

Brief van Dr. Austin Mdolo aan bestuur

St John's Hospital
P O Box 18
Mzuzu
MALAWI
13th December 2009

Dear Ben,

A REVIEW OF MY COMING BACK TO ST JOHN'S HOSPITAL

As I indicated earlier, I came to Malawi from South Africa on the 2nd of November, 2009 and I started work on the 16th of November.

I received a warm welcome by the hospital staff and individuals in the community who know me.

Let me take this opportunity to thank the friends of St John's Hospital of Netherland for the financial support that they gave me for this year while I was in South Africa. The assistance was timely as the hospital could not afford to support me.

Having worked for close to a month now, I have a mixed picture of the situation at the hospital. There are opportunities and threats. Let me start with some of the strengths I have observed:

1. Dedicated hospital staff- despite the gaps left by the staff who resigned the remaining staff is wonderful and seem dedicated to duty.
2. A hard-working caretaker administrator – he wants to see a turn- around of the situation of the hospital.

Opportunities:

1. Improving patronage –People's perception about the hospital is changing and we are witnessing an increase in numbers of people seeking services at the hospital as days pass.
2. Adequate infrastructure- Hospital has adequate infrastructure including a modern theatre where all sorts of standard operations can be performed. We are able to perform major gynaecological operations, which is welcome to patients and students at the St John's nursing college for their assessment.

Threats:

1. Lack of staff in key areas of Pharmacy and Laboratory- There are no qualified staff in these two areas at the moment. Partly this affects the performance of the two sections.
2. Lack of up-to-date equipment for proper gynaecological operations – Labour ward has no modern foetal heart monitors, no proper ultra sound machines with vaginal probes, no laparoscopic/ hysteroscopic equipment in theatre. These modern equipment would be attractive and indeed improve patient care.
3. Water and electricity bills- the hospital still has millions of kwachas to pay for the water and electricity bills. The monthly bills for water are unbelievable such that we are looking at ways of tracing leakages in the system. We intend to install meters for different sections so that we monitor the water usage of each section.

4. Money owed to lending institutions and donors- we have no idea of how this money will be repaid. Months before I came, two hospital vehicles were taken by one company and were later auctioned to at least recover their money.

Ben, if it was not for the threats 3 and 4 outlined above, I would be confident that the hospital will survive. The Board seems not effective in dealing with the challenges the hospital is facing. Hospital management is not informed on the progress of the case of the former administrator and the two finance officers in court. It seems though that hearing is in progress.

Whatever the case, I will be here at St John's till I complete serving my bond agreement.

Kind regards

Austin