribed intervals. Focus areas are on Water Quality, Hazardous Chemical Substances, Hazardous Biological Agents and Indoor Air Quality
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 Radiation Protection Officer.
4	Persons at risk of communicable, destination-bound or endemic disease and air travel risk	Travel Health Programme	Pre-travel medical immunizations. Chemoprophylaxis. 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	Foodborne Disease outbreaks resulting in acute incapacity and reputational risk	Food Safety auditing programme	Quarterly external auditing; results are interpreted and relayed to Registrar, Campus Directors, Property Management and (every 6 months) to the 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. UJ ambulance 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 contextual interpretation. Immunization campaigns National professional network established. Personal Protective Equipment to UJ Healthcare workers 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 room staff requests 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 was created and equipped at QK building.
10	Confidentiality breach	Confidentiality agreement	Confidentiality agreements signed by all Occupational Health staff.

1.3.2.2 Health risk interpretation and -response

All identified health risk is filtered, contextualized and captured in the OHP risk register and considered for the Registrar's risk register. The Registrar will place serious risk items on the agenda of the MEC Risk Management Committee for noting, actioning or uptake into the Institutional risk register. Acute risk, however, is addressed immediately through telephonic or emailed contact and memorandums to relevant management structures.

The risks identified by the OHP that have been recorded in the three risk registers are reflected in Table 2.

Table 2: UJ risks recorded in three UJ Risk Registers

Risk	OHP Register	Registrar's Register	Institutional Risk Register
1. Event Medical Risk			
2. Delayed response to medical emergencies on campus			
3. Travel health risks related to official travel of all stakeholders			
4. Exposure of students and staff to infectious and hazardous agents			
5. Food borne disease outbreaks due to lacking practices by food tenants at UJ			
6. Quality and quantity of water supply to campuses			

The annual audit plan 2017 for health risk, given legal prescription and prevailing hazards, included 89 units of work, as shown in Table 3. Emerging risk may prompt further risk assessment. The scorecard target, at 90%, comprised 80 units of work.

Table 3: Health Risk Audit Plan 2017 (89 units of work)

Campus	Entity	Units of work 1 unit = 1 hour	Service Provider	Audit Date
All	FHS Occupational Hygiene quantitative surveys on chemicals, biological agents, noise, ventilation and ergonomics	1	Outsourced	Aug/Sep
	Legionella audit Re-assess hot water systems	1		Aug/Sep
	Water Quality audit Perskor ground water suitability as potable water	1		Sep
	Food Safety Audits 4 rounds	4		Feb; May; Aug; Oct
	Subtotal 7			
APB	Maintenance workshop	1	Occupational Health team	23 Feb
	Auxiliary store areas	2		23 Feb
	Biokinetics department	1		23 Feb
	Residence cleaners store areas	2		23 Feb
	Research village	4		April
	ICS/ technicians	2		April
	STH	2		June
	FADA	5		Aug
	UJ Sports fields gardeners	1		Oct
	APB Gymnasium	1		Oct
	Subtotal 21			
SWC	Operations	4	Occupational Health team	March
	Faculties: FL, FH, FEFS and FM	2.5		Sep
	Gym & cleaners	3		July
	SWC clinic (PHC & OH)	1.5		May
	Subtotal 11			

APK	Geology; Zoology	2	Occupational Health team	Feb
	Protection Services; Transport; Chemistry	2		March
	Physics, Botany, Biokinetics; Gym	2.5		April
	Faculties: FE, FM, FH, FL; FEFS	2.5		May; Oct
	Cleaners	1		June
	PHC	0.5		July
	Operations	4		Aug; Sep
	Biochemistry; Spectrum	2		Oct
	Subtotal 16.5			
DFC	FEBE	7	Occupational Health team	April/May
	Operations	6.5		Feb, Mar, July
	FS	8		Feb, June; July
	FHS	11		Mar, Aug, Sep; Oct
	Subtotal 32.5			
All	Radiation audit Audit of sources on register; Incident report	1	Dr Mavunda	
TOTAL UNITS OF WORK 89				

1.3.3.2 Legal/professional auditing of the Occupational Health Practice

KPMG conducted an internal audit of the OHP in 2014. An overall rating of good was assigned and effectivity was found across the focus areas of the portfolio.

The strategy for 2018 is to have an external audit done by external Occupational Health auditors, applying an adapted South African Society of Occupational Health Practitioners (SASOHN) audit instrument.

1.3.3.3 Advisories regarding travel risk

Outbound UJ official travellers are exposed to a unique set of occupational destination health risks. For this purpose and in line with the provisions of the OHSA to assess all risks associated with work, the OHP screens global risks to health in order to alert travellers to potential risk. In addition, medical pre-travel health assessments and vaccinations are conducted on travellers to determine fitness to travel and mitigate vaccine-preventable disease.

If the degree of risk is unreasonably high, a UJ travel alert is issued to inform and advise against travel to high risk areas, such as during the Zika outbreak. The 2016 outbreak was declared to be a 'Public Health Emergency of International Concern', and remains an ongoing concern as it has spread to multiple countries. In 2017, the Plague was monitored in Mauritius, as well as the potential Listeriosis risk to UJ. Circulars were intermittently sent to UJ Travel Co-ordinators and posted on the Intranet.

1.3.3.4 UJ Occupational Health risk profile

■ Compilation of the qualitative UJ Occupational Health risk profile

Information collected from audit reports and site visits at UJ in the past 14 years since inception of this Practice has resulted in the development of a UJ Occupational Health Risk Profile per campus and ultimately an integrated profile for UJ as a whole (Figure 1).

The control banding methodology (qualitative health risk assessment) was enlisted in the rating of hazards and risks.

The risk score is expressed as a function of impact and probability and indicates the priority of a health hazard, namely low, moderate or high risk. Indices for the variables impact, probability, risk score and risk priority appear in Table 4. The profile is updated annually in November.

■ UJ qualitative Occupational Health Risk Profile

Figure 1: UJ global Qualitative Occupational Health Risk Profile 2017*

*updated annually in November

IMPACT						
PROBABILITY		1	2	3	4	5
	1				Bee sting hazards	
	2		Poor Indoor Air Quality & Building-Related Illness Sedentary behavior			
	3	Food Safety risks	Healthcare Worker hazards	Repetitive Strain Injuries – movers and gardeners		Poor mental health – Protection Services staff
	4		Workshop health hazards	Chemical exposure risks & hazards		
	5					

Table 4: Indices for probability, impact, risk score and risk priority

PROBABILITY		IMPACT		RISK SCORE		RISK PRIORITY
1	Unlikely	1	Rarely	1	Insignificant – no health effect	Low risk
2	Some Chance	2	Occasionally	2	Reversible health effect, minor	
3	Could Occur	3	Often	3	Seek medical help, temporary	Moderate risk
4	Good Chance, Probable	4	Frequently	4	Irreversible health effect, permanent	High risk
5	Will Occur	5	Continuously	5	Disabled/Fatality	

Table 5 depicts the qualitative Occupational Health risk priorities per campus

Table 5: Qualitative Occupational Health risk priorities per campus 2017*

Risk priority	APK	APB	DFC	SWC	Total no of risks
LOW	1	1	1	1	4
	<ul style="list-style-type: none"> • Food tenant practices 	<ul style="list-style-type: none"> • Student Centre food outlet practices 	<ul style="list-style-type: none"> • Welding fumes, noise and dust in technical and gardening work 	<ul style="list-style-type: none"> • Welding fumes, dust & noise exposure risk in Technical and Gardening work. 	
MODERATE	4	4	3	2	13
	<ul style="list-style-type: none"> • Chemical exposure at laboratories • Library ventilation risk • Workshop hazards • Risk of transmission of communicable diseases to UJ healthcare workers owing to contact with hazardous biological agents 	<ul style="list-style-type: none"> • FADA Jewelry workshop hazards; exposure to chemicals • FADA Industrial Design and Visual Art workshops: exposure to noise and dust • STH kitchens and stores: hazards • Maintenance workshop hazards 	<ul style="list-style-type: none"> • Chemical exposure at laboratories and with Hygiene Controllers • Poor Indoor Air Quality at Radiography offices, Optometry and Law Clinic ventilation • Poor food tenants practices (Food poisoning risk to staff and students) 	<ul style="list-style-type: none"> • Chemical exposure at SWC Science Lab and with Hygiene Controllers • Poor food tenants practices (Food poisoning risk to staff and students) 	
HIGH	2	1	2	2	7
	<ul style="list-style-type: none"> • Bee sting risk • Psycho-social stressors at Protection Services 	<ul style="list-style-type: none"> • FADA Industrial Design & Visual Art workshops : poor ventilation 	<ul style="list-style-type: none"> • Psychosocial & physical trauma risks • Risk of transmission of communicable diseases to UJ healthcare workers at clinics and FHS owing to contact with hazardous biological agents. 	<ul style="list-style-type: none"> • Psychosocial & physical trauma risks • Risk of transmission of communicable diseases to UJ healthcare workers owing to contact with hazardous biological agents. 	
TOTALS	7	6	6	5	24

- Discussion of the 2017 global qualitative health risk assessment findings (Figure 1)

Hazards ('sources of exposure') and/or risks ('probability that injury or damage will occur') have been identified across all campuses. Six crosscutting themes regarding hazards and risks include:

- 1) poor indoor air quality;
- 2) food poisoning risk;

- 3) risk of transmission of communicable diseases to UJ healthcare workers owing to contact with hazardous biological agents such as TB, Meningitis, Hepatitis B;
- 4) risk of exposure to hazardous chemicals at research and workshop sites;
- 5) welding fumes, poor housekeeping, noise and dust in predominantly technical workshops;
- 6) mental health hazards, especially in Protection Services.

■ Significance of the 2017 qualitative occupational health risk profile

Risks were identified and allocated ratings of high, moderate or low risk.

29% were HIGH risks such as workshop health hazards, Healthcare Worker (biological) hazards, bee sting hazards and poor mental health - Protection Services staff.

Thirteen MODERATE risks constituted 54% of the total and included workshop health hazards, Healthcare Worker (biological) hazards, chemical exposure hazards, Poor Indoor Air Quality and Food Safety risks.

LOW risk was assigned to 17% of health risks, namely Food Safety risks, welding fumes and noise and dust in technical and gardening work.

Figure 2: 2017 Qualitative health risk distribution



1.3.4 Occupational Health Risk prevention and mitigation

Pro-active assessment of environments for health risk, early advisories on developing risk, consulting subject matter experts and site visits are health risk mitigatory initiatives.

1.3.4.1 Completions in relation to OH risk assessments

Eighty-seven (87) health risk assessments were completed this year. This number includes outsourced Occupational Hygiene surveys, risk assessments conducted by the Occupational Health professionals and the Radiation Audit.

COMPLETION RATE: HEALTH RISK ASSESSMENTS

107% completion rate in relation to the scorecard target of 90%

The overall and campus completion rates on all planned and risk-prompted health risk assessments conducted for the period are reflected in Figure 3.

1.3.4.2 Detailed discussions on completed health risk assessments per campus

Detailed discussions on site visits and health Risk Assessments conducted by professional colleagues, are included in Quarterly Reports.

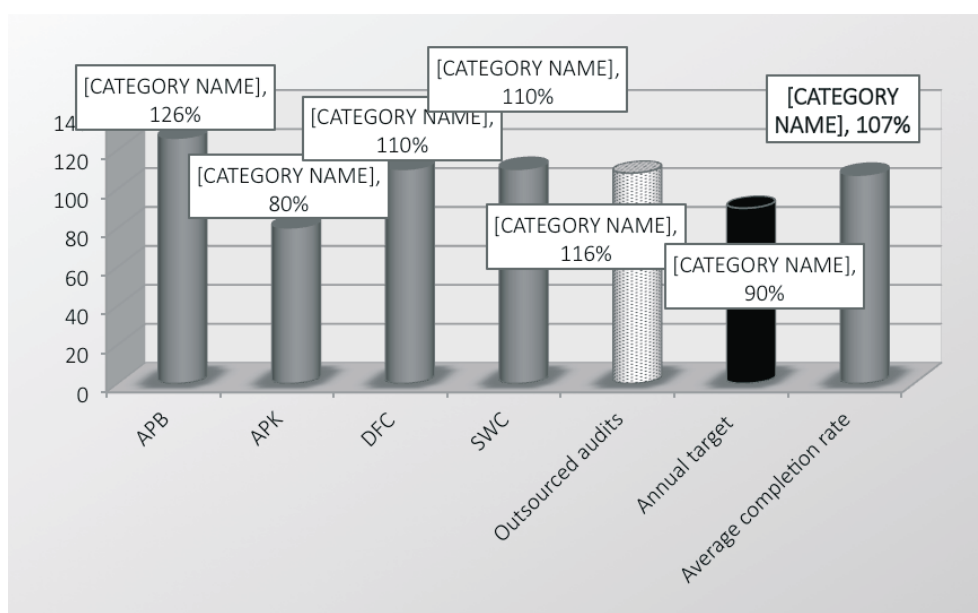


Figure 3: Overall and campus-specific completion rates of Health Risk Assessments against 90% annual scorecard target.

1.3.4.3 Outsourced Occupational Hygiene audits for the period

- LTL was contracted to conduct the quarterly Food Safety audits at all food outlets at UJ;
- NOSA undertook the FHS Occupational Hygiene surveys for illumination, general ventilation, extraction ventilation, hazardous chemical substances and hazardous biological agents;
- The National Health Laboratory Service was contracted to do the Legionella audit of all UJ hot water systems;
- Waterlab did water quality audits of municipal water, water from tanks and UJ bottled water. Borehole water potability surveillance is planned for 2018 in collaboration with CTS.

1.3.5 Medical Surveillance

1.3.5.1 Medical Surveillance mandate and plan

The Occupational Health team fulfils the UJ legal instruction as per the Occupational Health and Safety Act 85 of 1993 to execute a Medical Surveillance Programme.

An approved matrix, designed by the Occupational Medicine Practitioner, in his legal role, guides the scope and defines the nature of medical screening for employees at risk of homogenous occupational exposures. However, each person has a unique 'fingerprint', described as an Occupational Risk Exposure Profile (OREP). The OREP refines screening further to ensure that all individual exposures are monitored to prevent adverse health effects.

1.3.5.2 Completion rate of Medical Surveillance against scorecard target

COMPLETIONS: MEDICAL SURVEILLANCE

Cumulative completion rate of 253% relative to the scorecard target of 95%.

A total of 852 medical assessments were completed year-to-date compared to the scorecard target of 337 for the year. The high relative number of medical surveillance examinations resulted from the major insourcing project that heavily impacted the work load of the Professional Nurses and the Doctor.

The completion rates are reflected in Figures 4 and 5.

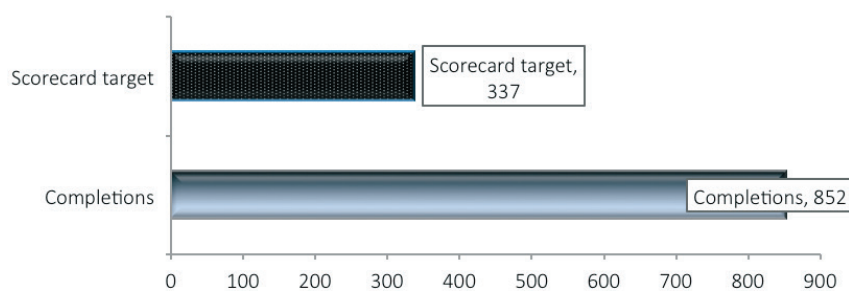


Figure 4: Overall completion on medical assessments compared to adjusted scorecard target

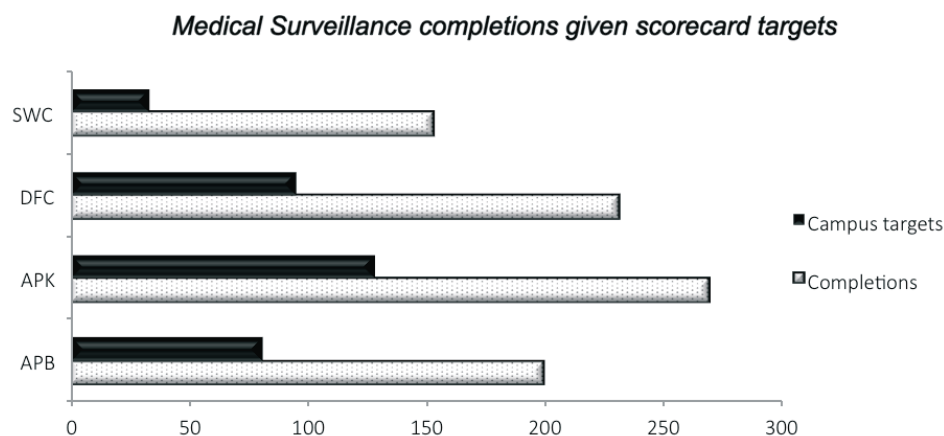


Figure 5: Completed medical assessments per campus versus scorecard targets

1.3.5.3 Client contact sessions

For the reporting period, **4114 client contact sessions** were provided to the UJ clientele. Contact session types included those for Travel Health, for periodic medical assessments, Primary Health, Resilience Programmes, incapacity assessments, injuries on duty, lung function tests, audiometry, emergencies and feedback sessions with the Doctor.

Figure 6 displays the annualized total client contact sessions since 2013, and Figure 7 is a graphic representation of the cumulative number of client contact sessions per campus.

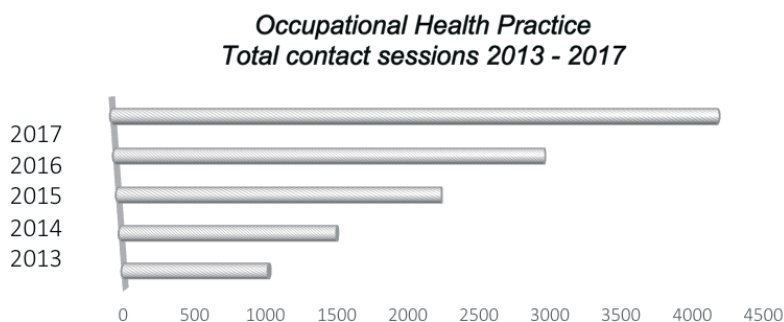


Figure 6: Annual totals: OHP client contact sessions since 2013

Cumulative number of contact sessions 2017

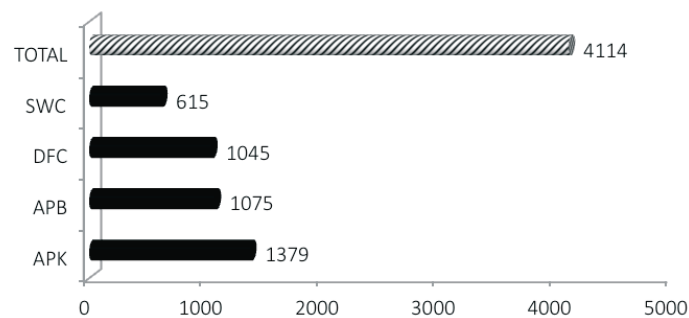


Figure 7: Number of client contact sessions per campus

Periodic medicals are conducted on at-risk groups guided by the Health Surveillance Matrix. Following, in Table 6 and Figure 8 are some examples and uptakes of client contact session types:

Table 6: Client contact session types

Client contact session types	Number
Occupational Healthcare Resilience Programme ELG, PA's and 50 HOD's Radiation medicals Pre-placement-, baseline- & periodic medicals Public Driver Permit assessments Travel Medicine (pre-travel assessments; travel bags) Blood tests Post-exposure prophylaxis (PEP) after needle stick injury Lung function tests Hearing tests (audiometry) Eye tests (vision screening) Emotional debriefing	3049
Injuries and emergencies	79
Primary Healthcare Vaccinations (including Influenza campaign) Consultations	868
Ill health retirement & Incapacity assessments	24
Campaigns Movember PSA campaign	94
TOTAL CONSULTATIONS	4114

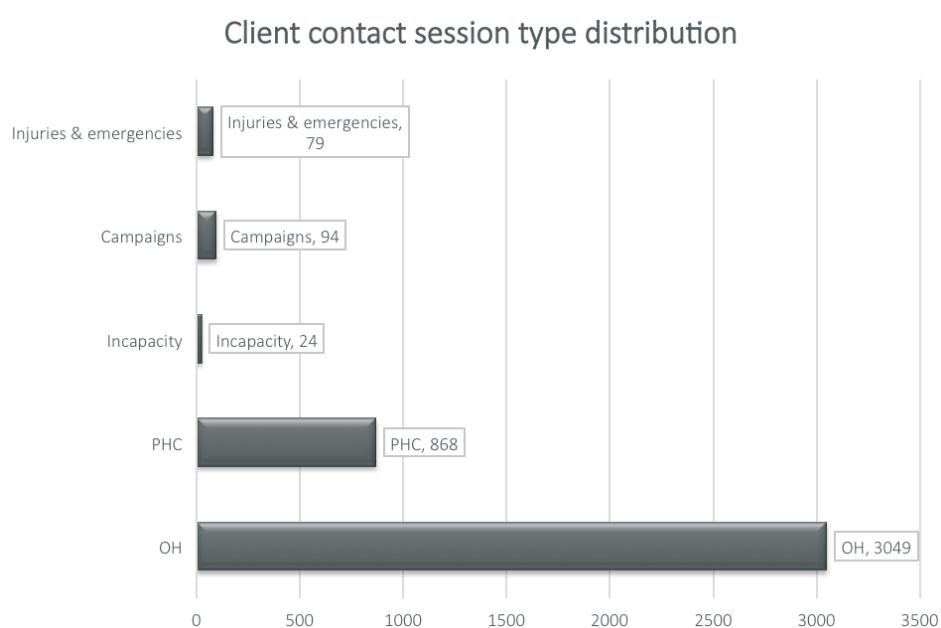


Figure 8: Client contact session type distribution for 2017

1.3.6 Food Safety Auditing

Four rounds of auditing was conducted in the reporting period. The food safety practices of food service providers on UJ premises were assessed. Food safety auditors conducted the audits in February, June, August and October.

HACCP certification project

A gap audit was conducted in November/December 2016 to assess HACCP certification readiness of four UJ Food provider environments, namely JIAS, Madibeng lounge, STH Main Kitchen and Design Café. Although insufficient equipment and facilities initially seemed to preclude the four spaces from achieving certification, the leading finding in the audit report was related to sub-optimal documentation. This obstacle has been overcome with dedicated support and **HACCP certification has been achieved. This development constitutes a first for an HEI in SA.**

For the period, UJ attained an average of **88%** against Hazard Analysis and Critical Control Point (HACCP) criteria* (internationally accepted norm), equalling the minimum international criterion of 85% yet 2% lower than the UJ-adopted 90% compliance level as minimum criterion for UJ food service providers.

Compared to 2016, when an annual average of 92% was attained, this indicates that Food Safety has decreased by 4%. No food safety risks to the consumer were identified, despite the overall drop of 7% in microbiological score. No pathogens were noted and the score, according to the auditors, is still very high for such outlets.

Poor practices included lack of temperature control, sanitizing of food utensils not done during the day, increasing the risk of contamination, incorrect storage of cutting boards, incomplete documentation and storage of prepared food, and finally staff wearing jewellery and incorrect personal protective equipment (open shoes, no mop-caps and hair covers).

Results are displayed in Table 7. View trends in Figures 9 and 10.

*Auditing occurs against the international HACCP food provider criteria; a minimum of 90% should be attained. Total scores are weighted as follows:

Housekeeping and Maintenance = 50% of score
Microbial (bacterial count) = 50% of score

Table 7: Food Safety Auditing 2017

UJ FOOD SAFETY AUDIT RESULT 2017												
	HOUSEKEEPING & MAINTENANCE Score				MICROBIAL Score				TOTAL SCORE			
	Mar	June	Aug	Oct	Mar	June	Aug	Oct	Mar	June	Aug	Oct
OVERALL AVERAGE	85	84	74	74	99	96	98	92	93	90	85	83
APB	84	86	70	84	100	100	94	95	91	91	84	90
APK	89	96	82	75	100	100	100	90	94	98	91	83
DFC	84	closed	76	66	100	closed	97	95	92	closed	84	82
SWC	82	90	60	73	99	88	100	84	91	89	75	75
ISLAND (n/a)	n/a	n/a	73	67	n/a	n/a	100	100	n/a	n/a	87	84
JIAS	90	n/a	94	75	100	n/a	100	75	95	n/a	97	75

Food Safety Performance Annual average

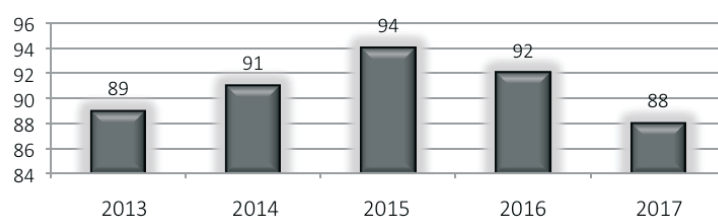


Figure 9: Annual average Total Food Safety Score attained at UJ Food outlets since 2013

The microbial score serves as a marker for food pathogens tested for on the hands of staff, cutting boards, dish cloths and food items present at food outlets. The annualised microbial score in 2017 was 97%, compared with the 99% in 2016. See Figure 9 for the annualized scores since 2012.

Microbial score (50% weighting of Total Food Safety Score)

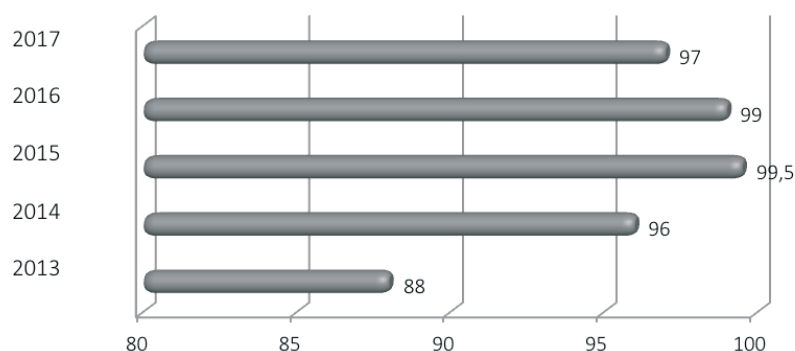


Figure 10: Microbial score (50% weighting of total score) attained at UJ Food outlets since 2013

1.3.7 Event medical risk management

The OHP 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 the Event Risk Manager, is analysed for its medical risk.

In line with contractual provision by Netcare911, 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 decided by Netcare911 in accordance with the SANS 10366:2012 standard. Care is taken to ensure that medical responders act within their Scope of Practice and that they are duly registered clinicians with the Health Professions Council of South Africa and the South African Nursing Council.

A total of **80 events**, of which **10** were scheduled and **66 unscheduled** on the UJ Year programme, were assessed for event medical risk during the reporting period. There were 4 postponements. The obvious major medical event planning and standby were for the Registration period, categorized as medium risk by the SAPS. Registration's medical standby amounted to R165 878, applying a new approach to reduce (halve) the cost. Netcare911 (N911) provided on site standby assistance for 13 events, while notifications to N911 were issued for 66 events during the reporting period.

See Figure 11 for an annual trend analysis.

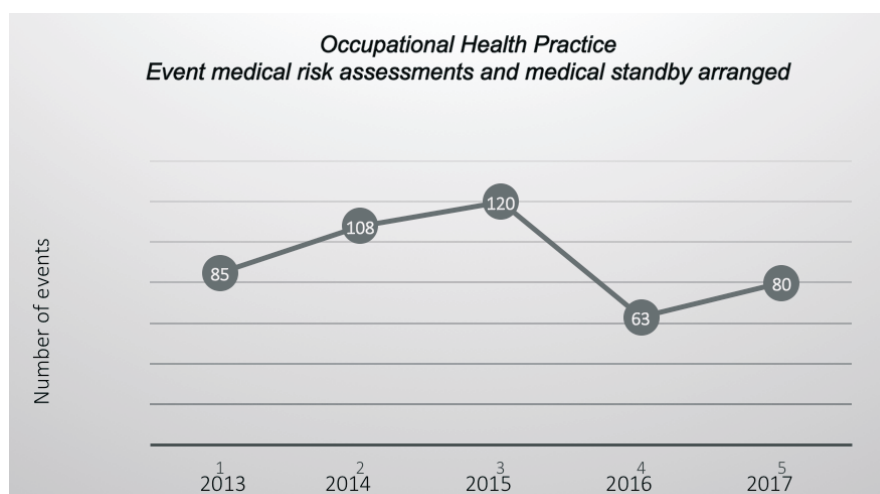


Figure 11: Annual event medical risk assessments since 2013

1.3.8 Emergency medical response

Response to calls for assistance is prioritized. Two-way radio communication is monitored during office hours. Deployment and co-ordination of medical response are done at incidents where assistance is called upon. Professional decisions are taken on Netcare911's deployment.

A comprehensive proposal was prepared for MEC after research into gaps in emergency medical response at UJ. The proposal was approved. As part of the no-cost solution, the mobile application known as **MySOS** was introduced to the UJ community. All staff and students have received invitations to accept the application on their cell phones. The purpose is to shorten reaction time in case of a medical emergency at any UJ site.

1.3.9 Radiation exposure risk management

Monthly dosimeter disks are ordered from SABS for radiation workers at UJ. After a 4-week wearing period the batch is couriered to SABS for analyses. The results are evaluated by the UJ Radiation Protection Officer (RPO) and Occupational Medicine Practitioner.

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 supported by this Practice to audit sources and practices, and execute his legal duties by providing him with sensitive radiation detection equipment and an office.

1.3.10 Water Quality health risk assessments

The bi-annual Water Quality Audits (Occupational Hygiene surveys) conducted by this Practice in 2017, in fulfilment of the Hazardous Biological Agents regulations under the Occupational Health and Safety Act 85 of 1993, are summarized below.

The three components of the project were:

a) Legionella Risk Assessment and quantitative survey

The National Health Laboratory Service was requested to undertake the study aimed at identification of high-risk water sources in geysers, gyms, pools, residences, fountains and tanks. Preventative sampling was done at these zones on each campus.

Findings:

- i. Legionella bacteria were not detected in the samples.
- ii. Hot water supply in residences is set at 55°C, while 60°C is recommended to prevent growth of Legionella
- iii. The fountain at APB is non-functional and should be decommissioned

Recommendations:

- i. Temperature control in tanks and systems may pose a risk for Legionella species to grow, therefore cold water must be maintained below 20°C and hot water above 60°C
- ii. Service boiler tanks and cold water tanks annually
- iii. Remove plumbing dead legs to avoid stagnation of water in pipes
- iv. Insulate pipes where needed to ensure temperature control.

b) UJ Bottled water

Three samples were randomly collected from UJ and analysed against the standards for drinking water (SANS 241-2015).

Finding:

All of the analysed parameters complied with drinking water limits.

c) Municipal water

Four samples were collected by Waterlab, an accredited SANAS laboratory and compared with a full suite of testing against SANS 241-2015. Chemical quality and bacteriological quality was further assessed.

Findings:

- i. The APB sample was deemed fit for human consumption.
- ii. Although the heterotrophic plate count at APK and the colour of the SWC and DFC samples exceeded the drinking water limits, they are indicators of operational shortcoming, and should therefore not impact human health.

1.3.11 Influenza campaign

The annual Influenza campaign took place during April and May at all campuses: free of charge to employees. A total of 600 doses were procured and 503 doses administered. Table 8 depicts the demand/uptake per campus.

Table 8: Influenza campaign 2017

INFLUENZA CAMPAIGN 2017				
APK	APB	DFC	SWC	TOTAL
215	43	165	80	503

The uptake trend for the past 8 years is reflected in Figure 12. N-95 masks have been ordered and are always kept in supply in case the need to curb the spread of droplet-spread respiratory disease arises.

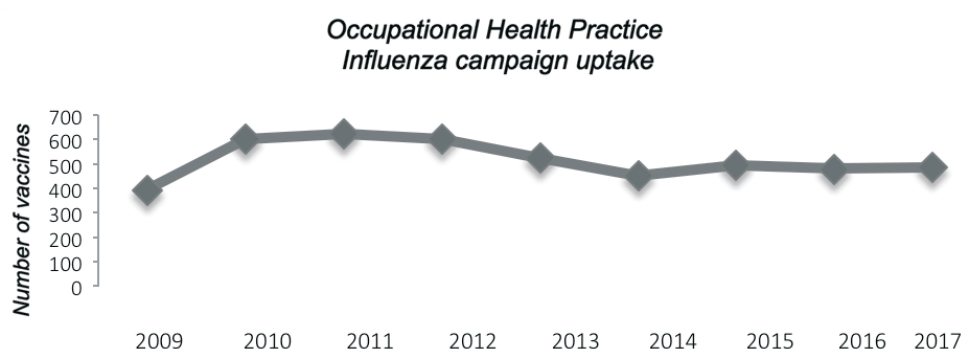


Figure 12: Influenza campaign uptake since 2009

1.3.12 Movember campaign

The primary preventative role of the OHNP guides the second annual health promotive campaign that we offer: each year in November, an invitation is extended to UJ male employees above the age of 45 to have complimentary PSA blood tests done, followed by a feedback session and referrals if indicated. **94** men benefited from early screening for prostate cancer in 2017.

1.3.13 Travel Medicine

- Pre-travel assessments were required from official travellers. They received vaccines, first aid bags and travel medicine. A total of **122 consultations** were devoted to travel health during the reporting period. Figure 13 shows the distribution of consultations since 2013;
- An outbreak of Zika infections in South America, with its associated microcephaly and Guillian-Barre syndrome, has spread to multiple countries. A risk exists for pregnant females considering travel to the affected areas. Such a travel alert was issued to the UJ population; monitoring for risk to UJ travellers continues;
- A yellow fever outbreak in Angola, which has resulted in more than 1 400 suspected cases, has spilled into the DRC and further afield into mid-Africa. A shortage of vaccines exists for preventative campaigns. *Aedes aegypti* mosquitoes that transmit dengue and Zika viruses also transmit yellow fever virus.

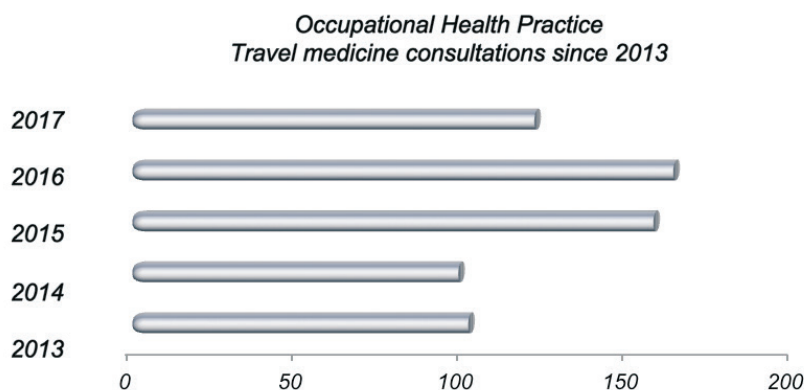


Figure 13: Travel Medicine consultations since 2013

1.3.14 Needle stick injuries

Post-exposure prophylaxis is available to any clinician within one hour after exposure to blood in the line of duty. Cases involving employees are processed as Injuries-on-duty and are reported to the Workmen's Compensation Commissioner. No such injuries occurred during the reporting period.

1.3.15 Vaccination Programmes

A total of 663 vaccines were administered to food handlers, travellers, healthcare professionals and those exposed to sewerage and Hazardous Biological agents as in Table 9.

Table 9: Vaccines administered: 2017

663 VACCINES ADMINISTERED				
Vaccine	APB	APK	DFC	SWC
Hepatitis A	0	0	0	0
Meningitis	0	4	0	0
Typhoid vaccine	4	20	5	0
Measles	0	0	0	0
Yellow Fever	5	10	0	2
Hepatitis A & B	6	22	7	1
Hepatitis B	0	0	0	0
Tetanus	4	11	0	0
Hepatitis A & Typhoid	0	0	0	0
SUB-TOTAL	19	67	12	3
INFLUENZA CAMPAIGN	43	215	165	80
TOTAL	62	341	177	83

The total number of vaccines administered year-on-year for the past 5 years has averaged at around 650 vaccines per annum, as in Figure 14.

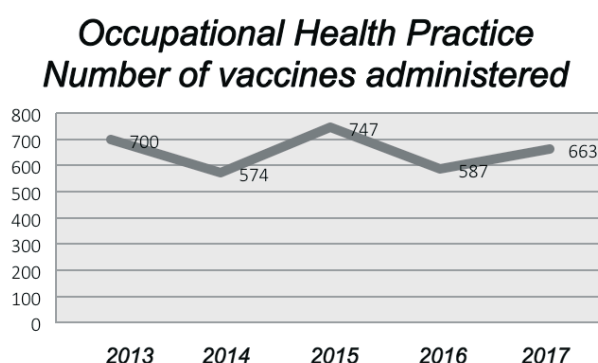


Figure 14: Total number of vaccines administered annually since 2013

1.3.16 Executive-, PA- and HOD Resilience Programmes

a) Tiers

The three tiers of the UJ Resilience Programmes are offering on-going assessments and support to the clientele. The Executive Resilience Programme is devoted to the ELG, the PA-RP programme to the PA's of the ELG and the HOD Resilience Programme (HOD-RP) to the 50 existing clients on the register. Further roll-out of the HOD-RP is dependent on further resources.

b) Assessments

30 consultations were devoted to the three programmes for the reporting period. The baseline medical examination is followed by an assessment and evaluation by the Occupational Medical Practitioner. From here prescribing, referral or other interventions occur. This provides the client with year-on-year progress tracking and response to treatment.

ERP clientele are sponsored to attend UJ Gyms at the campus of their choice.

For the period, 31% of the ELG was assessed upon request. Coronary risk was calculated according to the Framingham risk score, and referrals were offered to coronary angiogram- or calcium score scans.

1.3.17 Mental health management

Spontaneous contact made with this Practice or psychological/psychiatric emergencies often prompt customised or discreet interventions. PsyCad or external psychologists/psychiatrists are consulted for such a service and for professional reports. This essential service is provided from the Executive Resilience cost centre and it demonstrates caring towards the employee or colleagues of an employee in need. A report from a clinical psychologist or psychiatrist will be the determining factor in incapacity case management.

CARING

For the period 19 interventions (3 sessions are sponsored per client per issue) were arranged for eight employees.

1.3.18 Business Continuity

In September 2015 the process to brief Deloitte SA on our business processes, as part of the UJ risk management strategy, was concluded and a Business Continuity Plan has been finalised. The Plan was reviewed in May 2017.

2. STRATEGIC FOCUS AND TARGETS

2.1 OHP Strategic objectives aligned with UJ Strategic Plan 2025

The Practice's strategic alignment with UJ strategic objectives numbers four, five and six finds expression in various ways.

a) UJ Strategic objective 4: An Enriching Student Friendly Learning and Living Experience

Occupational Health Risk Assessment: laboratories

The contribution of the OHP 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 Safety monitoring

Food providers on campus are audited for compliance to food safety standards, yielding quality food and mitigating the risk of food poisoning.

b) UJ Strategic objective 5: National and Global Reputation Management

Travel Health risk surveillance and clinic

The UJ OHP has grown its assessment of destination travel risk for UJ travellers. Screening emerging travel health risk is an ongoing service. The risk is applied to the UJ context, and travel alerts or articles are posted on intranet and distributed to UJ Travel Co-ordinators.

Professional networking

Nationally, contact has been established with the Department of Labour's Directorate Occupational Health and Hygiene, the SA Society for Occupational Health Nursing Practitioners (SASOHN) and the SA Society for Occupational Medicine (SASOM). Peers at HEIs are periodically contacted for benchmarking purposes. Externally, the HOD of this Practice serves as a member of Medichem, the International Commission on Occupational Health's technical committee on Chemicals in the Workplace.

c) UJ Strategic objective 6: Fitness for Global Excellence and Stature

Risk management and mitigation of risk

The OHP has created awareness among high risk environments, such as FS and FHS, on under- and post-graduate 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.

Strong service point

A welcoming, caring and service orientated Practice was shown by a year on year growing utilization rate of the service and narrative feedback that displays appreciation for the service at evidenced positive feedback.

Legal and ethical compliance

Legal compliance occurs principally in accordance with the occupational health roles in the Occupational Health and Safety Act, 85 of 1993 as amended, as well as the wider regulatory framework.

Ethical compliance is evidenced from zero confidentiality breaches, a climate of caring, collegiality and professionalism in line with the Code of Ethics of the International Commission of Occupational Health and the SA Nursing Council.

2.2 OHP strategic direction, goals and targets for 2018

- a) Compliance with two legal mandates
 - i. Health Surveillance of UJ staff to prevent impacts of occupational stressors such as chemicals, biological agents, physical stress, noise and radiation on health. We conduct lung function tests, blood tests, hearing tests and medical assessments on all staff potentially exposed – the UJ Medical Surveillance Programme is formatted on annual/bi-annual cycles;
 - ii. Occupational Health Risk Assessments and Occupational Hygiene surveys: an annual Health Risk Audit Plan is followed to accommodate the prescribed intervals. For acute/emerging risk, additional surveys are designed and arranged;
- b) DFC and APK clinic extensions to be operationalised. This will provide professional space to work in;
- c) Surveillance for emerging communicable disease, e.g. such as Listeriosis (focus on Food Safety is therefore underscored)
- d) Radiation Protection Control System: a survey among UJ stakeholders is underway for February 2018 to assess the current operational system;
- e) An application towards accreditation for UJ as a CPD Service Provider for Professional Nurses under the SA Nursing Council, was suggested to the HOD: Nursing at FHS;
- f) Finalize input by Technical Team on the *Potentially Disrupted Healthcare Services due to Protest Action* document and submit to MEC;
- g) CCMDD – pilot project to provide chronic medicine and monitoring for employees with chronic conditions at DFC – MT;
- h) Oversee Work Integrated Learning for Occupational Health- and Environmental Health students. Liaison with Prof Swart (Feb);
 - i) CPD Service Provider: application to SA Nursing Council. The aim is to facilitate Portfolios of Evidence for Professional Nurses in the employ of UJ. CPD is compulsory and submission of such Portfolio will be a prerequisite for annual SANC registration to practice as from 1-1-2019.

2.3 OHP Scorecard 2018

The 2018 scorecard is shown in Table 10.

Table 10: OHP Scorecard 2018

KPA	KPI	Tracking	2017 position	Targets 2018	
Strategic objective 6: Fitness for purpose				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	100%	90% positive feedback	95% positive feedback
	Client Satisfaction	Client satisfaction survey	100%	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	87% spent	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	253%	95% uptake of annual Medical Surveillance Programme	95% uptake of annual Medical Surveillance Programme
	Legally compliant Occupational Health Risk Auditing	Occupational Health Risk Audit Plan and risk-based Risk Assessments executed	107%	90% of Audit Plan executed	90% of Audit Plan executed
KPA 6.2 Risk management and mitigation of risk	Effective Occupational Health risk management system	Occupational health risk assessment reports. Updated operational and risk registers. Emerging infectious disease screening & alerts.	Surveillance active	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%	0% adverse events	0% adverse events
	Preventable event medical risk incidents	Event medical risk assessment Medical plans Situation reports	0	Zero incidents	Zero incidents

Strategic objective 5: Reputation management					
KPA 2.2 Active participation in international networks	U-21 participation when Registrar indicates readiness	Establish benchmarking	n.a	Research and select sites to visit	Maintain virtual contact
KPA 5.2 Results realising and collegial leadership approach	Values-driven staff	Staff performance ratings	Average of 3.5	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%	0 % occupational disease	0% occupational disease

2.4 Additionally adopted targets derived from legal requirements and emerging risk

Table 11: Additionally adopted targets derived from legal requirements and emerging risk

	Entity	Tracking	Target
1	Event medical risk at academic and cultural events	Medical Operational Plans Netcare notifications Communication with stakeholders UJ Event Safety & Security committees and charter	All medical emergencies at UJ events attended to within 5 minutes by duly registered responders
2	Food Safety auditing	Audit reports on each food vendor	90% compliance to HACCP norms
3	Water Quality testing 3.1 Legionella pathogen in boiler rooms, cooling towers; heating systems; 3.2 Bottled water: microbiology, metals & chemicals 3.3 Borehole and municipal sources: suitability as potable water	Audit reports every 2 years Ad hoc audits	Compliance with 3.1 EWGLI guidelines < 1000 CFU/litre 3.2 TWQR standard by DWAF; SANBWA; SABS 3.3 SANS 241:2015 standard for drinking water
4	Provision of oxygen, equipment and medical disposables for UJ patient transfer vehicle	Stock levels & register maintained Oxygen provided and cylinders hired Infection prevention and control SOP	Continual supply chain upheld to ensure efficient service

5	Emergency medical response by clinic professionals and Protection Services	Prompt response to walk-in emergencies and calls for assistance	Prompt response to walk-in emergencies and calls for assistance. Netcare911 (dedicated service provider) summoned if indicated; use of MySOS mobile app by any UJ employee
6	Radiation exposure risk management	Monthly Dosimetry badges issued/collected/analysed Baseline & periodic medicals on all radiation workers	No skin dose > 0,15 mSv per wearing period Annual whole body limit of 20 mSv never exceeded
7	Annual Influenza campaign	Free immunizations to staff at all campuses during April	The demand is for around 500 doses p.a. Maintain this figure. Increase this figure in case of pandemic.
8	Annual Movember campaign	Free blood tests, feedback and referrals to male staff members at all campuses during November.	The demand is for around 70 tests per annum. Maintain the service
9	Travel Health	Travel Health screening Travel alerts Vaccinations	Official travellers screened pre and post travel. Alerts and outbreaks screened continually. Travel advisories sent timeously to travellers in case of ratified travel risk.
10	Needle stick injuries	COLD procedure followed in conjunction with immediate Post-exposure prophylaxis (PEP) held on site.	Patient receives Post Exposure Prophylaxis, counselling and blood tests within 1-4 hours. Re-testing at prescribed intervals. Zero seroconversion rate.

2.5 Support Services Indicators: OHP application

The central UJ document tracking performance progress for the Support domain, entitled "Support Services Indicators" refers. Three of the four elements apply to the Occupational Health Practice, and indicators were assigned as in Table 12 below.

Table 12: UJ Support Service Indicators: Occupational Health Practice contribution

UJ assigned Key Performance Areas	OH Practice Performance Indicators	2018 target
1. Transactional support services operated efficiently and effectively	a) Occupational Disease b) Food Safety Compliance rate c) Radiation exposure risk	0% 88% UJ average No skin dose > 0.15 mSv per wearing period. Annual whole body limit of 20 mSv never exceeded.
2. Satisfaction with services provided by Support Divisions	Positive narrative feedback	95%
3. Effective project management	Health Risk Assessments: annual completion rate Medical Surveillance targets: annual completion rate	90% 95%

2.6 Health Risk Audit Plan 2018

An audit plan guides annual work. See Table 3. Risk is assessed by priority – aligned with budgetary provision. A mix of external professionals and the clinicians on the team provide for the execution of the plan. Each campus has its own health risk assessment plan, which outlines the rollout to each environment.

2.7 Goals and targets for 2025

By 2025 the OHP at UJ should be renowned for its leadership and stature among peers locally and globally, and continual research on leading practice at a HEI, including the use and management of Hazardous Chemical Substances, should be published. The performance above is dependent on an inspired, committed team with long-term tenure at UJ.

3. EMPLOYEE PROFILE

3.1 Overview

The Occupational Health Practice was conceptualized and founded in 2004 by the Head of the Practice as the only staff member. In time, given firm growth, additional positions were motivated for. Today the team of 9 consists of its manager, three Professional Nurses, a Doctor, an administrative assistant, two student assistants and the UJ Radiation Protection Officer.

The strategic and operational core of the OHP is at APK. From here clinicians at each campus are guided and empowered 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.

It has to be noted that owing to growth in the size at DFC campus, and the fact that UJ has enlarged its staff complement by 800 staff members, the need for a full time Professional Nurse has become an urgency. This was shared with the Registrar, and a locum Professional Nurse has been appointed as from 1 Aug to provide coverage for equitable service delivery whilst motivation is prepared for an additional post at SWC/APK.

An Occupational Medicine Practitioner attends the OHP at an average of 3,5 days per month 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 radio-active sources/practices. This Practice conducts radiation medicals to register radiation workers, periodic assessments and continuous monitoring of exposure. Jointly, radiation incidents and investigations are managed by the team.

An administrative assistant and two student assistants provide (critical) logistical support.

3.2 Employee profile

Nine positions are associated with the OHP: five permanent, two independent contractors and two temporary positions as reflected in table 13.

Table 13: OHP Employee Profile

Job category	No	Occupational level	Job grading	Perma- nent	Contract	Tempo- rary
Non-academic	1	Professionally qualified, experienced specialists and mid-management	6			
	2	Skilled, academically qualified	8			
	3	Skilled, academically qualified	8			

Non-academic	4	Skilled, technically qualified	11			
	5	Skilled, academically qualified	8			
	6	Professionally qualified, experienced specialists and mid-management	n/a		IC	
	7	Professionally qualified, experienced specialists and mid-management	n/a		IC	
	8	Student assistant	n/a			
	9	Student assistant	n/a			

3.3 Equity profile

The population group equity profile of the OHP at 60% is close to the national African figure of 73,5% and the geographical figure of 76,1%. The figure compares well with the Registrar's portfolio, where 68% of staff is black.

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

Table 14: OHP Employee Profile

Black	White
3 (60%)	2 (40%)
Male	Female
0	5

3.4 Appointments, resignations and succession planning

The staff complement has remained stable. 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 campus upgrade has further enlarged the nature and scope of her work, and in future this will have to be taken into consideration for allocation of additional resources.

The UJ Occupational Medicine Practitioner resigned in December 2017, leaving a vacancy that requires urgent attention. The recruitment process was activated and a search for an interim OMP has been instituted.

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

All nursing professionals are in possession of Dispensing Licences.

The annual SA Society of Occupational Health Nursing Practitioners (SASOHN) congress was attended by three professional members. Miranda Tshabangu undertook a SAMTRAC course in August 2017.

Margareth Langeveldt is studying through UJ towards B.Cur Ed et Admin and Anne Henning has completed Year one of the Further Higher National Diploma Occupational Health Nursing Science (UJ). The Head of this division is enrolled in a doctoral study (D. Phil Nursing) through Unisa.

3.6 Performance re retention and attraction of top employees

Not applicable.

3.7 Achievements and leadership development of employees

The OH team members have been allocated roles and responsibilities for selected components of the Practice. Accordingly, members do research and benchmarking, and source opportunities for development. They report on and drive their sub-portfolios as well.

Name	Roles	GES contributions 2017
Miranda Tshabangu	Ergonomics Vision screening Benchmarking surveys in SA	Fitness project for Protection Services
Anne Henning	Food Safety Spirometry	HACCP Food Safety certification project 2016/2017
Margareth Langeveldt	Travel Health Audiometry Printing of client files Movember & Influenza	Netball team
Elana Venter	Events	Presentation of paper at International Congress Medichem

The Radiation Protection Officer holds membership of the World Institute for Nuclear Safety.

3.8 Management of vacancies

The OMP resigned and recruitment of a candidate is underway.

3.9 Management of overtime

No overtime remuneration applied.

3.10 Other applicable information

3.10.1 Dynamic nature of the OHP

The nature and scope of service delivery is highly adaptable to UJ need and risk. In addition new research and modified institutional processes result in continual health risk assessments with varying client bases. The DFC campus upgrade has, in addition, enlarged the physical area of responsibility for the OHP.

3.10.2 Capacity exceeded

The practice has, since inception, only been able to address Occupational Health Risk by priority due to low human resources capacity. Whilst we appoint student assistants and a locum where possible, the service we deliver is only sustainable with insourced professionals. The services of an additional permanent professional is now required to cope with compliance and risk.

The UJ ratio OHP*: staff is 1:1510, while the industry norm is 1:500.**

***OHP: Occupational Health Practitioners, including the HOD:
3,7 Professional Nurses and the Dr 24h/month.**

****Total UJ headcount as at 2 February 2018: 5590**

Every possible effort is dedicated to attain optimum service delivery despite the shortfall.

4. COMMUNITY SERVICE, STAKEHOLDER ENGAGEMENT, NATIONAL AND GLOBAL REPUTATION MANAGEMENT

4.1 Community service

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

4.2 Stakeholder engagement

4.2.1 Internal stakeholder engagement reports/initiatives

- a) Protection Services
- b) Primary Health Care
- c) Occupational Safety department
- d) PsyCaD
- e) Unit for Quality Promotion
- f) Biokinetics Clinic APB
- g) UJ Gym
- h) HR Wellness and Employee Relations department
- i) Operations

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 exists. Ambulances are provided with medical disposables, oxygen and monitoring/defibrillating equipment. The OHP informs medical responders of the annual Basic Life Support (BLS) course to keep clinical skills updated in accordance with the SA Resuscitation Council protocols and the HPCSA Scope of Practice.

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

The Occupational Safety Department is 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 patients to 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 factors. 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.

The UJ Gym delivers a service to ELG and HOD members of the UJ Resilience Programmes.

The HR Wellness and Employee Relations departments assist this Practice with incapacity cases.

4.2.2 External stakeholder engagement reports/initiatives

- a) Occupational Hygienists
- b) National Institute for Occupational Health (NIOH)
- c) Netcare911
- d) City of Johannesburg Events Management Forum, Environmental Health division & Public Health department
- e) National Institute for Communicable Diseases (NICD)
- f) LTL Food Hygiene Auditors
- g) Department of Health: Communicable Diseases division, Directorate Radiation Control and National Laser Centre
- h) Department of Labour: Directorate Occupational health and Hygiene
- i) SA Society of Travel Medicine
- j) International SOS
- k) Centres for Disease Control (CDC)
- l) World Health Organization (WHO)
- m) MEDICHEM

Occupational Hygienists are auditors of Health Risk at UJ.

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

Netcare911 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: i.a. the availing of SME's, 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 localized 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 Food Safety audits all UJ food outlets.

The Department of Health's Communicable Diseases division would be the contact point for Notifiable disease, 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 lab.

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

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

Medichem is the Scientific Committee on Occupational Health in the chemical industry – a body of the International Commission on Occupational Health (ICOH).

5. RESOURCE MANAGEMENT AND SUSTAINABILITY

5.1 Financial status and expenditure

Expenditure occurs within the two budgets allocated. An Occupational Health cost centre and a cost centre for the Resilience Programme are operational.

During the reporting period, 84% of the former and 93% of the latter was spent compared to the approved budget.

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.

5.2 Effective management of financial and other resources

An asset register is maintained. All stock (medical disposables) issued to the UJ Protection Services staff is recorded. All stock is procured under condition of good expiry dates.

5.3 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 is disposed of correctly. Recommendations on correct disposal of Hazardous Chemical Substances and radio-active 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 PC's at night.

6. TRANSFORMATION, LEADERSHIP AND LEADING CHANGE

6.1 Nature and scope of initiatives to enhance the OHP's climate and culture & initiatives to support the UJ Transformation Plan

A climate of caring and collegiality has been created purposively, setting the scene for open dialogue, consistent project management and resolution of matters among colleagues as they arise. We value diversity in principle and therefore embrace inclusivity. We believe in self-evaluation and recognition of colleagues' achievements. We respect our clientele; treat them with competence, non-discrimination and confidentiality in mind. We further pursue evidence-based practice and professional independence.

6.2 Nature and scope of initiatives to enhance the service delivery and value proposition

Initiatives in Table 15 reflect the Practice's pursuit of GES.

Table 15: Progress reflected on focus areas for the OHP 2017

Focus area	Progress as at December 2017
a) UJ Food Safety certification strategy: national certification by the HACCP system was envisaged as pilot project for STH, VC kitchen, JIAS and Design Café. UJ projected to become the first SA HEI to achieve this certification;	The four environments were introduced to the certification process and received training and support towards the actual certification audit that was undertaken in September 2017. The certification was successful and this achievement is a first in South Africa for a HEI.
b) The HOD of this Practice is enrolled in a doctoral programme focusing on guidelines on the use of chemicals at a HEI chemistry laboratory;	Research proposal is being prepared.
c) Assimilating an additional 642 insourced workers into the Medical Surveillance Programme by conducting pre-placement medicals on all.	Mobile units were sourced to conduct 586 medicals; this occurs in addition to the 337 medicals as target for the year, bringing the total to 923.
d) Design and implementation of the new Fitness Programme for Protection Services in collaboration with Prof Yoga Coopoo; commencing at DFC.	The OH Practice has assessed all Protection Services staff members medically and had fitness assessments done in March 2017; the referrals to gyms follow.

Outcomes for the following quantifiable targets are reflected in Table 16.

Table 16: Quantifiable targets of the OHP

Entity	KPI	Progress: Dec 2017
1. Event medical risk mitigation at academic and cultural events	1. All medical emergencies at UJ events with an on-site N911 presence are attended to within 5 minutes by duly registered medical responders	1. Achieved for 80 events
2. Food Safety compliance	2. 90% compliance with HACCP norms	2. 88% UJ annual average
3. Response to calls for medical assistance	3. 100% response to calls to the OHP or assistance	3. Achieved
4. Radiation exposure risk	4. No skin dose > 0,15mSv per wearing period. Annual whole body limit of 20 mSv never exceeded	4. No whole body limits exceeded.
5. Needle stick injuries	5. Patient receives Post Exposure Prophylaxis, counselling and blood tests within 4 hours after exposure.	5. Achieved (nil reported)
6. Narrative feedback	6. 95% positive narrative feedback	6. 100% positive narrative feedback received
7. Annual Influenza campaign for staff	6. 500-600 free immunizations to staff at all campuses during Apr/May	6. 600 doses have been procured; uptake was 503.

6.3 Nature and scope of the OHP's leadership footprint/impact within the institution, civil society and the national and international arena.

6.3.1 ISC Food Safety certification for UJ food vendors

A pilot project that has been underway to achieve HACCP certification for UJ food service providers, namely at STH Main Kitchen, JIAS, Design Café and Madibeng lounge, has been completed successfully. A gap audit found that certification was achievable on condition that documentation is implemented to reflect practices and processes. Apart from reputational excellence, academic excellence may be enhanced greatly given the achievement of HACCP certification in September 2017.

6.3.2 International representation: Medichem scholarship and presentation at annual congress 2017

E. Venter is a member of the Medichem Scientific Committee on Occupational Health in the chemical industry – a body of the International Commission on Occupational Health (ICOH). A presentation: Academia versus industry: variances in chemistry research laboratories, was accepted. A scholarship was awarded to the HOD of this Practice who presented at the International Congress in September 2017 in Vienna. Refer to Annexure A. <http://medichem.org/medichemViennaAustriaCongress/files/Fotos.pdf>

6.3.3 International benchmarking at two top universities in Europe

A benchmarking opportunity arose to coincide with the Medichem congress, as proposed by the Registrar. The two cities to be visited were Zurich and Vienna and two universities were selected: ETH Zurich and the University of Vienna. Selection was informed by three ranking systems. Contact was sought and correspondence established with professional peers. Dates were set and visits conducted on 11 and 12 Sep 2017.

Significantly, it was found that UJ's on site Occupational Health service encompasses a larger number of offerings that may provide for dedicated, informed coverage of occupational health risk. Compared to Austria and Switzerland, which draw services from local authorities and have no on site clinics, UJ has to insource services such as emergency medical response, security, fire safety and hazard response – even Occupational Health services. A last observation was that no Primary Healthcare is offered, because all students have medical insurance.

The benchmarking report is attached as Annexure A.

6.3.4 Networking with Johannesburg City Council

Local involvement with the City Council: contact and bilateral liaison occur regarding event risk management, public health threats and food safety

6.3.5 U-21 benchmarking

The Registrar requested that international benchmarking be conducted within the Universitas-21 group. The OHP was assigned the USA and Canada to investigate. Good contact has been established with the University of British Columbia in Vancouver, where the service closely resembles the UJ portfolio.

6.3.6 Radiation Protection Officer

Dr Dazmen Mavunda has been the chairperson of the Advisory Committee in Industrial Physics at Tshwane University of Technology (TUT) for the past three years and was also nominated a chairperson for e-learning at the African Radiation Protection Association (ARPA) meeting in Ghana.

Refer to Annexure B for the Annual Report by the Radiation Protection Officer.

6.3.7 MySOS

The mobile application was made available to all UJ employees and students via the current contract with Netcare. Approval was obtained to send invitations to both databases, after which the UJ population now is able to alert emergency services and GPS co-ordinates will be sent to call centres and next-of-kin.

7. CONCLUSION AND WAY FORWARD

7.1 Summary of performance

7.1.1 Sustained excellence

- a) Execution of legal mandates on behalf of the institution:
- Medical surveillance of at-risk employee groups was completed at a rate of 253%* of the scorecard target. Medical assessments included Public Driver Permits, physical assessments, lung function tests, audiometry and blood tests and occurs in accordance with the Medical Surveillance Plan.
 - The unusually high rate of completion is ascribed to the 586 baseline medical assessments that had to be done on insourced cleaning staff – above annual targets;
 - Health Risk Assessments: for the period, 87 health risk assessments were carried out by the OHP prompted by existing or emerging risk. Approved Inspection Authorities conducted quantitative legal surveys and further risk assessments were shared between the OHP team and Occupational Hygienists. The completion rate is at 107% compared to the scorecard target;
- b) 74% of the 4144 client contact sessions for 2017 were devoted to Occupational Health interventions such as the 565 baseline and periodic medical assessments. Embedded in contact sessions were 697 vision screenings, 748 lung function tests and 675 audiometric tests, while blood tests took up 105 sessions and Travel Medicine required 122 visits. A further 21% of visits consisted of Primary Healthcare such as the 663 vaccinations administered;
- c) The biennial Water Quality Audits (Occupational Hygiene surveys) conducted by this Practice in 2017, in fulfilment of the Hazardous Biological Agents regulations under the Occupational Health and Safety Act 85 of 1993, are summarized below. The three components of the project were a Legionella Risk Assessment and quantitative survey, a UJ Bottled water survey and the Municipal water survey. Findings showed that the samples were deemed fit for human consumption.
- d) Event medical risk management was completed for 80 academic and cultural events – only ten events appeared on the UJ Year Programme, necessitating accelerated action to manage the event risks associated with short lead times;
- e) Radiation dosimetry results displayed no deviations beyond reference ranges – thus no occupational overexposure of radiation workers at UJ;
- f) The annual Influenza campaign reached 503 employees across all campuses;
- g) The annual Movember campaign aimed at promoting men's health (early detection of prostate cancer) benefitted 94 clients, who each had a complimentary blood test, evaluation and feedback or referral as indicated;
- h) Food Safety auditing
- The state of food safety at UJ was audited against 90% compliance to HACCP standards. UJ, after steady growth since 2011, achieved an annual average total Food Safety score of 88% in 2017, compared to the 92% in 2016, indicating chiefly lacking temperature control measures by food providers on UJ sites. Food poisoning has, however, effectively been prevented as demonstrated by the 97% average microbial score achieved for all food vendors on UJ premises – a figure that outranks the food industry;
- i) Consistent, high client satisfaction rates and positive narrative feedback exceeding 95%.

7.1.2 Key/unique contributions towards GES in the reporting period

- a) National Food Safety certification for UJ food vendors
- Following six years of Food Hygiene assessments at UJ food vendors, and exceeding international norms for Food Safety, such as a 92% average for UJ in 2016, a level of maturity was reached. This status prompted an assessment towards certification of internal UJ food vendors, namely Madibeng lounge, STH Main Kitchen, Design Café and JIAS, which was embarked upon in 2015. The certification for HACCP compliance occurs in alignment with the International Standards Certification. A gap audit conducted In November/December 2016 revealed that certification is achievable through attention to documentation of systems and processes. The certification audit took place in September 2017 and full certification was achieved: a first for a HEI in South Africa;
- b) Paper presentation by HOD at the Medichem International conference;

- c) Representing UJ at two leading universities in Europe during benchmarking exercise;
- d) Seamless upward adjustment of Medical Surveillance targets to assimilate the insourcing project
Planning, budget and approval has been obtained to assimilate the additional 642 cleaning staff baseline medical assessments as from April 2017. This has had to be managed in addition to the annual target of 355 medical assessments; totalling 997 medical assessments (280% of target).

7.1.3 Key short, medium and long term initiatives in support of the role to enhance the excellence and stature of UJ

7.1.3.1 Short and medium term initiatives

- a) Compliance with two legal mandates
 - iii. Health Surveillance of UJ staff to prevent impacts of occupational stressors such as chemicals, biological agents, physical stress, noise and radiation on health. we conduct lung function tests, blood tests, hearing tests and medical assessments on all staff potentially exposed – the UJ Medical Surveillance Programme is formatted on annual/bi-annual cycles;
 - iv. Occupational Health Risk Assessments and Occupational Hygiene surveys: an annual Health Risk Audit Plan is followed to accommodate the prescribed intervals. For acute/emerging risk, additional surveys are designed and arranged;
- b) DFC and APK clinic extensions to be operationalised. This will provide professional space to work in;
- c) Surveillance for emerging communicable disease, e.g. such as Listeriosis (focus on Food Safety is therefore underscored)
- d) Radiation Protection Control System: a survey among UJ stakeholders is planned for February 2018 to assess the current operational system;
- e) Finalize input by Technical Team on the Potentially Disrupted Healthcare Services due to Protest Action document and submit to MEC;
- f) Centralised Chronic Medicine Dispensing and Distribution (CCMDD) – pilot project to provide chronic medicine and monitoring for employees with chronic conditions at DFC – liaison with the Department of Health;
- g) Oversee Work Integrated Learning for Occupational Health- and Environmental Health students. Liaison with Prof Swart (Feb);
- h) Continuous Professional Development (CPD) Service Provider: an application will be submitted to the SA Nursing Council. The aim is to facilitate Portfolios of Evidence for Professional Nurses in the employ of UJ. CPD is compulsory and submission of such Portfolio will be a prerequisite for annual SANC registration to practice as from 1-1-2019.

7.1.3.2 Long term initiatives

- a) Strong bilateral collaboration with equivalent peers such as in U-21, Sigma Theta Tau International (Honor Society for Nurses), Medichem Scientific Committee and the International Commission for Occupational Health;
- b) Trendsetting in Occupational Health governance at a HEI.

Mrs Elana Venter

Head: Occupational Health Practice

Annexures

ANNEXURE A

Benchmarking report: Visit to ETH Zurich and University of Vienna September 2017

BACKGROUND

Having won a scholarship from Medichem, the *ICOH* Scientific Committee on Occupational Health in the chemical industry*, I was asked to present a research paper at the 2017 conference in Vienna. The opportunity arose to combine the visit with benchmarking exercises at two prominent European universities.

The objective of benchmarking would be to assess practice and debrief stakeholders in Occupational Health at such institutions, in terms of a review of professional duties at UJ and at the UJ Occupational Health Practice.

The cities to be visited were Zurich and Vienna, and the university selection was further refined by a study of the QS World University Ranking 2018 report, the Times Higher Education (THE) World University Rankings 2018 and the Academic Ranking of World Universities 2017. The selection process was finally based on universities similar in comprehensive range of academic offerings and number of students, including some international students.

The decision was to visit the Swiss Federal Institute of Technology in Zurich (ETH Zurich) and the University of Vienna. A lengthy process of studying the targeted institutions' organizational structures and finding the most appropriate contacts followed. Appointments were finalized for 11 and 12 September 2017.

**International Commission on Occupational Health: an NGO in consultative status with ILO, WHO and UN.*

KEY STATISTICS: COMPARISON WITH UJ

University	QS Ranking	ARWU ranking	THE ranking	Student headcount	Staff: student ratio (Source: THE data 2017)	Founding date
ETH Zurich	10	19	10	19233	14.6	1855
University of Vienna	154	151-200	165	35375	20.8	1365
University of Johannesburg	601- 650	401-500	601-800	28122	27.4	2005



ETH Zurich

University of Vienna



PIVOTAL ELEMENTS OF BENCHMARKING COMPARED

Pivotal element	ETH Zurich	University of Vienna	UJ
Organizational structure of OHS	Safety, Security, Health and Environmental Affairs forms the SSHE cluster that reports to HR/Infrastructure department. A sub-unit (CABS) consists of Chemical safety, Lab safety, Bio-safety and Occupational Safety under the leadership of a chemist.	Occupational Health features among Safety, Waste Management, Industrial & Organizational Psychologist and Building projects in a cluster that reports to HR/Facilities Management.	OH Practice reports to Registrar Occ Safety to ED: Ops
Legal accountabilities in OHS	Safety culture ranges from very relaxed to very strict. Awareness process and training underway among academics. Each research group HOD is legally accountable for health and safety.	The supervisors in each domain should be aware of compliance matters, but could consult with the sub-unit for advice.	Designation of responsibilities is embedded at UJ: supervisors are aware of their accountabilities to OHS
Pivotal element	ETH Zurich	University of Vienna	UJ
Emergency medical response to campus sites	<ol style="list-style-type: none"> 1. There are no fences around university property and the university is regarded as part of the city. 2. The VC and Corporate Communication form the core Disaster response team 3. Emergency services are promptly provided by the local authority in collaboration with the hazard team. Invoices are raised for call-outs. 4. Security guards are trained in first aid and Fire Safety. 5. All emergency calls are directed to the Emergency Call Centre at Security. 6. The HOD of SSHE is involved in Disaster Risk Management. 	<ol style="list-style-type: none"> 1. There are no fences and the university is regarded as part of the city. 2. Emergency services are promptly provided by the local authority. 	<ol style="list-style-type: none"> 1. Emergency services by local authorities are unreliable. 2. UJ pays a service provider to provide dedicated services to its staff and students on site.

Event medical risk	The Event Services unit within Security provides permission for an event and issues an security plan and safety plan. If a minor event, stakeholders are informed. If big or involving VIPs, information is spread widely and Security plans accordingly.	No dedicated medical event risk management	Event medical risk management occurs risk-based, within legal framework and for every academic and cultural event at UJ. Risk is treated according to SANS 10366:2012 and medical operational plans created, applying Netcare911, at the cost of the UJ contract.
OH staff and roles	No OH Nursing professionals. The OMP in service of the local authority visits the university to assess risk and do selected medical assessments.	No OH Nursing professionals. The OMP in service of the local authority visits the university to assess risk and do selected medical assessments.	Four Professional Nurses, a Radiation Protection Officer and Occupational Medicine Practitioner appointed, along with administrative staff. Professional staff are competent and empowered to act independently within ethical/legal landscape. Portfolio elements: 1. Health Risk Assessment 2. Medical Surveillance 3. Food Safety auditing 4. Travel Medicine 5. Executive Resilience 6. Disaster Risk Management 7. Event medical Risk management
Pivotal element	ETH Zurich	University of Vienna	UJ
Travel Medicine	No medical service; staff consult with their Travel clinic or the visiting OMP. Staff who undertake a trip capture its risk on a travel risk assessment on an electronic system. If high risk arises, the SSHE is informed.	No medical service; staff consult with their Travel clinic	Comprehensive Travel Medicine clinic where official travel risks are treated as Occupational exposure risks. An SOP, free vaccinations, travel medicine bags, travel alerts and destination health risk assessments are done per visit.

Health Risk Assessments (HRA)	<ol style="list-style-type: none"> 1. Risk Management sub-unit assesses all risk at the University, including work spaces. To ensure independent assessment, all survey are outsourced. 2. The SSHE role is to ensure safe work by securing close contact with all environments. 3. Immediate closure of high risk environments. 4. HRA are announced and conducted together with academics. Training is offered and improvement plans are executed. 5. If high risks are identified, lab staff will call on SSHE to assist in drafting solutions. 	<ol style="list-style-type: none"> 1. OH staff have no authority to disallow high risk work, e.g. precluding a person with asthma from working in a chemistry laboratory. Pregnant females are referred to HR for advice on how to proceed work in laboratories whilst pregnant. 2. Significant focus on human rights: the persons entering a high risk environment must take responsibility for their own lives and risks. 	Immediate closure of high risk environments on the substantiated advice of OH Professionals
Certificates of Fitness	Certificates of Fitness are only issued for mandatory work and are conducted by the visiting OMP.	Certificates of Fitness are only issued for mandatory work and are conducted by the visiting OMP.	Certificates of Fitness are issued to all persons undergoing medical surveillance by the OHNP and the visiting OMP.
Medical Surveillance Programme	No University-based medical surveillance programme. The Swiss Occ Health Institute determines who requires medical surveillance, e.g. Radiation Workers.	No medical surveillance programme	A formal, comprehensive programme of Medical Surveillance is designed by the OMP and includes all periodic medical assessments, based on exposure risk profiles of staff and persons potentially exposed.

Pivotal element	ETH Zurich	University of Vienna	UJ
Food Safety	The Food Inspector from the local canton conducts inspections at premises where food is sold.	The Food Inspector from the local authority conducts inspections at premises where food is sold.	<ol style="list-style-type: none"> 1. Quarterly food safety audits, including microbial surveillance. Non-compliance of food tenants is met with potential expulsion owing to the risk of food poisoning. 2. Reports serve at the Risk Management Committee. 3. Cost incurred by UJ.
Excursions	All persons have medical insurance. Trips are assessed for risk based on an Austrian risk scale	All persons have medical insurance.	<ol style="list-style-type: none"> 1. All excursions within SA borders are assessed for risks to health. 2. Students are requested to submit medical conditions/treatment to HODs accompanying HOD. 3. Netcare911 is notified to be alert to emergency calls based on GPS location. 4. A Guarantee of Payment is issued to enable emergency treatment in a nearby hospital, courtesy of UJ insurance cover.
Residences	Nil	Nil	Multiple residences
Primary healthcare	Not needed: all students/ persons are required to have med insurance cover	Nil. All students/persons are required to have med insurance cover	<ol style="list-style-type: none"> 1. Offered to students with no medical insurance at no cost by the Primary Healthcare service. Medication obtained at no cost from Dept of Health. 2. Staff have to see their own Dr – all have medical aid allowances
Executive Wellness Programme	No University-based programme. A gym discount is given. Medical insurance cover for health matters	No University-based programme mentioned. Medical insurance cover for health matters	<ol style="list-style-type: none"> 1. Comprehensive offering 2. Annual medical assessment with blood tests, virtual scanning and consultations. Nutritional supplements. Free gym access.

Pivotal element	ETH Zurich	University of Vienna	UJ
Chemical Safety; Safety Data Sheets (SDSs)	<ol style="list-style-type: none"> 1. Laboratories keep SDSs 2. SSHE can be consulted for advice 3. Very hazardous chemicals are located in ONE laboratory with high level safety controls 4. Eye wash stations are located at EVERY work station 5. Emergency showers are located WITHIN each laboratory 6. NO wooden benches; all research is conducted within fume hoods 7. Waste is contained in dedicated containers and SSHE collects it for disposal 	<ol style="list-style-type: none"> 1. Laboratories keep SDSs 2. Waste is contained in dedicated containers and is collected for disposal 	<ol style="list-style-type: none"> 1. Planned programme of quantitative and qualitative Occupational Hygiene assessments; 2. UJ OH staff conduct risk-based and preventative periodic Health Risk Assessments and issue advisories 3. Universal post-exposure treatment products kept at clinics for chemical exposures (Diphtherine & Hexafluorine) 4. Laboratories keep SDSs on site 5. Waste is segregated and disposed of in a systematic and safe way 6. Eye wash stations are located at some work stations 7. Emergency showers are located per floor or department 8. In some laboratories, exhaust-ventilated storage 9. Not all chemicals and chemical research occur within fume hoods 10. Wooden benches in laboratories

UJ has had to adopt a considerable number of responsibilities at own cost due to local authority failures e.g. emergency medical response (Netcare911 contract) and security (perimeter fencing, additional resourcing during unrest and high risk events). Primary Healthcare service cost has to be carried by UJ due to students without resources for medical insurance (medicines are, however, received from Department of Health at no cost).

By contrast, at the two institutions, no clinics are required on campuses because local authorities are effective and response times are short, although invoicing occurs for call-outs of the Fire Brigade or Hazard Response teams. In addition, unrest amidst the HEI domain is absent and all persons have medical insurance.

At UJ the role of OH Nursing Professionals is recognized

At UJ, the OH Practice actively prevents OH risk and ensures health risk compliance on behalf of the institution through evidence-based practice and aligning the Practice with international peer agencies. Further value is added by the Executive Resilience Programme, the Travel Medicine service, event risk mitigation and facilitation of emergency medical response; oversight over Food Safety. The roles are risk-based and answers to SA conditions and UJ in particular.

At the benchmarked institutions, the academic specialization of Professional Nurses in the discipline of Occupational Health Nursing has not generally been implemented (true for Austria and possibly for the EU). The

focus is on the OMP from the local authorities to visit the University and determine the frequency and type of medical assessments. It is the author's opinion that several risks may be overlooked and that a gap exists for the professional intervention by OH Nurses.

IN CONCLUSION

A rich experience at the two highly acclaimed universities has resulted in deeper insight into Occupational Health practices at Higher Education Institutions in Europe. Whilst lessons may be learned, an appreciation is reiterated for the unique and enabling landscape at UJ.

Elana Venter

5 October 2017

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ANNEXURE B

Radiation Protection Annual Report 2017

UNIVERSITY OF JOHANNESBURG (UJ)

RADIATION PROTECTION

Annual Report January 2017 – January 2018

From January 2017 to January 2018 all X-rays equipment and the radioactive sources present in different Departments of the University of Johannesburg (UJ) were audited.

Five (5) X-ray licenses number 973; 5316; 6172; 10973 and 12386.

Four (4) radioisotopes authorities.

X-RAY EQUIPMENT:

Auckland Park Kingsway Campus: Nine (9) and one (1) X-ray equipment in C1 and C2 LAB UJ, licences number 973 and 10973 respectively are still in their specific locations.

Doornfontein Campus: Five (5) at the medical station, 1 at the dental clinic and 4 at Engineering; licences 5316, 6172 and 12386 respectively.

The following radioactive sources are available at UJ departments:

Auckland Park Kingsway Campus: Eight (8) in Physics, 3 in Biochemistry, 2 in Botany and 7 in Spectrum.

Doornfontein Campus: fifty nine (59) in Physics and four (4) in Civil engineering.

Disposal of Radioactive sources: Two (2) C0-57 sources from Physics Department, Auckland Park Campus were disposed in mid-year 2017. The Department of health: Radiation Control approved the application for the disposal of 22 radioactive sources. The radioactive sources will be transported to NECSA before end of January 2018.

Stolen radioactive sources: The Department of health Radiation control acknowledged the two (2) stolen radioactive sources and they have noted the loss on their register.

Uranium Authorization: UJ authority to acquire, possess, use, import and transport uranium material issued by the Department of Energy is valid until the University decide to cancel it. The University is required to make submission of the annual report to acknowledge possession of the authority.

Radiation workers: All radiation workers are registered with SABS as such and are monitored on monthly bases. Medical records are kept at Occupational Health Department. The in-house Medical doctor together with the UJ RPOs constantly monitors closely the monthly dosimeter results.

Radiation overdose: Incidences of over exposure to radiation worker were reported and reports of the investigations were finalised.

Updates: University of Johannesburg applied for the renewal of the non-proliferation documents and the documents of compliance was granted by Safeguard (DoE).

Radiation warning signs: All radiation areas are marked with radiation warning signs baring the contact person in case of emergency.

Annual return: All annual return for 2017 were completed and sent back to the Department of Health Radiation control.

Medical Research Council (MRC): UJ RPO was asked to check the status of their bone density unit set-up. The unit and the radioactive sources comply with the safety standard as prescribed by the ICRP 103.

This report was compiled by:

Dr RD Mavunda

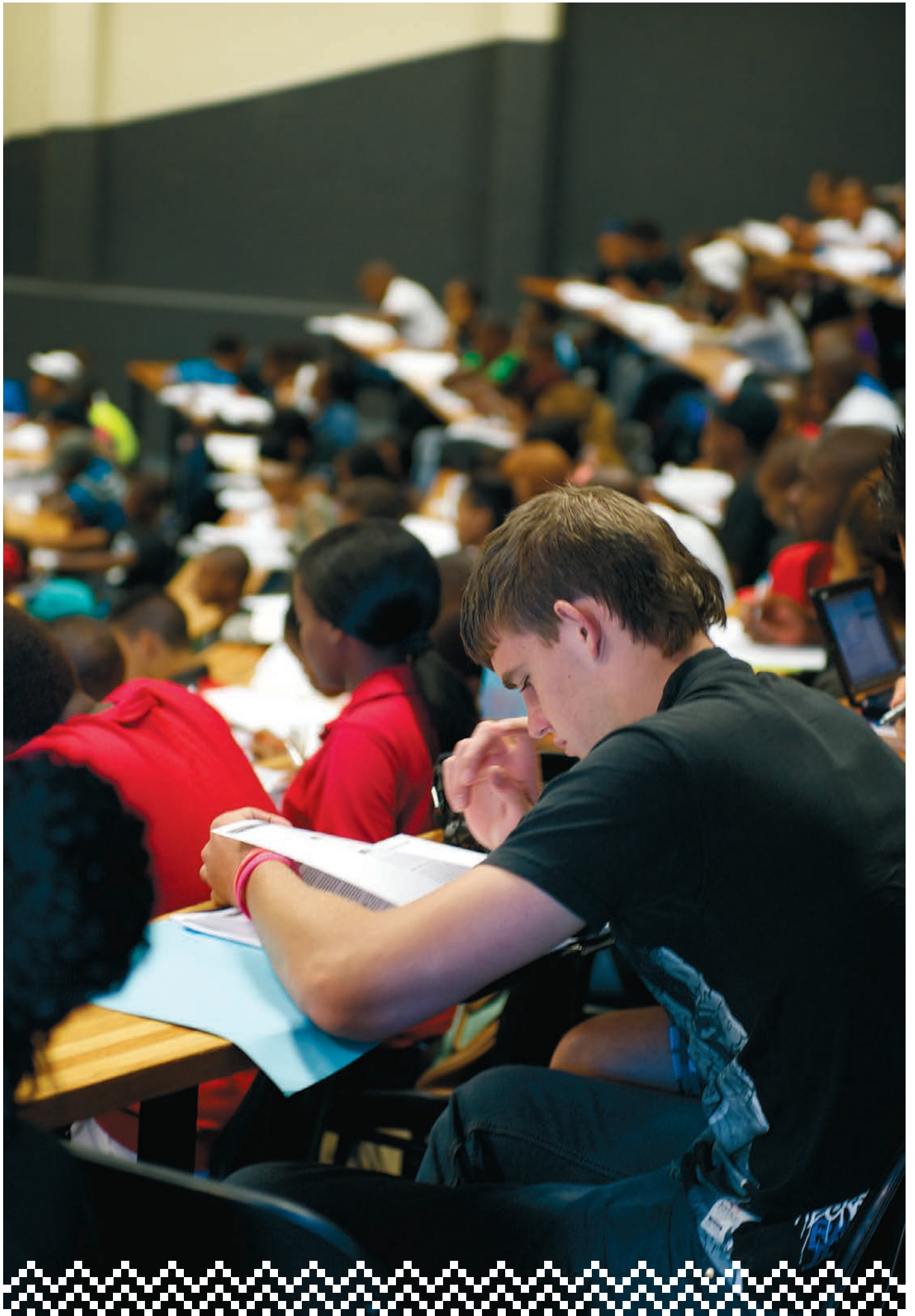


Date: 25/01/2018

UJ Radiation Protection Officer (RPO)

Qualifications: PhD (Physics) ■ Designation: Physicist ■ Telephone: 011 559 4144 ■ Mobile: 076 286 4786

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Primary Health Care Service

OPERATING CONTEXT, GOVERNANCE AND RISK MANAGEMENT

Introduction

Primary Health Care is a division in medicine that refers to essential health care that is universal and based on sound principles and technology. It is one of the Department of Health's flagship divisions in ensuring healthcare services are brought as close as possible to the community. The University of Johannesburg has placed the division in the Registrar's portfolio, which is a functional placement rather than a statutory one. 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 service is available at all four campuses and comprises Primary Health Care Nurse Practitioners, Administrative Assistants and HIV/AIDS counsellors. A minimum of two nurses are 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 due to the uniqueness of our environment, staff, contractors and visitors are attended to when in need.

Operating Context

A fully functional and well equipped PHC clinic exists on all four campuses. Services rendered are:

- Primary Health Care;
- HIV Testing Services (HTS);
- Reproductive Health Services;
- Travel Health;
- Event medical risk for Sports;
- Health promotion.

Further to the listed operational areas above is the support for those diagnosed with HIV, and testing for non-communicable diseases commonly known as chronic illnesses. The services are offered at no cost to students with the exception of non-essential health monitoring such as cholesterol and blood glucose monitoring. A well established relationship exists between the clinic and the local hospitals and clinics to take over patients requiring higher level of care. Essential drugs are provided by the Department of Health (DOH) as part of the PHC Standard Treatment Guidelines. Additional essential medicines are purchased as provided for in the departmental budget. These guidelines are followed in the provision of services in the PHC and reproductive health services. The clinic operates from 08:00 to 16:00 from Monday to Friday. Healthcare services after hours are provided with support from the Protection Services Division in conjunction with Netcare911. A contract exists to provide immediate healthcare in emergency cases and transportation to the nearest medical facility. Those with medical aid will be transferred to a private clinic, and those without to a public hospital. The use of Netcare911 services is done in relation to medical risk assessment, and the planning for medical intervention is done according to Safety at Sports and Recreational Events Act requirements. Travel health is provided as licensed by the Department of Health, with a Yellow

Fever Certificate No YF000232 qualification obtained by the manager. Health promotion including travel alerts is done via awareness campaigns, posts on *ULink* and the use of social media platforms such as *Twitter* and *Facebook*.

Governance

The Manager of PHC is a member of several university committees. She is a member of the HIV/AIDS Committee, Wellness Committee and the Primary Health Care Committee. All committees meet on a quarterly basis. The PHC committee is convened by the PHC manager, operates under the PHC charter and comprises the Primary Health Care Nurse Practitioners (PHCNPs), the Health Training Centre manager, a representative from PsyCaD and a manager from UJ Sport. Through the committee, several departmental policies and Standard Operating Procedures (SOP) have been put in place. On an ad hoc basis, additional staff will be invited when there is a need for intervention that requires their expertise, such as the head of the Institutional Office for HIV and Aids (IOHA). The Risky Student Behaviour Forum has been revived and is now operational under the leadership of the Executive Director: Student Affairs. The primary aim of this Forum is collaboration with various departments to curb the incidence of students engaging in risky behavior, with attention being paid to associated health elements.

The Division focuses primarily on student health regarding the maintenance of a healthy lifestyle, prevention of disease, management of identified illnesses and health promotion. We are therefore guided by the following vision, mission and values as the cornerstone of the available health programmes:

- Vision: To be a Leader in Excellent Healthcare Service Delivery.
- Mission: Providing the UJ community with optimum preventative, promotive and curative healthcare while making use of appropriate referral systems.
- Values:
 - The promotion of ethical integrity and accountability towards the profession, patients and the university.
 - The promotion of cultural diversity and unconditional acceptance of all individuals in our care.
 - We recognize and promote innovation in healthcare delivery and health promotion.

Risk management

- The division's inherent risk is the accidental exposure of patients, staff and students to infectious agents through needle stick injuries. This has been mitigated by the availability of a policy that outlines the procedure to follow should such an injury occur. Blood tests that need to be taken and anti-retroviral medicines are provided for in the clinic. Accidental needle stick injuries for staff are catered for by the Occupational Health Practice division under the Occupational Health and Safety Act 85 of 1993. Patients and students are catered for by the PHC clinic as part of risk management for the institution. The management of accidental exposure for students is overseen by an HIV specialist Dr. K. Mohamed whose practice is based at Garden City Clinic. The cost of this is borne by PHC and included in the annual budget.
- Travel health risks in relation to official excursions expose students to illnesses and injuries at the particular destination. A pre and post travel health assessment is done on clients that use the clinic. Essential health information such as the outbreak of an infectious disease is communicated to students on the *ULink* and other social media platforms.
- Delay in medical response due to unforeseen circumstances poses a risk, in that patients may not receive prompt high level intervention from Netcare911. A contract exists with emergency medical support from Netcare911 and continuous monitoring of the costs incurred in conjunction with the Occupational Health Practice division.
- The current location of the DFC clinic poses risk to patient confidentiality, as it is not a suitable environment. The clinic is currently located in the Health Sciences Faculty's Health Training Centre. It is a small passage with space for 2 consulting rooms and a reception office. Construction of a new clinic is underway.

- An emerging risk is that of minimal availability of Termination of Pregnancy (TOP) Clinics offered by the Department of Health. This exposes students to illegal means of TOP. The risk is mitigated by continuous monitoring of patients and improving SRH services to all.

STRATEGIC FOCUS AND TARGETS

Focus on the Strategic Objectives 2017-2025

The strategic focus for the service is aimed at supporting the students in their living experience within the university.

- **Strategic objective four:** An Enriching Student friendly learning and living Experience.
 - Primary Healthcare Service supports this objective by providing excellence in Primary Health Care according to the National Core Standards determined by the National Department of Health.
 - PHS follows the DOH National Strategic Plan 2018/9 and is in accordance with HEAIDS strategic plan on HIV/AIDS programmes within Higher Education.
- **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 thereby eliminating risk of injury.
 - This is also achieved through thorough event medical risk assessment for sporting events taking place at UJ.
- **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.
 - Students undertaking international trips are assessed to ensure their health status is satisfactory, and prophylactic medication is provided to protect them against prevalent medical conditions and risks.

Strategic objectives and targets for the period 2017-2018

- Short-term goals
 - Expand the MySOS app to include more security features;
 - Health promotion: use of peer education to promote awareness;
 - Risky Student Behaviour forum: Engage residences and day houses in addressing identified health related risky behaviour;
 - Provision of anti-retroviral medication to students via Themba Lethu Clinic in Helen Joseph Hospital, as provided for in the Right To Care MoA;
 - Maintain a high client satisfaction rate of 85% and above;
 - Achieve a 5% annual increase in HIV counselling and testing;
 - Maintain a 0% rate of adverse medical events;
 - Completion and occupation of the new DFC clinic;
 - Engage with Departments of Health and of Social Development to facilitate awareness of and resources for drug and substance abuse, including alleviation of student hunger.
- Long-term goals
 - Memorandum of Agreement with Department of Health at UJ level, and an expectation to increase the same to all Gauteng universities;
 - The PHC Clinic to be on the District Health Information System for accurate record keeping and future resource allocation;
 - Restructure the APK clinic to accommodate an additional consulting room
 - Engagement with DOH to expand services such as mental health, dentistry, dietetics/nutritionists, etc.

PRIMARY HEALTHCARE SERVICE PERFORMANCE

PHC Committee

The quarterly meetings were held as scheduled. It was agreed that Strategic planning sessions will in future be attended by senior staff members, which will then be followed by engagements with other categories

of staff with the HOD. Training for staff is encouraged and this will be reported on the monthly reports. It was reported that Intern Psychologists have been allocated to only three campuses, due to a limitation in students taken in by PsyCad in 2017. Mr. Ntshabele was again available for the Varsity Rugby medical room to treat injured players and/or spectators with the help of Dr Mampane.

Ms Teolene Foster made a presentation, sharing her findings in her doctoral research study focusing on the experiences of HIV positive students at UJ. It was important to note that among other things, students perceived healthcare professionals as committed to their work and their patients. Three staff members were due for Basic Life Support training which will be facilitated later this year. It was also agreed to invite ICAS in our next meeting in an effort to refer staff that can benefit from their services. The expansion of the APK clinic by using containers was also discussed. It was concluded that other healthcare professionals will be invited when the need arises for their positive contribution to services delivery.

PERFORMANCE

Consultations

The total number of consultations for the year provided by healthcare practitioners at the clinics was 27681 of which 2532 were employees. The number of patients consulted is in line with the annual estimate over the past five years. This shows that 9% of consultations were done for staff. This is a 28% decrease in staff consultations in comparison to the previous year – a result of the changing focus of the services offered at the PHC clinic. The division has resolved to provide healthcare primarily to students and low category staff (P17-15) exclusively, but also providing emergency medical care to staff as and when need arises. Most students do not have funds or medical aid to cater for their healthcare needs, while most staff do. Staff will continue receiving Family Planning Services from the clinic on a specific day for a set amount of time. The medical doctor works on a sessional basis between Tuesday and Thursday, consulting with patients. Each patient is allocated 15 minutes except for Family Planning, which takes a shorter period.

The clinic with the highest number of consultations is APK due to its size and number of students on campus. This is then followed by DFC, then SWC with APB being the lowest. APB has only one nurse and this can be improved on by obtaining approval for the motivation for a new position. This has been put through in the budgeting period for 2018.

Table 1: Consultations at UJ PHC clinics excluding HIV testing

Campus	Student	Staff	Visitor	Annual
APK	10282	956	6	11244
APB	3705	343	1	4049
DFC	5826	823	4	6653
SWC	5318	410	7	5735
Total	25131	2532	18	27681

The most common conditions as seen on the graph are those of the upper respiratory tract, as the mode of transmission is mostly airborne. These are followed by gynaecological and skin conditions. Most conditions are managed by PHC nurses, as they are qualified to examine, diagnose and treat patients with medicines from Schedule 0-4 according to Section 56(6) of the Nursing Act 33 of 2005 and the Medicines and Related Substances Act 101 of 1966 Section 22(1). More complex cases are referred to the medical doctor and/or referred to the nearest higher level medical facility. Medical emergencies are attended to promptly as they present to the clinic.

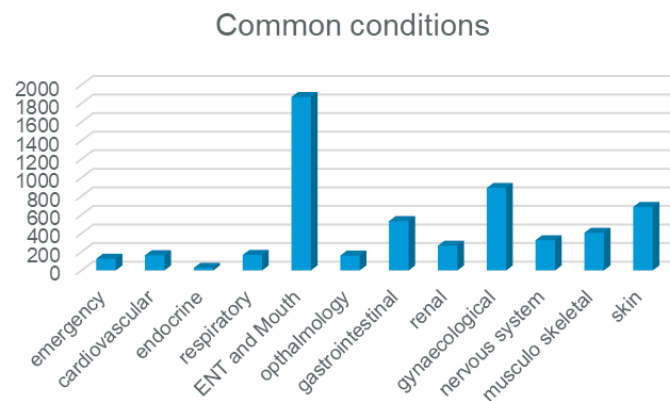


Figure 1: Common conditions treated at the clinic

Protection Service's role is essential, as their personnel are the first to respond to calls when students experience an emergency. These are cases that will either be brought to the clinic or transported directly to hospital, depending on the severity of the disease or symptoms. **Netcare911** can also be accessed directly to respond to the emergency directly from the scene of the incident or from the clinic. Netcare is contracted to the university to provide emergency medical care to UJ students and staff. This includes transportation to the nearest medical facility at no cost to the patients whether on or off campus.

Clinic consultation processes and procedures

Clients are consulted for 15 minutes each. Bookings are made to accommodate class time and avoid overcrowding and cross infection in the waiting areas. Students can either call or come in person to make a booking. Travel Health consultations are encouraged for all students travelling on UJ assigned projects; they receive prophylactic medication at no cost. Post Exposure Prophylaxis to infectious agents is provided for at all campuses. Dr Karoonisha Mahomed provides ART to students mostly from FHS if accidental needle pricks occur, to prevent HIV infection. Emergency healthcare is provided as emergencies occur; these are prioritized above "regular" consultations.

Reproductive Health Services

The DOH prioritizes the provision of free reproductive health services, as these address the Sustainable Development Goal relating to the empowerment of women and girls. The contraceptive methods provided are injectable, oral, subdermal implant and the barrier method in the form of both male and female condoms. Family planning is the most used service across the clinics at UJ.

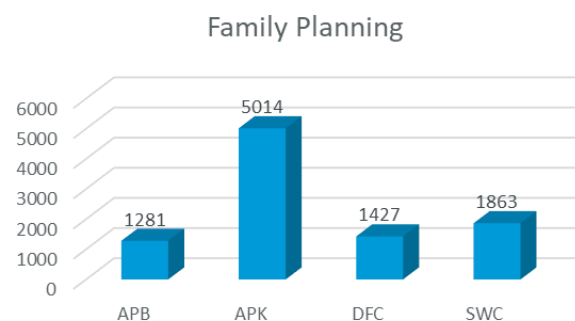


Figure 2: Family Planning usage at all clinics

Family planning was provided to 9585 clients, including both staff and students across the university. This shows a constant 12.7% increase over the past consecutive two years. This is positive, as it reflects ownership by women over their reproductive health. More pregnancy tests were done this year, such that 100 more

clients were consulted an 8% increase from the year before; i.e. 1206 in 2016 and 1306 in 2017. Clients who test positive for pregnancy are offered counselling, as most pregnancies are unplanned. They are also encouraged to do HIV testing so as to benefit from anti-retroviral medication, to prevent HIV transmission to the unborn child. This service is however provided at public health centres. Of all diagnosed pregnant, 31% opted to be referred for Termination of Pregnancy (TOP) – an increase from 27.5% in 2016. Support is provided throughout, with assistance from IOHA and PsyCaD.

Emergency contraception, commonly referred to as the “morning after” pill, was given to 169 patients which is much fewer than last year, by 17.5%. This is a positive sign, as FP numbers are higher than in previous years.

A new challenge is emerging in that Rahima Moosa Hospital and Hillbrow Community Health Centre no longer provide Termination of Pregnancy. This may expose pregnant women to easily accessible illegal practices around campus. Clients are now referred to Soweto community clinics and reputable private providers of their choice.

Sexually Transmitted Infections (STIs): It was indicated in the 2016 report that there had been a drop of 30% in STIs treated at the clinics. This changed in 2017, with a 12% increase to the total of 1296 patients treated for various forms of STIs. These clients are encouraged to bring their partners for treatment to avoid re-infection and spreading the infection. However, very few patients do report to the clinic with the referral letter.

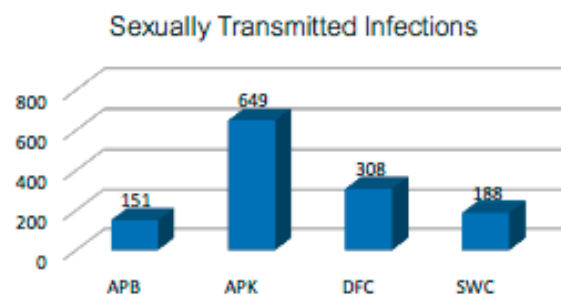


Figure 3: SRH & R services provided at the clinics

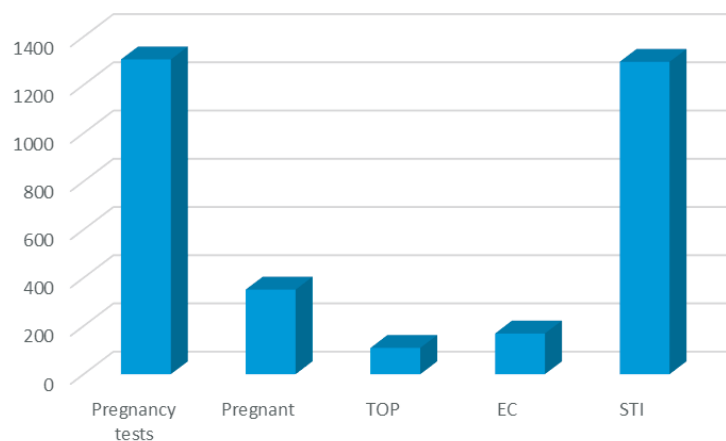


Figure 4: Pregnancy testing, STIs and Emergency Contraceptive services

Sexual Reproductive Health (SRH) is a service essential to the youth health aspect of PHC. The graph indicates that the students and staff are optimally utilizing the services. The graph shows the close proximity of pregnancy tests with STI's. This is an indicator of erratic condom usage which results in students contracting STIs and possible pregnancy. All these patients are encouraged to test for HIV, so that

proper treatment is commenced should they test positive. More clients seem to be choosing to keep the pregnancy, according to the graph. The challenge is that students must comply with the Policy on Pregnant Students to prevent undue strain on their pregnancy. Antenatal care is provided by local clinics or private doctors. PsyCad continues to provide counselling to those choosing TOP and those keeping the pregnancy. All clients are advised to use condoms to prevent STIs, HIV and pregnancy.

SRH collaboration with Netcare

In cases where students indicate that a sexual assault has taken place they are referred for counselling, and Netcare hospitals provide medication to prevent and/or treat sexually transmitted infections, with the collection of specimens, should the client pursue criminal charges. Nurse practitioners from Milpark hospital were invited to the UJFM radio slot to share their services with students during the Orientation period

HIV Counselling and Testing

Table 2: Quarterly summary of HIV testing

Campus	Q1	Q2	Q3	Q4	Annual	HIV +
APK	470	419	518	350	1757	26
APB	350	230	268	150	998	18
DFC	326	300	312	222	1160	17
SWC	354	174	188	145	861	24
Total	1500	1123	1286	867	4776	85

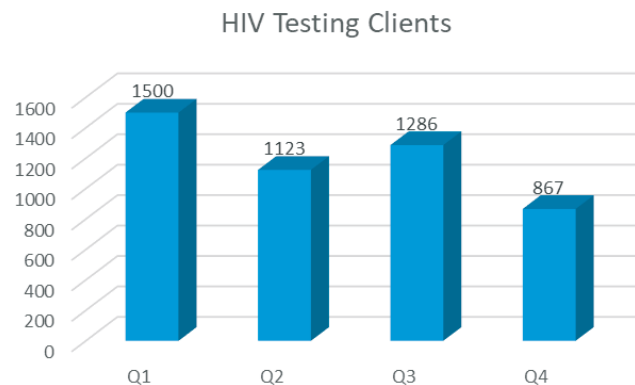


Figure 5: Lowest testing observed in the 4th quarter

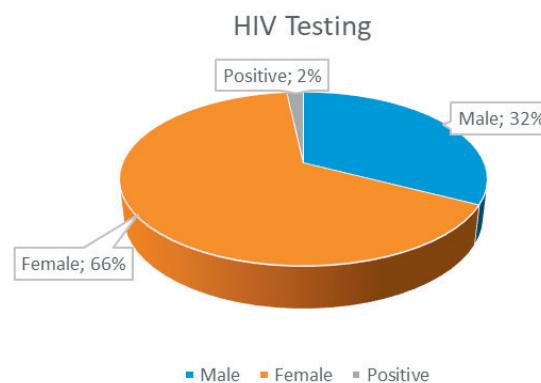


Figure 6: This shows the difference between genders in HIV testing

There has been a marked improvement on the number of tests done at the clinics when compared with the same period last year. The second quarter decreased in comparison with the first quarter. This increase can be attributed to introduction of new modalities of testing. Introducing Social Work students to all campuses to do HIV testing and counselling of clients has proved successful in this regard. Intern psychologists have also contributed positively, although much less this year than previous years.

A total of **4776** clients were tested in all the clinics with **85** clients being found to be HIV positive, which is a 16% increase from last year. This yielded a 1.8% prevalence rate for those testing at the clinic. SWC clinic had a marked increase in testing and positive case finding, leading to more clients being referred for anti-retroviral treatment. The prevalence rate in this campus was at 3.1% in the first quarter, 3.4% in the second quarter and 1.5% in the third quarter, with an overall 2.7% prevalence. This is followed by APB with an overall prevalence of 1.8%, while APK and DFC are both at 1.5%.

This has encouraged the HIV counsellors to do more testing, as there seem to be more clients at risk coming forwards for testing. Social Work and Psychologist interns have been trained to offer HIV counselling and testing at the clinic. This has provided more support for this service and additional support for students in need. Targeted interventions have included HIV testing done as part of a wellness drive at residences and at all campaigns. This is done in collaboration with IOHA and external testing partners.

Provision of ART has not commenced, but a commitment from TLC is to refer clients on treatment to UJ for their follow up medication. The clinic will be the future collection point for ART medicines.

The client satisfaction survey was at an average of 89% across all campuses, with DFC and SWC being the highest at 90%, followed by APB at 89% and APK at 88%. The general feedback is very positive at all clinics. The staff are providing excellent professional service to patients. This rating is above the set standard of 85% satisfaction rate. Most clients report that they will encourage others to use the clinic facilities and that they were treated with dignity.

Travel health is provided to students travelling on UJ assignments. The service was accessed by a total of 387 clients. This a 70% increase from the last year. This was based on the increase in the number of students engaging in international travel via the international office. The "Africa by Bus" project brought a significant contribution to this increase. A pre-travel assessment was done on all with prophylaxis given, which includes anti-malaria, yellow fever vaccination and information on keeping safe and prevention of diseases and accidents. Post-travel assessments revealed no development of diseases upon returning home. There is a marked increase in the need for travel health, and the challenges regarding the cost of medication were discussed with the Internationalization Office. A system to curb abuse of the service was devised, such that all clients will be referred via the Office, so as to keep record of those using the service.

Health Promotion:

- Wellness day in SWC was done in collaboration with the Biokinetics Department.
- All campuses observed the sexual and reproductive health month in February, which was undertaken in collaboration with IOHA
- TB awareness month was commemorated in March (March 23rd is World TB Day). This was done in collaboration with Helen Joseph Hospital (HJH), the Wits Clinical HIV Research Unit and with IOHA, Wellness and Student Affairs as internal partners. The Gymnasium was a new partner in collaboration with us, as they brought in their exercise equipment with an emphasis on encouraging an active and healthy lifestyle to all. Participants were given exposure to various gym equipment and encouraged to join as well at a minimal fee.
- UJFM "Educational Tuesday" is a 30 minute slot used by various health professionals to share information. Contributions have been from organisations such as Right To Care, Netcare-Milpark hospital, Helen Joseph Hospital, Sanofi Pasteur, DOH and PHC staff;
- Other health information is shared via Twitter and Facebook including the ULink platform;
- A Wellness Day event was held at APB Student Centre on 12th May 2017 together with IOHA, COJ and

other Stakeholders. Attendance was not as expected as weather conditions were unfavourable and students had already commenced with semester tests;

- A campaign to bring awareness of students with disabilities was done by the DARE group. PHC assisted with logistics and in engaging peer educators to participate.
- DFC staff attended the Residence Health and Wellness Day at the Fields Residences and Gauta Ladies Residence.
- SWC attended the IOHA Stigma Knock out event which is aimed at reducing stigma among marginalised groups.

Marketing

The webpage is up and running on the intranet and available on the internet as well. A Facebook (FB) and Twitter page were established under the guidance of the UJ Marketing division with a following of about 700 people and a viewership of more than 2000 people in total. Student assistants are running the marketing programme, and this is showing positive results so far. However, the resignation of the student assistant managing the social media pages has led to minimal activity on these sites.

Engagement with student bodies

The delayed SRC elections resulted in the clinic not having as much active engagement with the student representatives. However, all campuses had initial engagements with their local SRC representatives for introduction and addressing immediate concerns. Each clinic has met with their respective SRC and has engaged on challenges that needed further discussion or intervention. All issues have been resolved so far.

Risky Student Behaviour activities

- A GBV walk took place from APB to APK on 21st April 2017. Peer Educators and Social Work Students took part in the walk. This was in collaboration with IOHA and Student Affairs;
- Sexual Reproductive Health training for IOHA Peer Educators took place;
- A 'Students risky behaviour' seminar was held at the YMCA male residence
- SRH talks were done at the following residences: Akani day-house; Mosate Heights ladies residence and Lebone ladies residence. These included a presentation by a pharmacist who gave insights into abusing the "morning after" pill.
- A GBV workshop was conducted by Dr Davies in collaboration with PHC and IOHA;
- Peer Educators together with the Student Social Worker had a Health Talk with the men at Kilimanjaro Residence and at Horizon Residence;

First Year Experience (FYE)

- The health calendar was shared on Blackboard; this includes services provided by the clinic and relevant health information;
- Orientation sessions took place as invited by the following faculties and departments: Education, Science, FADA, Law, Business Management and Health Sciences. A video presentation was used to address the various health issues students are challenged with when at university. This was used as a platform for discussion, and to show them where to seek assistance;
- The FYE committee was challenged to include Health and Wellness content in the new "Success 101" module that will be introduced as part of the FYE. Content was developed in collaboration with IOHA and is currently accessible on Blackboard;
- A planning session was done where departments participated in a workshop to strategize on future FYE programme. See Table 3.

Prevention, Care and Support to HIV positive students

Patients diagnosed HIV positive are referred for ART at Themba Lethu Clinic or their preferred healthcare provider, as the required by the new HIV Management guidelines. Students who are accidentally exposed to needle stick injury are at risk of HIV and Hepatitis B infection among others. This usually occurs in the

Table 3: Event Medical Planning and support by PHC

Event name	Event detail	Netcare Medical staff	UJ Personnel
Varsity Cup Rugby	UJ vs NWU	ILS & BLS	Professional nurse and Sports Physician on site
	UJ vs Wits		
	UJ vs UP		
	UJ vs UFS		
	UJ vs NMMU		
Residence games DFC	Netball, soccer and indigenous game	BLS	N/A
SASPD Championships	Students and staff travelling to PE	Notification to local N911 to facilitate medical support	N/A
Rowing Championships	UJ Rowing team travelling to East London via OR Tambo international Airport	Notification to local N911 to facilitate medical support	N/A
USSA Football games	UJ and Wits were hosting various universities. Venues were APB sports fields and Marks Park	ILS, BLS and First Aiders on site	N/A
USSA Squash games	APB- AW Muller Stadium	BLS and First Aiders on site	N/A
Varsity Cup Football	APB- AW Muller Stadium	ILS, BLS and First Aiders	Medical Doctor on site
African Bank U18 Football Challenge	APB- AW Muller Stadium	Requirements: 2 BLS and 2 ILS	
UJ RAG	Rag Farm APK	BLS on site	
Stigma Knockout	Netball, Football and indigenous games	BLS, ILS on site	
Varsity Netball	Soweto Indoor Hall	BLS	
50 notifications were done for sporting activities at UJ and those travelling via air or road transport			

Health Sciences Faculty as students perform their clinical work. In terms of the Policy for the Management of Staff, Students and Patients with regard to infectious agents, those exposed are put on the Post Exposure Prophylaxis (PEP) regimen under the guidance of Dr. Kay Mahomed based at Garden City as the HIV clinician. There were no reports of needle stick injuries that required PEP during the year.

Medemass-Healthone

The electronic patient information system is in place and being used by administrative staff, HCT counsellors and medical staff. The challenges experienced have been resolved through interaction with the ICS division and technicians from Medemass. No malfunctions or adverse incidents have been reported thus far. See Tables 4, 5 and 6.

New Positions

- Two vacant positions were created by the resignation of a receptionist at APB and a PHC nurse in SWC. Both positions have been filled by suitably qualified individuals;

Table 4: Classification of employees

Position	Gender	Race	Peromnes	Number	Employment
Head	F	A	6	1	Permanent
Medical Doctor	F	I	6	1	Temporary
Primary Health Care Nurse Practitioner	F	A	8	5	Permanent
	F	I	8	1	Permanent
	F	C	8	1	Permanent
	M	A	8	1	Permanent
Administrative Officer	F	C	10	1	Permanent
Administrative Assistant	F	A	11	4	Permanent
	F	C	11	1	Permanent
HIV Counsellor	F	A	13	2	Permanent
	M	A	13	2	Permanent

Table 5: Employee profile per campus

Head of Division: Sr. Molimi Geya					
Medical Officer: Dr Shireen Surtee					
Campus	PHC Nurse Practitioner	Admin Officer	HCT Counsellor	Admin assistant	Student assistant
APK	3	1	1	2	2
APB	1		1	1	2
DFC	2		1	1	1
SWC	2		1	1	1

Table 6: Staff undergoing formal educational programmes

Name	Category	Course	Institution
Molimi Geya	Manager	Management Advancement Programme	Wits Business School
Boitumelo Khabi	PHCNP	MCur (Community Nursing Science)	UJ
Tshidiso Ntshabele	PHCNP	LLB	Unisa
Emma Bodiba	Admin Assistant	BA (Communication Science)	Unisa
Esther Poto	Admin Assistant	BA (Social Work)	Unisa
Martha Mogodi	Admin Assistant	Office Administration	UJ HR In-house Training

Training and development

- A LGBTI Sensitization workshop took place 23rd May 2017 with administrative staff and counsellors attending;

- PHCNPs attended the NIMART training offered by Right to Care. This is in preparation for the provision of Anti-retroviral medicine to HIV positive patients;
- Ms. Martha Mogodi completed her course on Business Administration offered by the HR department;
- Two counsellors attended a two-day course on Project Management offered by Hedgehog Events Management Training.
- PHCNPs attended Pre-Exposure Prophylaxis Training offered by the Clinton Health Access Initiative (CHAI) Training on 18th and 19th September
- Sr Khabi is in the final stages of completing her M. Cur Nursing Science degree with UJ.
- Sr. Geya has completed her Certificate in Management Advancement Programme offered by Wits Business School.
- HIV Counsellors attended the HEAIDS conference and also went for Project Management Training where they obtained Certificates of Competence.

Conferences attended

- Two counsellors, two Social Work students and two professional nurses attended the HEAIDS conference held from 8–10 June 2017 at the Durban ICC. The students presented on the topic of “The use of social media in health promotion”. They shared how Facebook and Twitter are the preferred sources of information for the youth.
- All administrative staff attended the Secretaries’ Day conference on the 6th and 7th of September 2017
- 2 nurses attended the Travel medicine Conference in Cape Town, where issues were discussed around the mitigation of risks incurred as students travel to far off destinations
- IOHA hosted a SAY WHAT Youth conference at the SWC where Sr Badiri presented her study on SRH within the university environment. Peer educators and staff attended this conference.

COMMUNITY SERVICE, STAKEHOLDER ENGAGEMENT AND REPUTATION MANAGEMENT

Internal stakeholder engagement

- Expansion of the MySOS app, approved by MEC as a collaboration between PHC and Protection Service; Protection Services undertook to include more security features in their service;
- Collaboration with IOHA and PsyCaD on various projects, as these include different aspects of student health and wellness;
- The Wellness Committee under the leadership of the Executive Director HR
- Continuous FYE in collaboration with Academic Development Support Department in the “Success 101” project;
- Collaboration with Protection Services division on emergency responses and transportation to the nearest medical facility;
- Close collaboration with OHP on the management of patients and shared facilities, to ensure that resources are optimally used by both divisions;
- Weekly UJFM radio slots to share health information with listeners;
- An assessment regarding the remodeling of the reception area, undertaken by the Maintenance department. Work will be done as soon as quotations are approved;
- The APB Clinic HIV Testing and Occupational Health office re-arranged their workspaces to improve on efficiencies. New cupboards will be required to ensure proper storage and record keeping in the HIV testing office;
- Library talks: “Adapting to life at Tertiary Level”. The role of Campus health in the adaptation to university for students, at SWC;
- Braai Day was celebrated on different dates in September to encourage team work and recognition of various cultures within the division;
- A Pap Smear project to encourage cervical cancer screening was held with 10 smears offered for free. All 10 were sponsored by the clinic;

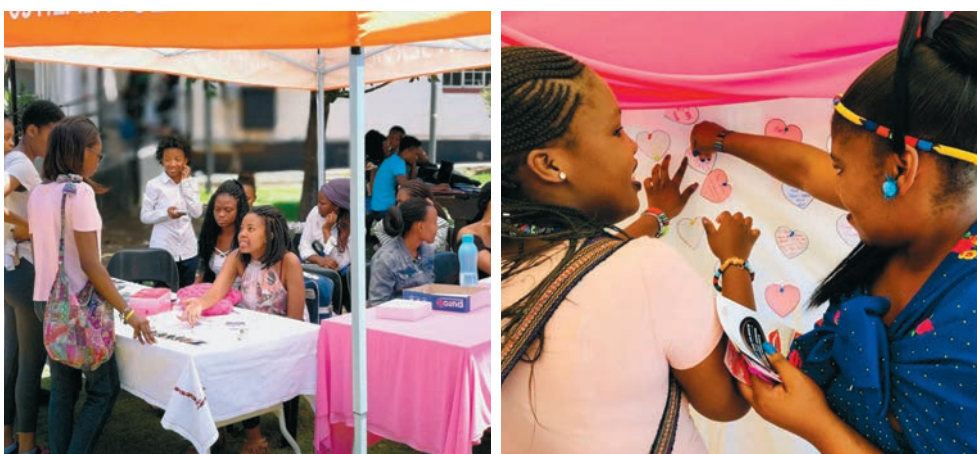
- Library event: Book Launch meeting (Cancer: A love story);
- The division handed over R1000.00 to PsyCaD, raised in support of the 100 stickers for casual day

Special Projects

- The Operations department has refurbished the APB Reception area to allow more interaction with patients. Those in wheelchairs can have full view of the receptionist, unlike previously;
- Cupboards have been installed at the HIV Counselling and testing room to allow for proper record keeping and storage
- A request has been put through by OHP to relocate the office for Sr Miranda in the SWC clinic, to improve efficiency of the service being offered for staff

External Stakeholders

- Collaboration established with Clicks Pharmacy to give health talks on over-use/abuse of the “morning after” pill;
- In response to expanding the feeding scheme to hungry students, we successfully engaged with the Department of Social Development to provide food in the Social Relief of Distress programme under Sassa (South African Social Security Agency);
- DOH: the issues around anti-retroviral medication, HIV testing, Service level agreement were discussed in a meeting with other NGOs in the region. A site visit at UJ was conducted with positive feedback regarding resources. A recommendation was that an air conditioner be installed in the pharmacy at APK;
- HEAIDS: Through the National Forum for Campus Health Services HODs, issues around health service provision and support from the DOH are being escalated to the Director General level;
- Liaison with Right to Care’s Themba Lethu Clinic based in Helen Joseph Hospital for the provision of ART for HIV positive patients;
- The City of Johannesburg supports campaigns such as TB awareness and the wellness programme;
- Netcare Hospitals continue to provide emergency medical care to students injured during sporting activities, as referred and recommended by the Campus Health managers;
- National Health Laboratory Services (NHLS) continue to support the blood testing procedures in the HAST programme;
- Dr. Kay Mahomed from Garden City is contracted to provide PEP to students in the Faculty of Health Sciences;
- Netcare911’s contract in the provision of emergency medical care has been increased to include the MySOS app, which is an easier and more accessible means to get help in an emergency. Collaboration with internal stakeholders to increase marketing is underway.



Breast cancer awareness (L) and another stall at the Diversity Week event (R)

RESOURCE MANAGEMENT AND SUSTAINABILITY

Financial Governance

The division operates a budget set with four cost centres, to reflect the clinics at all campuses. The usage is monitored on a monthly basis and there are no deviations, 94% of the budget has been utilized in the operational expenses portion.

Environmental sustainability

- Awareness of the need for less printing and if necessary, printing done on both sides of the page;
- Communication done via email instead of hard copies;
- Recycling of cartridges, paper and batteries;
- Eco-friendly fridge at all campus clinics with uninterrupted power supply at APK;
- Clinic lights are switched off at night and over weekends;
- Correct disposal of hazardous and non-hazardous waste;
- Medical waste disposal is managed by an accredited medical waste company (Budget Waste). An improvement in the system was instituted to allow for disposable boxes of medical waste instead of re-using plastic containers, which is considered best practice;
- The use of UPS in critical areas to ensure continuity of services in case of load shedding.

LEADERSHIP

External leadership

- SAACHS Gauteng region secretariat with all PHCNP's being active members;
- Chairperson of the National Forum for Campus health HODs within universities in South Africa;
- Presented as Chairperson at the SAACHS 2017 Conference hosted by the Free State region;
- All PHCNPs belong to the South African Society for Travel Medicine (SASTM). Practitioners;
- Sr. Geya was nominated to represent higher education in the Civil Society group of the South African National Aids Council;
- Membership of the Community Advisory Board of the Clinical HIV Research Unit (CHRU) based at Helen Joseph Hospital.

Internal Leadership

- FYE programme extended with ADS with the Success101 project for first year students;
- Provision of medical support to UJ Varsity Rugby;
- Membership of the HIV/Aids and Wellness Committees;
- Chair and steering of the PHC Committee.

CONCLUSION AND WAY FORWARD

Short-term plan

Implementation of the following activities and programmes:

- Co-ordinate and lead the RSB committee in collaboration with IOHA and other stakeholders;
- First Year Experience (FYE) for Health and Wellness (IOHA & PHC)
- Peer education programme;
- Residence programme to include Social Work interns and peer educators, for on and off campus residences;
- Health promotion using a universal health calendar in collaboration with UJFM;
- Collaboration with the Library to have focus group discussions on specific themes such as drug use, transactional sex relationships, human trafficking, etc;
- Availability of sanitary pads for female students at residences and at Campus Health Clinics.

Long-term plan

- Memorandum of Agreement with Department of Health at UJ level, and an expectation to increase the same to all Gauteng universities;
- The PHC Clinic to be on the District Health Information System (DHIS) for accurate record keeping and future resource allocation by the DOH;
- Restructuring of the APK clinic to accommodate an additional consulting room;
- The *MySOS* app contract re-evaluation and new way forward;
- Specific focus on mental health services available to students. This relates to sourcing psychiatric services for treatment purposes.

Sr. Molimi Geya

Head: Primary Healthcare Service



Institutional Office for HIV and AIDS (IOHA)

BACKGROUND

The mandate of the Institutional Office for HIV and AIDS (IOHA) is to fulfil a coordination role for the HIV/AIDS programme in accordance with the National Strategic Plan (NSP) for HIV/AIDS and related diseases, and the HEAIDS Strategy 2012. It functions within the legal and management framework of the University of Johannesburg in accordance with the Charter of UJ's HIV/AIDS Committee, to ensure the realisation of the strategy.

The Office is also mandated to facilitate implementation of providing combination prevention interventions and strategies aimed at reducing new HIV infections and providing holistic service for HIV/AIDS related matters within the UJ community. The core operational function includes HIV prevention through sexual and reproductive health, peer education, community engagement, mass HIV counselling and testing, and care and support for people living with HIV. The purpose of the report is to provide an overview of the coordinated institutional HIV/AIDS response, which is monitored and evaluated by the HIV/AIDS Committee.

STRATEGIC FOCUS AND TARGETS

IOHA's measurable targets for 2017

- Prevention, care and support:
 - Prevent HIV and promote sexual health ('Healthy is the new sexy' campaign) by addressing social drivers for the spread of HIV and AIDS including risky student behaviour.
 - Coordinate a gender-based violence (GBV) programme through HEAIDS funding, i.e. support a 24-hour hotline; offer self-defence classes, make GBV ambassadors known and accessible; establish a database and case management for incidents and increase awareness.
 - Partner with the Department of Social Development or an NGO on a substance abuse programme during campaigns and events.
 - Partner with two organisations to take health and wellness to the next level regarding healthy eating and exercising. These initiatives to be implemented at residences as well.
 - Promote and advocate human rights issues related to marginalised groupings like women, people with disabilities (PWD), lesbian, gay, bisexual, transgender and intersex (LGBTI) and people with HIV (PWHIV) through expansion of the Safe Zone Campaign in partnership with different internal and external stakeholders, and develop a sustainable year plan through consolidation of different calendars.
 - Host a Southern African youth conference in July.
 - Continue to support Technical Vocational Education and Training (TVET) colleges.
 - Offer facilitation training and workshops at faculty level and in the residences to build capacity, engage and up-skill students and service staff on social drivers and issues related to HIV and AIDS.
 - Provide biomedical and psycho-social interventions and strategies aimed at preventing HIV, sexually

transmitted infection (STI) and tuberculosis (TB) transmissions by providing mass HIV counselling and testing (HCT), condom distribution and facilitating individual and group consultations for PWHIV.

- Sustain excellence in service delivery, within the scope of resources available.
- Achieve the IOHA strategic objectives as outlined in the UJ Strategic Plan (2014-2025).

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 Campus Health.
- Incorporation of educational material into induction programmes, such as FYE, SRC, RAG, house committees and societies.

2025 targets

Similar to 2020 targets with the following extension:

- 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 FYE and SSE.

INNOVATIVE ACHIEVEMENTS IN 2017

Mass testing campaigns were successfully implemented in March, May and August, in line with the strategy to create a testing culture among the UJ community; these were executed in partnership with external HIV testing providers.

Condom distribution at campuses, residences and Campus Health was maintained. IOHA is responsible for ordering and distributing both male and female condoms across campuses. Distribution of lubrication was started across campuses during testing campaigns.

Peer educators' training plays a critical role in empowering students, who further share the knowledge learnt with their peers within the university community and beyond. The process to expand the peer education programme was started. The long-term plan is to formalise the programme, i.e. issue a certificate of competence instead of attendance to participants.

The Care and Support Programme is a pillar developed by the UJ Wellness Programme that aims to ensure optimal health and functioning for students and staff infected with HIV at UJ, by providing social and educational support. This year, the Department started by ensuring that all the documentation related to care and support was developed and updated. This included the UJ Wellness Programme (Policy on Care and Support), and educational materials (Steps to Follow When you Test Positive, Disclosure and Side Effects of ARVs). All these documents are posted on the IOHA website. The 12-page booklet begun in August last year titled, *Destined to Survive*, was finalised and was posted on the website. Two capacity building workshops were held in May and August. The discussions addressed social and biomedical challenges, like relationships, treatment, side effects, adherence, emotional stages of living with HIV and disclosure. The services of Positive Convention as an advisor and external referral provider showed positive results and assisted in ensuring support for all HIV positive students.

Training and workshops

IOHA, under the Health and Wellness Division, presented at various FYE seminars in all faculties. Sexual reproductive health and rights (SRHR) training and workshops were also conducted at residences under their RSB strategy. In line with our goal to be the epicentre of knowledge creation globally about HIV/AIDS, STIs and TB within the higher education sector (through research, curriculum integration and innovation), training workshops and collaborative projects were conducted with various departments and faculties.

We continued positioning IOHA among its internal and external stakeholders using the following strategic and innovative methods of communication:

- Internal partnerships
 - Partnerships with PHC and UJFM were strengthened. IOHA had a permanent weekly slot at UJFM.
 - Partnership with UJ Strategic Marketing was maintained, which assisted in redesigning the IOHA website page. They also advertised all our events on UJ social media.
 - IOHA was represented at different committees and meetings, with the aim of strengthening partnerships and collaboration, e.g. FYS/FYE committee; Campus Operations meetings and HR Wellness committee meetings.
 - Partnerships continued to be fostered with departments like the Postgraduate School, UJ Graphic Design Studio, Student Affairs, Community Engagement, Campus Health, HR Wellness, Library and faculties to address issues relating to sexual and reproductive health.
- External partnerships
 - Partnership with Society for Anova Health Institute, Muslim Aids Programme (MAP) and Isizindazempilo (ISO) continued to be maintained as our testing providers.
 - The first-year orientation programme was undertaken in collaboration with above partners, and students were engaged in awareness conversations.
 - The TB Day celebration was undertaken in collaboration with Campus Health, HR Wellness, DoH and Wits Reproductive Health Institute to commemorate and create TB awareness at our institution.
 - The number of marketing partners increased, which strengthened our campaigns, as students like competitions and like to receive prizes.
 - A new partnership was formed with Wits Reproductive Health Institute (WRHI), for referral of positive students and other SRHR related matters.
 - The University of Johannesburg-IOHA (UJ), in partnership with SAYWHAT Zimbabwe and the University of KwaZulu-Natal (UKZN), hosted a successful second annual Southern African Regional Student Youth Conference on Sexual Reproductive Health and Rights in Gauteng from 13-15 July 2017, under the theme: 'Building a business case for a solid future: Promoting Access to Youth Sexual Reproductive Health and Commodities'.
- The Unit has staff who are passionate about SRHR issues to ensure leadership when it comes to responding to biomedical and psychosocial issues. IOHA successfully marketed itself as a brand, and as a result, partnerships with both internal and external stakeholders improved. However, great caution needs to be taken to ensure sustainability and maintenance of the implemented projects. Therefore, in 2018, the focus will be on consolidating and streamlining current projects.

PERFORMANCE IN 2017

HIV prevention

The HIV Counselling Service (HCS) is one of the key contributors towards the realisation of UNAID's 90-90-90 strategy, i.e. 90% of the community to know their status, 90% diagnosed with the HIV infection to know their status, and 90% to be virally suppressed. The First-Things-First Strategy adopted by HEAIDS for HEIs and TVETs contributes significantly to this, as young people between the ages of 15-24, who are at high risk for contracting the disease, are at these institutions.

In total, 10 879 clients were tested in 2017, compared to 8 887 in 2016, which was an increase of 1 992, i.e. 22%. The target for 2017 HCT was 9 331, and the actual was thus 17% more than the expected target.

Regarding profiling, 95% of those tested were students (as HR Wellness is responsible for targeted testing for staff), and 65% of clients were females. The finding is consistent with the national profile where the majority of people testing are females. Collaborative initiatives introduced in 2017, such as the strengthening of residence wellness programmes and weekly testing, yielded positive results, and this contributed positively towards the UNAIDS 90-90-90 strategy. Of the people tested, 32% were first-year students and 24% tested

for the first time. This shows the success of the DoH strategy to intensify testing among the youth between the ages of 15-24.

HIV prevalence

A total of 100 clients tested HIV positive, i.e. UJ remained at 1% prevalence. According to Stats SA 2017, it is estimated that the national HIV prevalence is 12,6%, with the Gauteng province prevalence estimated to be 13,1%, according to the South African AIDS Council, 2016. Therefore, the UJ prevalence rate is indeed low when compared with the national and provincial statistics, based on the number of people tested. However, prevalence among females remains higher than among males, which is also consistent with the Stats SA 2017 estimates, which found that approximately one-fifth of South African women in their reproductive ages (15-49) are HIV positive. SWC had the highest number of clients who tested positive, even though the testing numbers were low. In 2018, the plan is to intensify testing at SWC to increase case findings and support. Faculties where prevalence was high were FEFS and Management (now the College of Business and Economics), but this was also because they had the highest number of students who came to test. When analysed by year groups, first- and second-year students had the highest numbers testing positive.

HIV care and support

Out of the 100 clients who tested HIV positive, 70 consented to be referred to IOHA and 66 (94%) of these agreed to join the Care and Support programme offered by the University. Currently, 47 (67%) of them are on treatment and adhering to it. This is a significant contribution towards the 2022 National Strategy that by then 90% of people diagnosed with HIV infection should receive sustained treatment. Communication with students is facilitated in different ways, including individual contact, social clubs and buddy support by older students for those newly diagnosed, depending on what they prefer. Due to issues of stigma, trust and ethical considerations, confidentiality is strictly adhered to by allowing students to choose the manner in which they want to be supported.

Barrier methods

Different barrier methods are available across campuses. Correct and consistent use of barrier methods like condoms has been identified as an effective means to protect against STIs, including HIV. Additionally, condoms are the only contraceptive method that also provides dual protection, i.e. against STIs and pregnancy. Therefore, increased awareness and availability remain important prevention strategies. More than a million male condoms and fifty thousand female condoms were distributed, which is an increase of 4% and 9%, respectively, from 2016.

Peer education

To transform and adapt to current trends around peer educator training, UJ is integrating and implementing the programme into an e-learning platform. The programme has been designed in a manner that enhances student 'graduateness', further capacitating peer educators with skills relevant to the 21st century job market. Such skills include presentation and communication skills, proposal and report writing, use of technology/social media to market projects, and working in teams while embracing diversity. A total of 166 applications were received from current LINK members, the LINK network and some staff members to join the e-learning programme. In further empowering students, peer educators were exposed to advanced training workshops, which were offered by both internal and external partners.

Students are first empowered through training, where they first work with individual sexual behavioural risks and internalised stigma as a self-awareness exercise. After that they undergo training on different sexual reproductive health and rights (SRHR) topics, which enables them to take the messages to their peers as part of our social mobilisation initiatives. A total of 121 students participated in the programme, compared to a target of 65.

Curriculum integration, research and innovation

Mentorship programme

The Department of Social Work partnered with IOHA and Campus Health to provide a mentorship programme for some of their fourth-year students. Students were trained in HIV counselling and testing. After that they were placed strategically at various higher education institutions (HEIs) and TVETs, i.e. South-Western College and Central Johannesburg College, in their support divisions that provide SRHR services to students.

Research project

In 2017, the Social Work Department in partnership with IOHA facilitated the Social Work fourth-year research report module. The study plans to address aspects around safe sex empowerment of university students and will run for three years. Ethical approval was received and students started with data collection. The first report will be submitted to the Department.

Internship programmes

In contributing positively towards work readiness and the HIV curriculum integration programme, IOHA hosted students from the following departments, two honours Sociology students, three Community Development and Leadership honours students from the Social Work Department and one from the Marketing Department. Additionally, two Social Work students applied to volunteer at IOHA to gain more skill on issues around SRHR, which they could acquire during their agency placement practical.

Training workshops

Capacity building workshops contributed towards the need to produce high quality graduates who can play a role in the knowledge economy and be responsive to the economic and social needs of the country. Different faculties and departments invited IOHA to present to students and create heightened awareness of issues relating to social drivers for HIV and risky student behaviour, e.g. gender-based violence, multiple partner relationships, LGBTI-MSM, Sugar Daddy, and drug and alcohol use/abuse.

Departments that implement curriculum integration through skills building are Nursing, Social Work, FADA, Psychology, Education, and Management-HR.

IOHA was invited to present sexual reproductive health talks to first-year students. The presentations focused on informing students about the different services that the Health and Wellness Division provided. A video showcasing various possible risky student behaviours (RSB) scenarios was also screened.

A group of students from the Department of Quality and Operations Management in the Faculty of Engineering and the Built Environment (FEBE), requested to evaluate IOHA through an assignment as per a departmental requirement. Through this, students learned about the Office and also gained awareness on social issues affecting the community.

Residence Life invited IOHA to present at the House Committee (HC) training workshop. The aim was to capacitate HCs as leaders on RSB issues and their leadership roles regarding these.

Campaigns and awareness programmes

Awareness was enhanced regarding issues relating to sexual reproductive health and rights (SRHR) and RSB due to strengthened partnerships and collaboration between the Library, residences, PHC, faculties, Student Affairs, UJ Sport, HR Wellness and PsyCaD. IOHA strategised its HIV/AIDS prevention programmes within the HEAIDS 'Big Seven' projects, namely First-Thing-First HIV Counselling and Testing (HCT) Programme; Men's health through HEAIDS 'Brother's for Life', Woman's Health (ZAZI), LGBTI-MSM programme, Balance Your Life, Future Beats-Campus Radio project and Monitoring and Evaluation.

First-thing-first HIV Counselling and Testing (HCT) Programme

HCT is basic to the efforts to mitigate the spread of HIV and AIDS. To know one's HIV status is the basis for caring for oneself and one's loved ones, and for protecting the broader community from HIV and AIDS. To

test HIV negative calls for behaviour to stay HIV negative by taking responsibility with regard to the HIV risk. To test HIV positive calls for precautions to protect oneself and others further, and to be enrolled in wellness and treatment, care and support programmes. There are three main targeted mass testing campaigns, namely February – Condom and STI Awareness; May – Care Month; and August – Stigma Knockout Month. Testing campaigns are executed across campuses and include participation in the residences, in risky student behaviour (RSB) and health and wellness drives in partnership with Residence Life; additionally, participating in TB Day as hosted by Campus Health.

UJ TB Day

Internationally, the World Health Organization (WHO) has declared 24 March as a commemorative day to raise awareness of programmes that curb the spread of TB, and also to remember those who have died due to the illness. UJ's Primary Healthcare Service, IOHA and the Gymnasium commemorated World TB Day, in partnership with the Right To Care-Themba Lethu Clinic in the TB Unit and the Clinical HIV Research Unit at Helen Joseph Hospital, City of Johannesburg. TB Day was jointly hosted by screening for TB and HIV among students and staff, and we received a great reception. Students gathered in the various stalls at the student centres, to get educated, tested and counselled. A total of 160 students and staff came for wellness screening (TB, blood pressure and glucose) and HIV testing. Eight were referred for STIs and 13 for TB.

Take the Hollard Daredevil Run

The Daredevil Run is a massive countrywide phenomenon. Even though the event is full of fun, it also focuses on raising awareness by using the power of collective action to inspire positive change. Some UJ students were sponsored to participate in the event in support of cancers affecting men, especially prostate cancer.

UJ's walk against gender-based violence

In April, the UJ community, led by Student Affairs in partnership with IOHA, Campus Health and Community Engagement, partnered to organise a walk against sexual and gender-based violence (SGBV) to emphasise the University's commitment to end all forms of SGBV before it happens and as a means of responding to the needs of all survivors, who can be women and girls, as well as men and boys. This additionally created an enabling environment for individual and collective change. The walk started at APB and finished at APK. According to the United Nations (UN), one in three women still experience physical or sexual violence (2016). However, such violence is experienced by both women and men, especially among vulnerable groups. This experience can happen to any individual at any space or in any community, not forgetting higher education institutions (HEIs). Some of the cases have not been reported as survivors fear stigma and discrimination.

Safe Zones project (LGBT+ Programme)

In implementing the Safe Zones Project and LGBT+ programme, the University executed a launch event in May 2017, facilitated by IOHA as the current secretariat of the Safe Zones project. This was in partnership with Students Affairs, Campus Health, LGBT+ student societies and external partners. The highlight of the event was the integration of the candlelight memorial, which was held in memory of various LGBT+ individuals who lost their life because of this identity, through SGBV and other forms of discrimination. This marked the beginning of many awareness campaigns and events that sought to address Safe Zone issues within the University, including a series of informative safety awareness talks on APK, DFC and SWC. The aim of the information sessions was to inform students and staff of methods on how to protect themselves, following the spate of violence against and abduction of women in South Africa. The talk was well attended, interactive with a self-defence demonstration session from Buff, which students enjoyed. UJ Protection Services informed students of the safety routes recently implemented and safety deployment cameras. The hope is for the sessions to become a continuous dialogue and not only a once-off discussion to curb the current spate of violence;

Southern African Regional Students and Youth Conference (SARSYC)

The University of Johannesburg-IOHA (UJ) in partnership with SAYWHAT Zimbabwe and the University of KwaZulu-Natal (UKZN) hosted a successful second annual Southern African Regional Student Youth

Conference on Sexual Reproductive Health and Rights at SWC from 13-15 July 2017, under the theme: 'Building a Business case for a solid future: Promoting Access to youth sexual reproductive health and commodities'. In total, 421 delegates from around Southern Africa attended the conference. The conference also gave delegates an opportunity to call on Southern African Development Countries (SADC) to domesticate regional commitments and ensure that their commitments are enshrined in country policies. The students and youth had the opportunity to learn about the different networks, programmes and events of young people that already exist in Southern Africa and Africa, in general, and how they can participate and be part of these networks. Some of these networks and platforms include Southern African Development Community (SADC), Pan-African Youth Union (PYU), Africa Youth Day, African Youth and Adolescents Network (AfriYAN), and Southern African Regional Web for Life (SARWEB). In conclusion, UJ values the partnerships formed during the conference, in particular sponsorships from the Soul City Institute for Social Justice, Gauteng Tourism Authority, Ford Foundation and UJ internal departments. All participants were spoiled for choice in terms of a gala dinner as part of the opening ceremony and a Soweto tour on the last day of the conference. The closing ceremony was held at Sakhumzi Restaurant where African cuisine was served.

UJ Stigma Soccer Knockout Challenge and Dialogue

The UJ Stigma Soccer Knockout Challenge was held in September. The tournament forms part of the campaign commemorating and raising awareness of the stigma attached to HIV/AIDS. This year, IOHA in partnership with UJ Sport, Student Affairs, Ethics and Judicial Services, Campus Health, Grassroots Soccer and the UJ SRC hosted its annual soccer and netball challenge to heighten awareness of stigma and discrimination against marginalised communities, i.e. people with disabilities, LGBTI+ and people with HIV.

UJ World AIDS Day was celebrated in recognition of people affected and infected by HIV and AIDS within our community. Two events were hosted on that day. The first one was a car wash by peer educators, which aimed to collect and distribute sanitary products as well as create awareness to the challenges that women face in various spheres of life. UJ staff and students participated in delivering pads in exchange for their cars being washed. The project served young women residing at residences by ensuring a monthly supply of sanitary towels, especially for low resourced students. The second one was a Good Stories Comedy Night. HIV was originally introduced as the 'virus that kills', and for many years that was the picture associated with the virus. However, that picture has changed since the introduction of ARVs. The purpose of the comedy show was to change the way people view and experience HIV/AIDS with the aim of changing mindsets, fighting stigma and demonstrating that being diagnosed with HIV/AIDS is not the end, nor is it a death sentence.

Women's programme

In September, IOHA hosted the third edition of its Annual High Tea for women as part of its Cover Up Campaign. The campaign was started in 2014 as a means of raising awareness of the high pregnancy rate among students, and creating awareness and empowering them as to female condom use, as a means of taking responsibility for their own protection and not depending on male condoms as the only barrier method. Furthermore, an empowerment camp for both women and men was organised by female peer educators in September. A total of 24 men and 32 women attended the camp. The aim of the camp was to establish a platform where young men and women could engage in a non-threatening environment regarding issues around sex and sexuality as well as empowering each other on life skills and solutions on issues affecting them.

As part of the efforts to provide inclusive health and wellness services, IOHA in partnership with internal stakeholders, hosted a postgraduate health and wellness day. Health screenings that were rendered included HIV screening, blood pressure and cholesterol testing, weight management and facilitated reproductive health education dialogues. Such an initiative was well received since most postgraduate students felt priority was given to undergraduates; this included the concern that most postgraduate students did not have time to visit the health centres due to their academic demands.

Apart from hosting a postgraduate health and wellness day, IOHA in partnership with internal stakeholders hosted a dialogue titled: 'The unspoken experiences: Thesis vs personal well-being'. The dialogue was aimed

at exploring the challenges that confront postgraduate students in balancing their academic work and well-being. The panel consisted of various experts ranging from a health and wellness specialist, a specialist in lived experiences, and a research support specialist.

IOHA in partnership with the UJ Library, Campus Health, Department of Nursing and International Partners for Microbicides (IMP) hosted a dialogue focusing on a new preventative tool that may be used in the future once it gets approval from the various medical and drug authorities. The dialogue was well received by delegates, ranging from UJ students and staff, to the Premier's Office of the Gauteng Employee Health and Wellness Programme (EHWP), and various NGOs based in and around the University.

In concluding the HIV curriculum integration programme with FADA, students exhibited their work as part of the HIV IOHA/FADA exhibition under the theme 'Using art and design to address the sexual reproductive health and rights (SRHR) issues'. As part of the opening event, students were awarded prizes for their excellent contributions to the SRHR field.

Social Media: Website, Facebook and Twitter

IOHA's objective is to create the next HIV free generation by developing a community that is informed, educated, self-aware and inspired. Together with the University of Johannesburg and other partners, by leveraging the power of social media and campus radio, it becomes possible to reach out to youth in ways that are fun, engaging and interactive, thus breaking the barriers of stigma and discrimination. There is a growing body of evidence that supports the incorporation of social media into health promotion, and social media websites such as Facebook, YouTube, and Twitter are increasingly used by health promoters. Currently, visitors to the website are 62% male compared to 38% female, with the majority being between the ages of 18-24.

The IOHA Facebook page is an active means of communication, with many of its online campaigns being done through the page. The page has seen growing visible interaction and participation from the UJ community. To date, the page has had 1 065 likes. The total number visiting the page during 2017 was 70 162, with 96% participation, i.e. views, shares and comments, for campaigns advertised. The IOHA Twitter page earned 26 241 impressions from March to December 2017 (meaning the number of people who have seen and read tweets from the page).

It has also been observed that campaigns where there was partnership with other departments internally and externally received the highest reviews, i.e. TB Day, Youth Conference, Stigma Soccer Knockout and Worlds AIDS Day.

EMPLOYEE PROFILE

Table 1: Staff Composition

Gender	Demographics	Diversity
Female	3 black	0
Male	2 black	2 LGBTI

Staff development

Staff members attended training and workshops as per their individual development plan and also workshops orienting them to UJ governance, e.g. health and safety and HR. Coordinators attended management courses offered by HR to gain insight into high-level strategy, and in view of the IOHA succession plan. HIV programme coordinators also presented at conferences and workshops as part of contributing towards UJ's global footprint.

RESOURCE MANAGEMENT AND SUSTAINABILITY

Financial governance

The HIV/AIDS committee budget for 2017 amounted to R123 500 and 92% of the budget was used. The Institutional Office for HIV and AIDS budget for 2017 amounted to R3 667 850.24 and 96% of the budget was spent.

Monitoring and evaluation

Overall client satisfaction rate during HCT testing campaigns was 95%. Capacity building workshops training feedback averaged at 85%. Students were concerned mainly about the limited time allocated for training, which did not allow much engagement.

LEADERSHIP FOOTPRINT

- IOHA was requested to assist in the implementation of a peer education training programme at the University of Pretoria and Sefako Makgatho University.
- University Pretoria Colloquium: The University of Johannesburg was invited to attend the gender and sexuality colloquium, which was hosted by the Centre for Sexualities AIDS & Gender (CSA&G) at the University of Pretoria. The colloquium focused on Freud's theories that help us to understand gender and sexuality and the work that has been done by various organisations, such as the Other Foundation.
- IOHA also visited some churches and clinics to provide GBV awareness workshops as part of expanding UJ's excellence footprint.
- The Care and Support Plan put in place last year started to yield positive results as there was a database for all referred clients. Clients were also supported according to their choice, i.e. face to face, group, social media; and those that did not want to join the internal programme were referred to our external partner.
- IOHA represented UJ at the HEAIDS National Forum for SRHR Practitioners.
- IOHA led a Safe Zone project, which was aimed at ensuring that all stakeholders participate in creating a safe environment for students and staff, especially for marginalised communities.
- Conference presentations: To contribute positively towards UJ's leadership footprint, IOHA was represented at various conferences, e.g. the HEAIDS Youth Conference and UJ Youth Conference, with coordinators and students presenting at various conferences, and facilitating workshops.
- IOHA coordinated a meeting with PHC counsellors to give them feedback regarding strengths and gaps identified in the Care and Support Programme. Concerns identified were also discussed with regard to referring students to the programme. Further updates on the consent for a referral will include reasons for a referral and an option to be contacted or not. Their input is also considered regarding ways to improve the programme.
- IOHA hosted a track session at the Community Engagement Women's Day celebration, of which the focus was GBV, in celebration of Women's Month.
- A research subcommittee was initiated to fast track and coordinate HIV research and curriculum integration in a more focused manner.

CONCLUSION AND WAY FORWARD

The strategic focus for 2018 will be on the following:

- **Prevention, care and support**
 - Peer education – Work towards registering the LINK e-learning programme through the Faculty of Education.
 - Residence programme: Sustain and expand SRHR awareness through campaigns and events at both external and internal residences on current 'hot' topics, e.g. Sugar Daddy, suicide and depression.
 - Mass HIV counselling and testing: Investigate the testing profile of UJ Community, e.g. First Year Programme effectiveness, and where students test other than at UJ, etc. Explore a better statistics data management system to allow for UJ statistical profiling.

- Promote and advocate human rights issues related to marginalised groupings like women, PLWD, LGBTI and PLHIV:
Strengthen the Safe Zone Campaign through partnerships with different internal and external stakeholders, and develop a sustainable year plan through consolidation of different calendars.
- Care and support for PLHIV through individual and group wellness programme: Expand the service to students who did not test internally.
- **Fitness for global excellence and stature**
 - Prevent HIV and promote sexual health by addressing social drivers to the spread of HIV and AIDS, including risky student behaviour, i.e.
Coordinate the RSB committee and formalise the governance thereof.
Participate in programme planning and implementation with involved stakeholders.
Partner with the Department of Social Development and Soul City on a substance abuse programme during campaigns and events, and with a conference to increase social mobilisation.
- **National and global reputation management**
 - IOHA desires to be the epicentre of knowledge creation globally regarding HIV/AIDS, STIs and TB within the higher education sector (research, curriculum integration and innovation) by:
Offering an internship programme for Social Work and Marketing students.
Coordinating the research task team and implementing agreed objectives in partnership with faculties and departments.
Partnering with faculties (a minimum of three) to publish work done on SRHR and to do more collaborative research work with their students.
Publishing a minimum of two articles on a SRHR related trending topics.
- **Global excellence**
 - Revive the regional forum in partnership with surrounding HEIs.
 - Coordinate the RSB programme through HEAIDS funding 2018-2019.
- **Challenges**
 - There is shortage of funding to assist in implementing some of the Safe Zone projects, and the plan in 2018 is to compile a shared programme so that partnering departments can contribute towards planned activities.
 - Even though targets for the distribution of condoms were achieved, there was a decrease in the uptake as the excitement about flavoured condoms had subsided. Availability will be increased at key areas like residences and hot spots around campuses.
 - Even though faculties involve health and wellness departments during FYS, still not all faculties and departments have taken the agenda for SRHR as an important one towards comprehensive care and support for students. This remains the challenge to the HIV committee; and as the UJ policy for HIV, TB and STI is reviewed and reflected upon this year, the realisation of this key national agenda will be a priority. It is important to produce graduates who are aware of global and national social challenges, and HIV is one of them.

Sr. Rainny Nkhatho

Head: Institutional Office for HIV and AIDS
