NDLOVU CARE GROUP

NDLOVU CARE GROUP ANNUAL REPORT 2015 - 2016

Providing Hope and Opportunities through Innovative Health Care, Child Care and Community Development

2015 - 2016 Another Year of Excellence

Research
Child Care
Community Care
Health Services

Ndlovu owes its reputation for excellently designed programs to a tried and tested system of in-depth research backed-up with accurate evaluation .....evidence based outcomdes ensure consistence in quality service delivery

Index

INDEX

VISION Ndlovu Care group

Providing opportunities and hope through innovative Healthcare, Childcare, and Community Development

MISSION Ndlovu Care Group

Ndlovu Care Group advances rural communities with

- Health Care Programs
- Child Care Programs
- Community Development Programs
- Research Programs

In cooperation with the relevant Governmental Departments through a researched and evidence based model that is aligned with the National Strategic Plans for South Africa and the Millenium Development Goals.

Our Vision & Mission

...a strong coalition was formed that has the potential to execute world-class research with the explicit aim to better understand disease and thereby improve our ability to prevent and treat the major threats to the health of the people we feel responsible for.

Prof Blijham, Ndlovu Annual Report 2014

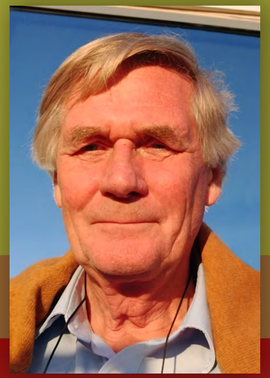
Chairman
Prof G. Blijham

Every year is different at Ndlovu Care Group. Indeed this should be the case for an organization that goes for excellence and innovation. In the past few years one of the main challenges was to make a major transition in the funding of our health care, in particular HIV care and treatment programs with 11 000 patients in care and over 8000 on ARV treatment. We feel very fortunate that with both provinces in which we provide HIV/AIDS care and treatment, Limpopo and Mpumalanga, the Provincial Departments of Health have enabled us to continue the excellent care we are giving to thousands of patients. Indeed we think we have succeeded to lay the foundation for further collaboration with government to the benefit of the many patients in rural areas that are still in need of access to quality health care.

With this challenge being successfully met, the preceding year witnessed the birth of a new one: research. Patients with HIV infection are becoming chronic patients with a good quality of life and excellent long term outcomes. This does not mean that their health is completely returning back to normal. They have suffered from the virus as well as from the ARV treatment and the long term effects thereof are virtually unknown and neither well described nor researched. It is of great relevance for good future health care in South Africa to get to know these effects and Ndlovu is in a unique position to contribute substantially to this knowledge. The results of this type of research may also have great value for other resource limited settings as well as the developed countries. Together with the University Medical Centre Utrecht, the Julius Centre and other faculties of the Utrecht University in the Netherlands and the Witwatersrand University in Johannesburg, the Ndlovu Research Consortium was founded to address these issues. The preceding year saw the first, very promising activities of this consortium. Other research topics include the better prediction and prevention of HIV resistance and the preventive effect of a vaginal ring containing an Anti Retro Viral drug, Dapivirine. Research directed towards better health care is booming at Ndlovu Care Group.

Ndlovu Care Group and community care belong together and this will continue to be the case. Pre-school , Early Childhood Development, after school projects, sports programs, nutritional issues and child-headed households will remain points of attention. In the preceding year a new theme was added: disabled children. Community based rehabilitation facilities to provide these children with the best care to the benefit of themselves, their families and the local society are virtually lacking. Ndlovu Care Group has taken up the challenge and task to try and fill this gap. This is not going to be easy and will take time. But then, is that not true for every true innovation?

No year is the same at Ndlovu Care Group because we go for excellence and innovation. 2015-2016 was no exception to this rule. Once again the Board of Trustees is thankful to all who took up the various challenges and contributed to our success. Without the innumerable people committing their efforts to Ndlovu, no progress in care for our fellow citizens and patients can be made.



Geert H. Blijham
Chairman of the Board of Trustees of Ndlovu Care Group

Dr Hugo Tempelman

CEO

2015 - 2016

2015 - 2016…….. a year not like any other

Lots of highs, few lows and many beautiful new roads to be explored.

NCG is very stable at the moment and we celebrate a well organised and functional Board of Trustees which is guarding our governance, risks and prospected plans. All our Board members are providing their knowledge without being remunerated for which we applaud them. We celebrate a core of funders who are many years with us, believe in the work we do and are happy to think with us to explore how we can roll out our model to create more beneficiaries who can benefit from NCGs Health Care, Child Care and Community Development services. We also celebrate new funders who see the importance of NCG's work and who want to invest in the future of South Africa through improving the quality of life of all our beneficiaries. It is only because of all donors and funders that we can bring so much hope in this community.

The Ndlovu Research Consortium took major steps this year, the relationship between the partners WHRI, University of Witwatersrand and Utrecht University matured and expanded with interest of Potchefstroom and Stellenbosch as well. We celebrated our 2nd NRC Conference with 27 attendees of five different universities and two National institutes, the NICD and NHLS, with top-scientific discussions.
The Ndlovu Research Consortium accommodated two PhD students and four Masters students from Utrecht University, the Netherlands; two PhDs from the University of Witwatersrand, South Africa are planned for 2017, three major research trajectories are ongoing and two new trials in the field of vaccine development are secured.

The Ring Study which we performed in cooperation with IPM provided very positive results and is still on-going. The Ring provides at least 30% reduced transmission of HIV in women and proves that microbicides have a solid place in the prevention package which we need to offer to our population in the fight against HIV. It is also the first mean of prevention which places women in the driving seat. Women can make a consented choice to wear the Ring. Women can stand up against the sexual inequity which does not always leave them with a choice. The Ring is a female empowerment tool as well.

The Clinical Care Programs are well on the road with a total of approximately 8 000 HIV patients on treatment and 14 000 in care, an expanding TB program and excellent Primary Health Care services in the community. Both programs are funded through the Department of Health and we are proud on this relationship. 2016 is the year of re-negotiating the contracts and we will do our utmost to maintain a status quo.

The low of this year is the fact that we had to close down our 24-hour services due to non-compliance with the Private Hospital regulations. A sad moment, a sad appreciation for what has been done with dedicated community members for community members in need. But we can also celebrate it as a success: the Ndlovu PMTCT program has been innovative from the start onwards and delivered a steady vertical HIV transmission below 2%. That made us advocates for our protocol and Ndlovu has contributed to a national debate resulting in the fact that a low transmission of HIV mother-to-child is standard in all Department of Health's clinics.

Dr Hugo Tempelman

CEO
Ndlovu Care Group

Our Child Care Program has made enormous steps in quality and quantity of services for the children we cater for.

A Community Disability Care Unit has been built in Phooku and waiting for the right standard of employees to start a new program in NCG's care system: Disability Care with an outreach to the homes of the disabled children. We are looking forward to commence this service in early 2017 and expand it in the same year to two more locations. Exciting work whereby NCG tries to contribute to a national, affordable, efficient, Disability Care Program for our rural areas.

NCG is busy with construction: in November / December 2016 a Computer-school will be constructed in Bloempoort Combined Primary and Secondary School providing access to computer literacy, computer sciences and access to the WorldWideWeb. In schools in our areas access to books and teaching material is a real challenge. Access to computers and computer literacy can make a real difference here…..

A new Research Centre is under construction in Elandsdoorn: a 1000m2 building, huge, spacious and with room enough for a state of the art research laboratory. Completion is expected in March 2017. It will house the Ndlovu Research Consortium research activities and new trials we would like to participate in.

As said, 2015 - 2016 was a different year with new programs, explorative and innovative ideas, lots of construction and major clinical programs with a high level of responsibilities to secure the continued quality care the people are used to. Sometimes we take too much on our shoulders and we feel the heavy pressure on our back, forcing a little at times time, but NCG always comes out stronger.

NCG is grateful that we can do so. We have a wonderful team at NCGs Head Office providing strategic back up, operational security, financial responsibility and scientific coaching. It is a super team of people who day-in, day-out assist the Ndlovu Employees in the field. The NCG employees in the field feel the heat in their necks every day for the care they need to provide, the double poverty gap people live in and the minimal support they have from systems which should function.

These Ndlovu's are the real heroes: strong, thick skin, big feet and a good memory.

These Ndlovu's are always continuing to fight for a better life for those in need.

I would like to wish you all; Donors, Funders, Fans, Beneficiaries, Employees, ExCo and our Board of Trustees a Wonderful, Healthy, and Hopeful year ahead of us.

Transparent governance is in the interest of all our stakeholders, especially funders and beneficiaries, ensuring the ethics, integrity and reputation of Ndlovu Care Group remains unblemished and promotes sustainability

Governance

BOARD OF TRUSTEES

Chair person:

Professor G Blijham:
Former CEO, University Medical Centre, Utrecht, the Netherlands

Non Executive Members

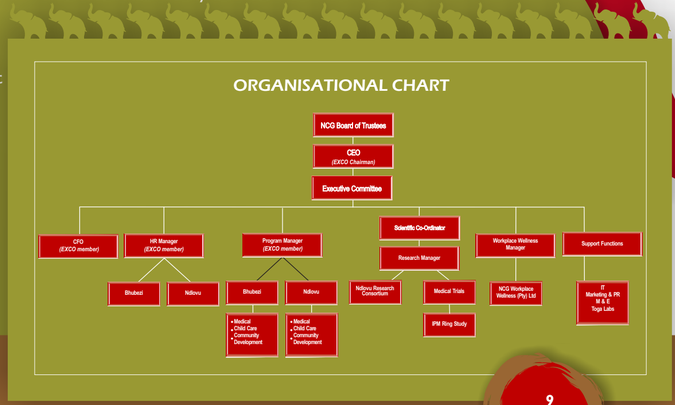
Lynn van der Elst: CEO MiET Africa
Ronald Vles: Corporate Lawyer, the Netherlands
Dr Sagie Pillay, CEO National Health Laboratory Services
Dr Eugene Sickle, Deputy Executive Director, Wits RHI

Executive Members

Dr Hugo Tempelman and **Lourens Duvenhave** of Ndlovu Care Group

Ndlovu Care Group is governed by a Board of Trustees who supervises the Executive Management Committee (EXCO) under the guidance of the Chief Executive Officer.
The EXCO comprises the CEO, CFO, Program Manager and HR Manager. The EXCO manages challenges, consider and evaluate strategy and the expansion of programs through identified opportunities. The EXCO additionally ensures that a thorough risk assessment is performed at least annually. Emerging risks are assessed and incorporated as soon as they are identified. Each program is individually exposed to certain risks which are specifically acknowledged and mutually managed.
The CEO is responsible for the execution of the strategic vision of Ndlovu Care Group. Additional responsibilities of the CEO are those of controlling fund-raising and the maintenance of external contacts, donors and departments.
The support functions such as IT, Marketing, and Laboratory services all fall under the CEO's control.

Ndlovu Care Group's central financial office and HR function is under full control of the CFO. The CFO is responsible for financial accountability of all operations. KPMG and De Loitte & Touche annually audit the Ndlovu Care Group financials.
The Program Manager is responsible for Community Health Care, Child Care and Community Development Programs including operational and reporting, and all tasks belonging to this. Transparent reporting, compliant with individual donor requirements has secured donor loyalty to Ndlovu Care Group and endorses the integrity of its financial governance. Although it is Ndlovu Care Group's aim to create sustainability and less donor dependency through integration in the public domain, donor support will remain an integral part of the model, as Ndlovu works in communities which are deprived of the most basic services.
Ndlovu Care Group is legally registered as Ndlovu Medical Trust, (Trust registration: IT 10961/99; Non-for-profit Organisation: 019-524-NPO; Public Benefit Organisation exemption number 930-002-417)



Richard Branson, Virgin Group Founder, said "The Bhubezi Community Health Centre was set up to help those suffering with malaria, TB and HIV /AIDS. The difference the clinic has made to the lives of those it helps is truly incredible. We are grateful to the local community and to everyone who has helped Bhubezi thrive. "
11 November 2015

Community Health Care Elandsdoorn & Bhubezi

2015 - 2016

Accessible to the community and intelligently structured towards attacking the stigma associated with HIV and AIDS, the Ndlovu's Community Health Care Centres not only offer comprehensive health services, but also promote awareness of HIV and of the necessity of early care seeking through several outreach programs into the community. Ndlovu's partnership with the Department of Health (DoH), has been strengthened by the aligning of the Ndlovu services with those of the DoH school health team, for example the Ndlovu Wits Audiology Program. These have all proved to be beneficial to the community.

By February 2016, Ndlovu Care Group had initiated 16 721 patients on anti-retroviral treatment since its inception. For both sites, 7 458 patients are still active on treatment. The situation regarding ARV drug supply has improved significantly for the two sites. In this reporting period, the two facilities did not experience any shortages of ARV's except for Alluvia which is still out of stock nationally.

The Columbine 24 Hour Maternal Unit offers antenatal care to around 350 pregnant women per annum. HCT(HIV Counselling and Testing) is offered to all new antenatal care clients on the first visit and on subsequent visits if they declined or tested negative the first time. The 24 Hour Unit includes wards for full-blown AIDS patients who cannot be treated at home. This clinic brings essential services back to the community whereby the family members are directly involved in the treatment and care. The palliative care unit admits around 200 patients per annum, with an average of 91% bed occupancy.

From its inception, the PMTCT (Prevention of Mother to Child Transmission) Program has had a HIV transmission of less than 1% throughout. Since initiation, the PMTCT protocol was based on Triple Therapy for the mothers and a weak PEP for the neonates. In 2003 when this was initiated, it was a very daring protocol in a country denying the relationship between HIV and AIDS. Now, in 2016, it is National Protocol.

Ndlovu Care Group Community Health Services additionally offer cervical cancer screening, diagnosis and LETTZ laser treatment on site. The prevalence of abnormal results of cervical cancer screening averages around 48% in HIV positive women without a proper way to refer these women to an oncological centre. This high prevalence verifies the importance of pro-active tracing of early cervical cancer in HIV infected women. Ndlovu performs around 150 pap smears and 50 colposcopies per month.

The phenomenal successes of the Bhubezi Community Health Clinic can be directly attributed to the extent of research that had precluded the establishment of the Clinic. Bhubezi Community Health Centre had approximately 4 000 HIV patients on treatment in a very steady cohort at the end of this reporting period.

The Technical Assistance Program that serves 24 Government Clinics around Bhubezi, performs as planned and Ndlovu Care Group is the process to have the 24 clinics re-assessed through the Ideal Clinic score. The Technical Assistance team is fully functional and made baseline intakes of each clinic with individual clinic Quality Improvement Plans developed. The Team re-evaluates each clinic's QIP on a monthly basis in order to measure improvement. The DoH Mpumalanga is satisfied with Ndlovu's performance and moreover consults our Team to assist with tasks beyond Ndlovu Care Group's mandate. The open communication and direct lines between our Technical Assistance team and management at district and sub-districts levels have improved the relationship with the DoH in general. The partnership between Bhubezi and the DoH continues to mature. The use of Tier.Net as comprehensive database will be in full operation by end April 2016, with stationery that has been adapted to cover the unique aspects of the Ndlovu program which include Research and Primary Health Care.

Health Care
Achieving Excellence at Bhubezi

The unique Program-integration of Ndlovu, is a distinctive trait that has contributed to mutual successes and the sustainability of individual programs

Ndlovu Wits Audiology Program

The Ndlovu Wits Audiology clinic and outreach program has, since its inception in 2014, expanded significantly. The clinic now offers not only diagnostic audiological and newborn hearing screening but also school hearing screening and community outreach programs to surrounding villages. In 2015 audiological services were rendered to 5,497 individuals.

The newborn hearing screening program celebrated its first anniversary in June 2015.

School hearing screening services were established in April 2015 and are offered by three trained hearing screeners under the guidance of the audiologist. The hearing of 2 258 Grade R and Grade1 learners at 11 primary schools were screened during this reporting period.

The Ndlovu Wits Audiology Program participated in the successful Rotary Health campaign and the hearing of 181 community members were screened.

Community outreach programs were implemented in May 2015 and hearing assessments are now also done at the Kwarrielaagte- and Elandsdoorn clinics and twice a month at the Ndlovu Community Health Care Clinic.

Clients needing medical attention are referred.

Ndlovu Care Group employs a strategy of seeking donor diversity for every project that is launched to ensure continued operational funding for all projects. Government support for Ndlovu Care Group as the local health care provider for Government, the community's involvement in projects, together with the professional training staff receive, are all elements that sustain the various Community Health Care Projects. Staff members are trained to reach a level of professionalism to ensure sustained self-regulated performance delivery and the re-establishment of breadwinners in the rural area is exceptionally positive and motivating for Ndlovu staff living there.

Ndlovu's prevention and motivation programs - endorsed with social marketing campaigns - educate the target population towards preventing adverse medical and social conditions, (which are more costly and traumatic to treat), and this knowledge has proven to achieve sustainable outcomes and loyalty to the company's mission.

Ndlovu applies the Maslow hierarchy to achieve sustainable outcomes, starting with support to the physiological needs of the individual, following with step by step stregthening of the individual, with programs promoting and supporting people to achieve the final step in the Maslow Hierarchy, which is that of self-actualisation. Some of Ndlovu's most gratifying achievements have been instances where individuals have reached levels of education, employability and respect that they would not have reached without Ndlovu Care Group's interventions.

Sustainable Health Care

"My life has changed from being bored and not having goals to having something wonderful to look forward to."
Rachel Ntobeng, about her involvement with the Ndlovu Youth Choir. Rachel is now a graduate at Nursing Schoo/

Child Care Programs - An excellent development chain

Creating hope and opportunities for the children and youth in the Ndlovu Child Care Programs, have never been more in evidence than this past year. With the variety of projects and events designed to create awareness of the varied opportunities for personal development, Ndlovu Care Group staff saw an extremely busy year.

The past year experienced an increased emphasis on academics for learners. After school tutoring, an invitation to free courses by UNISA (for the whole community), and computer training were all offered at the Chill Hub. Learners were aldo exposed to comprehensive career opportunities at various career Expos.

This year's OVC Christmas Party saw the first time inclusion of children with mental and physical disabilities. With the increased awareness of the plight of children with disabilities, Ndlovu Staff volunteered to assist existing institutions who care for the disabled in the community wherever they could, such as their special efforts on Mandela day to renovate school buildings. The special care and dedication required to really make a difference, has everything to do with compassion and going the extra mile, and is not a mere job.

Ndlovu Care Group enjoys excellent and well organised assistance, community based and other, from outside the catchment area and abroad. Events such as the Ndlovu OVC Christmas Party, Child Protection Day, Youth Days, Sports events, Food Parcel Fund Raising, Hearing Awareness events, Cultural events and training and many other child focused events would have been impossible without these loyal supporters. The integration of the Child Headed Household Program, the Ndlovu Nutritional Units, the Ndlovu Pre-Schools, Sports, and Chill Hub events as well as Audiological screening, give children integrated and well balanced exposure to as many as possible opportunities towards comprehensive development.

The first bricks were laid towards the development of another Nutritional Unit, Pre-School and Chill Hub in the outlying area of Bloemhof.

Roll-out of a Program for the Disabled

There is little national evidence available on access to early learning for children with disabilities. A 2006 study found that only a quarter of children aged 0-6 years, which were recipients of the Care Dependency Grant, attended a crèche or child-minding group.

Early detection of disabilities is crucial to ensure that children receive effective treatment and rehabilitation. Very often, however, disabilities are only detected quite late in the child's life. Preventing degeneration of the handicapped due to neglect, can be reversed by effective intervention. Ndlovu Care Group's objective, as with every program, is to start with effective prevention and treatment to circumvent progressive deterioration and regression. Identifying individual needs and problem shooting is essential to effective interventions. Ndlovu has well monitored Nutritional Units and Pre-schools that allow for the intake of children with moderate disabilities, but dedicated care for the severely handicapped is lacking. With the expansion of the Ndlovu Child Care Program, the Ndlovu Disability Program is proposed to be an integral part of this service delivery.

The interdisciplinary research done by the Ndlovu Research Consortium, will include research findings regarding the project, enabling Ndlovu Care Group to establish a stronger than ever evidence based footprint in South Africa regarding integrated child care.

The beneficiaries of this project will not only be the children in the program, but the community in its entirety and the South African Government as a whole, who will be able to facilitate this evidence in bench-marking for future similar projects.

An existing building (the Joris House) has been renovated and decorated, ready for the use of a dedicated care centre for the disabled. Marketing, training and recruiting will start in the new reporting period.

"I think it (this experience) will show that you can achieve and stand up for yourself and your future, take one opportunity at a time, I want to show people that in life, not all things come easy, you must face challenges for you to grow, you have to fail before you succeed."

Charlotte Boitumelo Maila

Child Care Programs
A brand new adventure

Two gutsy candidates were chosen from the Ndlovu Child Care Program to participate in the challenging 40 000 nautical mile Around the World Clipper Race. The organisers have only praise for the two youngsters, Sewisa Lawrence Magane and Charlotte Boitumelo Maila, describing them with terms such as 'fiercely independent', engaging, witty and hard-working'. Training was both physically and mentally stenuous to the extreme to prepare for any eventuality. Danger and discipline go hand in hand, but Boitumelo and Lawrence are no newcomers to challenges. Both youngsters are enrolled in the Ndlovu Child Headed Household program, both are double orphans from an early stage in life and both tough go-getters. Lawrence has cared for his younger brother by himself for as long as he can remember, and Boitumelo was a little girl of nine years old when she was left behind in an empty house when both parents died.

Lawrence completed his leg of the race from Cape Town, South Africa to Albany, WA, Australia – 4,700 miles / 7,560 km around the end of November and Boitumelo leaves around Easter 2016 for Leg 6 (from Qingdao, China to West Coast Australia – 5,600 miles / 9,000 km).

Lawrence is adamant to finish high school and all possible support is given to him and his brother to reach their goals. He hopes to become a doctor one day. Boitumelo is as determined to make a success of her career, with her heart set on studying nursing after the race. No matter what the future holds for these two, both have had an excellent kick-start in life and we wish them only the best.

The Sapinda Rainbow Foundation is funding and organising this incredible journey towards fundraising for the Ndlovu Care Group's Research Centre and in general to promote leadership and life skills in disadvantaged young people.

A busy year for the Choir

The Ndlovu Youth Choir has once again been the darlings of every-one they entertained in the past year.

For a second visit abroad in 2015, April this reporting period, the Choir charmed audiences, with organised and impromptu performances in the Netherlands and Germany.

New talent was sourced with the usual annual talent scouting auditions and hope-fulls came from far and wide to participate. The Ndlovu Youth Choir experience hones choristers to new-found confidence and unexpected life skills, something they would most probably not have experienced if they had not joined. The Choir was invited to perform at many in-house events and were invited to festivals and concerts outside Elandsdoorn. One of the most exiting things that happened to the Choir this year, was that, with the generosity of various funders, Ndlovu Care Group was able to purchase a brand new bus to take them to outlying events. There is no doubt that the marketing value the Choir has for Ndlovu Care Group endorses this expense.

One of the stalwarts of the Ndlovu Choir, vocalist and drummer, Sandile, was offered a 3 year scholarship to train as a percussionist and theatre manager. In his own words... "I attribute my success to the Ralf (Ndlovu Choir Master), the Ndlovu Youth Choir and my mother. I learned that I am able to make decisions without succumbing to the peer-pressure that is such a problem for youngsters in the community where we live. This has been an emancipating life-lesson."

The Miracle Theatre has earned its keep during this reporting period, being the venue of choice for most events, internally as well as for community activities. Events, such as school choir concerts, career expo's and culture related gatherings, such as regular Jazz Jams and drama school, creates value for the theatre and theatre goers on many levels.

"The changes we (Ndlovu Care Group) have initiated will not leave when we leave.
They will stay because we have built up local knowledge and local capacity to continue with it"
Dr Hugo Tempelman, May 2015

Community Care

2015 - 2016... characterised by community participation

2015 - 2016

This reporting period has shown a marked increase of participation of the Moutse Community in the events and operations of Ndlovu Community Care Programs. With the co-operation of community organisations such as the Bantwane Youth Initiative (BYI), there has been an increase in awareness of Ndlovu's Community Care Programs. The BYI has been working closely with and supporting Ndlovu's Programs for a few years now, and has been especially active in the past year, initiating and rolling out, amongst others, the Chance2Advance UNISA program. BYI organised career expos with comprehensive follow-ups. Ndlovu's alliance with this group of dynamic young professionals (who all have their roots in Moutse) has impacted and benefitted the Community of Moutse immeasurably. The Ndlovu Community Care Programs together with UNISA and BYI are working towards and hoping to see community skills come on par with what is expected by employers and to add value to skills and delivery of small and medium business enterprises which should give entrepreneurs in the community an added edge. Very successful career expo's, gives the community insights to opportunities undreamt of.

The Ndlovu Information Technology Training program operating from the Chill Hub, has been the venue for internet access to search and apply for study- and job opportunities and much more. With the assistance of Ndlovu staff and the BYI staff, there have never before been more opportunities actively accessed.
During the course of the year, other projects such as 'English for Kids' were hosted by the Chill Hub with 49 youngsters attending the course. The reading club at the Chill Hub attracted at least a 1 000 children and teachers from local schools were trained in advanced classroom management. One hundred health workers from medical facilities in the Elandsdoorn district completed the Health[E] Foundation's Treat and Care on-line course in the past reporting period with the final wrap-up at the Ndlovu Chill Hub. Training was done on-site at the Chill Hub by professionals all the way from the Netherlands.
The Sports Centre adjacent to the Chill Hub saw its share of activities this year, including specialized training such as kick-boxing by international trainers, amongst others. The sports fields were the ideal venue for events such as National Child Protection Day and a myriad of disabled friendly sports matches and trainings. Formalized staff soccer teams at both Bhubezi and Ndlovu were established, resulting in an epic stand-off at the annual year-end party held in Groblersdal. The past year also saw an increased awareness of the gym facilities at the Sports Centre and an increase of attendance.

2015 - 2016 self sustaining change

Leuk is een verkeerde woordkeuze!
Indrukwekkend,hartverwarmend,een voorbeeld functie en het beste is als je er zelf naartoe gaat .

Jan Talboom

Community Care

Excellence in service delivery triggers community participation

2015 - 2016

Different projects, such as those of the Ndlovu Research Consortium, the Audiology Program, the IPM Ring Study and other programs held their own information sharing events, all at the Ndlovu Miracle Theatre, creating awareness and understanding of their respective projects. These events were enormously successful and it was noted that the community did not need incentives to attend as have been the case in the past.

Many projects need to bring services to the community members' doorsteps, and to that avail Ndlovu Care Group has been fortunate enough to be able to brand two large vehicles, one older and the other brand new, for outreach programs and for the Ndlovu Youth Choir respectively. Both of these vehicles are evidence to the community of the dedication of Ndlovu Operations and Staff. This was again in evidence when a large number of Ndlovu staff took on the task of making their personal services and time available to the less fortunate on Mandela Day. The Ndlovu Dental Program is still in full swing, despite the shortage of operational funding. The preventative function of the Dental Program is evidence of Ndlovu's work toward pro-actively preventing deteriorisation.

The work done in the community of Moutse has established a sense of friendly cooperation as is evident at many Ndlovu Community Care events when the cooperation of the community is sought.

The drought of the past year has brought many hardships to the community.

Ndlovu was fortunate enough to get enough funding for the erection of 7 additional boreholes, bringing the total of Ndlovu Community Water Projects to 50.

the Ndlovu Research Programs

The Ndlovu Research Program continues to grow and to contribute substantially to the reputation of Ndlovu Care Group. The Ndlovu Research Consortium (which comprises a number of studies) together with the IPM Ring Study, are all included in the Ndlovu Research Program.

With the continued expansion of the Ndlovu Research Program under the leadership of Dr Tempelman, as the Principal Investigator, the need for coordinated management has become a necessity for integrated participation of the various research studies.

Plans to develop a dedicated Research Building are in the pipeline for the next reporting period.

The Ndlovu Research Program submits all research proposals to the Research Ethical Committee of the University of Pretoria and to DOH Limpopo Province. All studies develop and implement Standard Operating Procedures whereby each study learns from the experiences of the other, so that local procedures are standardised over the various studies.

Research staff have expanded and consist of a medical doctor epidemiologist, medical doctors, a social scientist, 2 microbiologists and several community liaison officers, counsellors, nurses and data capturers. All clinical staff can become involved in research activities. The Community is involved in as many information sharing events as possible, to keep them updated and informed about the various programs. Ownership promotes cooperation. All research staff are certified in Good Clinical Practice (CCP). The program uses an external commercial laboratorium for chemical analyses. As with all programs, the Ndlovu Research Program utilises the Ndlovu infrastructure and the IT Department specifically for the development of databases and for linking participants to the medical file system (Health Source) if they are patients at the clinic.

According to Maslow's hierarchy, if a person feels that he or she is in harm's way in other words, threatened by ill health amongst others, higher needs will not receive much attention.

the Ndlovu Research Consortium

The Ndlovu Research Consortium, established in 2013, is the formal collaboration between Ndlovu Care Group, the University Medical Centre Utrecht, the Faculty of Social Sciences University Utrecht and the Witwatersrand Reproductive Health Institute.
In 2015, the Ndlovu Research Consortium's main activities concerned the continuation of research initiated in 2014 together with the start of new research projects, the development of new research proposals, the organisation of a second scientific meeting and the deployment of the services of a scientific coordinator at Ndlovu Care Group's Research Facility in South-Africa.
Several PhD- as well as MSc students participated in Ndlovu's research activities. Ndlovu Research Consortium staff participated in the training of local staff at the Ndlovu Medical Clinic and the local district hospital.
Research staff gave presentations at the annual Provincial Department of Health's Research Day to inform peers of the research done by the Ndlovu Research Consortium.
The benevolence of the community was evident at each informative event.

Research the Ndlovu Cohort Study (NCS)

The backbone of the Ndlovu Research Consortium's activities is the Ndlovu Cohort Study (NCS), which started with its data collection in 2014. The NCS is a multi-disciplinary study which compares HIV-positive and HIV-negative subjects to investigate HIV and (lifestyle-related) chronic conditions. Multiple research questions will be addressed over the course of the anticipated ten years of follow-up. Research questions are formulated by the various disciplines involved: epidemiology, infectious diseases, social sciences, virology and immunology. The NCS has a special focus on cardio-vascular diseases, an important co-morbid condition in HIV-infected individuals, whereby treatment might be an extra risk factor. The cohort aims to include 1000 HIV-positive as well as 1000 HIV-negative individuals, which will be one of the strengths of this research study. By the end of 2015, 1,095 participants had entered the NCS, 369 HIV-positive (34%) and 726 HIV-negative. A refreshment training in vascular ultrasound measurements was given in September 2015 by the Hypertension in Africa Research Team (HART) of the North-West University in Potchefstroom. After 12 months participants are called back for a new interview, physical examination, ultrasound measurement and blood drawing.
The multi-disciplinary design of the NCS gives the opportunity to link several sub-studies with the cohort, taking advantage of the same participants.

- Social Sciences Sub-study: to study quality of life in HIV-positive with HIV-negative participants. This sub-study interviewed 850 participants of the cohort. Three social sciences students looked into different research questions for their MSc traineeships.
- HIV associated neurocognitive disorders Sub-study (HAND): to test several screening instruments for neurocognitive disorders in the local rural African context. A medical student started a pilot with 15 volunteers and will continue the data collection of 200 participants in 2016.

Health is paramount to achieving holistic wellness

Once a person's lower levels of physiological and safety needs have been met, higher level needs become important

Maslov's Hierarchy of Needs

Research Studies

ITREMA & CoRecTSA & Other studies

- The ITREMA project consists of a randomized controlled trial which investigates a novel monitoring strategy for HIV-infected patients during anti-retroviral therapy (ART). This investigational monitoring strategy consists of intensive monitoring of viral load combined with additional diagnostic testing in case of viral rebound. This strategy will be compared to the current South African standard of care for monitoring of ART. In addition, researchers are collecting data on predictors of therapy adherence in order to gain insights in risk factors for non-adherence and therapy failure. Enrolment is currently ongoing.
- CoRecTSA: In addition to genetic analysis of viral strains immune activation markers are measured in order to detect immunological correlates that may potentially underlie switching of viral tropism. The last samples were collected in April 2015 and transferred to the Netherlands.

Other Research:

- Ndlovu Oraquick Self-Test Study: this study will look into the usability of the saliva Oraquick HIV-test as a self-test in a rural community in South Africa. The aim is to study to what extent people can read and follow the instructions, perform the test and interpret the test results. The study will start data collection in 2016.
- Biometric linkage to care in home based oral mucosal HIV Testing and Counselling programme: the extension of existing HIV Counseling and Testing activities through a home based program that aims at testing more local residents, more men, and more HIV-positives in an earlier phase of their infection, connecting early diagnosis through Electronic Health Management Systems and unique locater usage to early care seeking behaviour and disease management. The project will start in the course of 2016.

IPM Trial

Dapivirine Ring Study

Ndlovu Care Group is a clinical partner to IPM 027 in a trial to research the efficacy and safety of the Dapivirine Vaginal Matrix Ring in healthy HIV negative women. The focus during this reporting period has been mainly on the adherence and retention of participants to create accurate and reliable data on the efficace and safety of the Ring. One hundred participants are currently active on the vaginal ring study. All 119 originally enrolled participants were followed-up on a monthly basis to conduct trial visits. The first trial completion visits are expected at the end of April 2016.

The Data and Safety Monitoring Board holds regular meetings pertaining to the trial and it was recommended in November 2015 that IPM 027 proceeds to a final analysis based on the data reviewed, as the trial was unlikely to reveal any new information. Research centre staff members, participants, community stakeholders and partners were all informed of the results during the week of 22 February 2016. Following the MCC approval for Amendment 5.0 on 02 February 2016, IPM proceeded to roll-over all ongoing participants onto the active ring during the first week of March 2016, thus allowing uninterrupted use of Dapivirine Ring-004. Throughout the trail participants were engaged in events to encourage adherence and understanding of the purposes of the IPM 027 trial. Participant's partners and community representatives were likewise engaged to create friendly and participatory cooperation. In retrospect, it has been found that the community participation in the research trial has created more collaboration and bonhomie than ever expected.

At the CROI HIV/AIDS conference in Boston USA at the end of February 2016, Dr Annalene Nel of The International Partnership of Microbicides (IPM) got a standing ovation for her presentation showing evidence that the use of the Ring contributes substantially to the reduction of transmission of HIV and she thanked all eight research sites, amongst which, Ndlovu Care Group, for their outstanding performance in conducting this study.

Ndlovu owes its reputation for excellently designed programs to a tried and tested system of in-depth research backed-up with accurate evaluation

Ndlovu Support Services

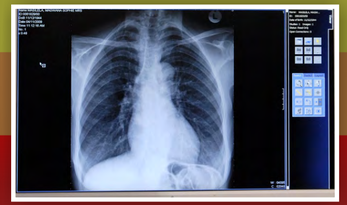
IT Department

The two sites Bhubezi and Ndlovu now use TIER.Net (Electronic management system of the DoH for HIV services). Once the facility has been signed-off, the TIER.net report will be activated on the Districts Health Information System (DHIS), and will be integrated to the monthly reporting tools. Reports will be submitted through the right channels from sub-District to Province. The Right to Care and Department of Health's Monitoring & Evaluation teams will continue to conduct regular data verification exercises, which will include chart audits, correct use of registers and monthly input sheet reports.

Full implementation of the Health Source (tHS) has been achieved for Ndlovu and Bhubezi Community Health Centres, with all clinicians utilizing the system.

The Ndlovu IT Department made major changes to the IT infrastructure during this reporting period by merging the Head Office and the Ndlovu Medical Centre domains. This was essential as it will allow all web applications to be hosted in Head Office, providing a central backup location. The system will allow for enterprise grade encryption to happen between the two sites. Additional features include a new DFS system (Distributed File System) and exchange DAG (Database Availability Group).

The Ndlovu IT Department and Telkom are also in the process of installing new fibre telephone lines; however the installation has not yet been finalized.



Ndlovu Support Services

Marketing Department

The Ndlovu Marketing Department continues to use viral marketing as the most important means to generate interest in Ndlovu's activities. The support gained through the use of Facebook, the Ndlovu web site, Newsletters and Newsflashes has been notable. Ndlovu's fan base is steadily increasing with a significant increase of interest from the community of Moutse and is also gaining interest from the target community of the Bhubezi site. There is also a remarkable internal increase in interest from Ndlovu employees in other programs and projects, with resulting cross activity and support.

Ndlovu's most important Public Relations asset remains Dr Hugo Tempelman. The Ndlovu fan base is especially interested in his activities and he is regularly invited to an array of events abroad, which in turn generates more interest, all essential for the funding of the various Ndlovu Programs and projects. The reporting period has seen opportunities for Dr Tempelman to tell the Ndlovu Care Group story to the media while visiting Ndlovu on site. Recordings of this nature results in enormous exposure for Ndlovu. The interest in Ndlovu has grown exponentially in the reporting period, with supporters clamouring for information about Ndlovu activities.

M&E Department & Lab Services

2015 - 2016

"It's a great charity and lovely staff as well"

Issy Chapman
May 12, 2015

Ndlovu Monitoring and Evaluation Department

The Ndlovu M&E function has an excellent reputation and is integrated in every Ndlovu program to report on activities and findings for recordkeeping and evaluation. The M&E Department is an integral element of the Ndlovu research function. In fact, the Ndlovu Research Program has at its foundation the excellence of Ndlovu's M&E reporting of many years.
All Ndlovu's Programs are financially dependent on donors and funding, which in turn requires exact and comprehensive feedback, hence the continued support from major funders confident of the reputation of excellence of the Ndlovu M&E Department.

Laboratorium

The laboratory (Toga Labs) is a highly functional and integral supporting element. The laboratory supports the clinics and research facilities with comprehensive digital feedback, using advanced technology to deliver results in the shortest turnaround time possible in the remote regions that Ndlovu operates from.

Ndlovu's Human Resources

Ndlovu Care Group currently has 204 full-time employees on its payroll. Research Department is the fastest growing department with an increase of 220% from 7 employees in March 2015 to 15 in February 2016 – excluding IPM staff.
The bulk of Ndlovu's human resources works in clinical programs (NMC - 67 and Bhubezi – 48 employees), followed by Research Services (34 employees), with Head Office and shared services contributing to the balance.
As is the Ndlovu habit, around 95% of the work force is recruited from the community. Employees are trained to fit their specific niches, with resultant sustainability and loyalty. Years of investing in local capacity building has resulted in the relocation of skilled and professional resources to the catchment areas, which reinforces the Ndlovu policy to invest in local recruitment.
Ndlovu Care Group annually hosts Masters' Degree students, PhD students, interns, volunteers, exchange students and researchers, mainly from abroad, who use the opportunity to research and learn from the uniquely structured Ndlovu operations. The hosting of students from various disciplines has become such a regular institution that a student's house was procured in Groblersdal to provide students with sound and managed accommodation. Ndlovu Care Group has an undeniable professional reputation as a unique source of research and learning excellence amongst Universities abroad and locally. Local university students are regularly hosted for speciality events to learn and experience from the different Ndlovu disciplines as managed in a rural setting.

the Ndlovu Workplace Wellness Program

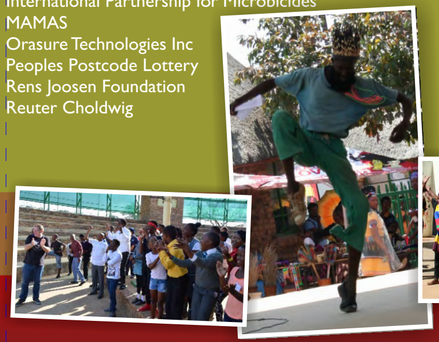
Ndlovu Workplace Wellness (WoW) is a holistic workplace program that encompasses a comprehensive approach to employee wellness. Established in 2008, WoW has serviced a variety of sectors ranging from corporate clients with an excess of over 10 000 employees to small sized organisations. WoW is unique, outcome based and employs innovative ideas able to deliver customised services that meets individual client needs.

Our priority is to assist employers and employees to cope with the high demands of modern day life, enabling them to achieve a proper work-life balance. WOW stands for quality, hence the broad range team of qualified healthcare workers who are able to respond to psycho-social, EAP services, occupational health and other physical needs of employees. We strive to assist employees in making healthy decisions that gains optimum performance, while ensuring employers play a supportive role in employee health and wellbeing.

Our success is based on our ability to implement services which can be offered telephonically, one-on-one on site and by gaining access to remote areas using mobile units. WoW's steady growth lies in building strong marketing & communication strategies, the use of a confidential web based reporting system and the ability to offer programs in prevention, screening and chronic disease management, including HIV/AIDS which result in early-care seeking behaviour and early-intervention. Addressing the effects of chronic disease during each phase of illness has had a positive impact on morbidity, mortality and prevents acute onset of illness.

in alphabetical order:

Aids Fonds/Stop AIDS Now
AMTRONIX
Anglo American Chairman's Fund
Anglo Thermal Coal
Anoa Capital SA
Bushbuckridge Health and Wellness Trust
Clipper Ventures
Cruyff Foundation
SA Department of Health
Diep in die Berg
Hugo Tempelman Stiftung Germany
Hugo Tempelman Stiftung Switzerland
International Partnership for Microbicides
MAMAS
Orasure Technologies Inc
Peoples Postcode Lottery
Rens Joosen Foundation
Reuter Choldwig
Right To Care
Rotary Club Oosterhout
Sapinda Rainbow Foundation
Stichting Sonnevanck
Stichting Health
TJOMMIE
University of JHB
UNISA
UMC Utrecht
University of Utrecht
Virgin United
Welfit Oddy
WITS
Worldpay AP LTD
Zorg Voor Elandsdoorn
A.M.M. Wismanmeester
...and many more....



on behalf of every beneficiary

Thank You

you have made many people very happy

29
2015-2016

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Ndlovu's CFO Reports

Chief Financial Officer's report

Ndlovu Care Group manages all finances related to its non-profit operations through the Ndlovu Medical Trust. Having received an unqualified audit opinion from KPMG, our independent auditors, Ndlovu Medical Trust continues to focus on internal control and financial management. We pride ourselves on our systems of internal control, which ensures responsible and accurate financial reporting. Our internal controls are essential for preparation of financial statements that are free from material misstatement and for maintaining adequate accounting records and an effective system of risk management.

Financial Performance

The 2016 financial year was an exciting one with significant change in the Revenue structure of the Trust. Total Revenue for the Trust increased by 16% but the composition of the Total Revenue differed significantly from the previous year. Revenue from Donations decreased by 13% while Revenue from rendering of services increased by 240%. This change is in line with our strategy to become less donor-dependent in order ensure long term sustainability. The increase in Revenue from rendering of services can largely be attributed to research contracts for which the Trust earns Income.

Although donor income has decreased, NCG is aiming to broaden its funding base in order to minimize risk of single donors withdrawing their support. Donations are therefore made up of more donations of smaller monetary values. The Ndlovu Medical Trust generated a surplus of R341 186 for the financial year, which is added to the Operational Reserve in terms of the Operational Reserve Policy.

Ndlovu's CFO Reports

2015 - 2016

Financial Position

Ndlovu Medical Trust had a retained surplus of R8 938 488 as at 28 February 2016 which is part of the Operational Reserve. This Reserve is funded with surplus unrestricted operating funds, special grants, or income generated from the delivery of services to corporate companies. The total assets of Ndlovu Medical Trust amounted to R21 065 630 while total liabilities were R12 127 142.

Risk Management

The board ensures that a thorough risk assessment, using a generally recognised methodology, is performed at least annually and used continually. Emerging risks are incorporated and assessed as soon as they are identified. The management is accountable to the Board for designing, implementing and monitoring the process of risk management and integrating it into the day-to-day activities of the Group. The management is also accountable to the board for providing assurance that it has done so.
The CEO and CFO are at the forefront of the adoption or upgrading of the risk management plan, but involving the management at all levels within the operations will enhance risk management.
The risk management process does not reside in any one individual or function but requires an inclusive, team-based approach for effective application across the group. It is therefore critical that risk management functions should be established with appropriate reporting lines.

Sustainability and going concern

The Trustees have a reasonable expectation that Ndlovu Medical Trust has adequate resources to continue in operational existence for the foreseeable future. Accordingly, the Trust continues to adopt the going concern basis in preparing the annual report and accounts. In determining whether the Trust will be a going concern, the Trustees take into account various factors. The most significant factor is the continued support of donors with whom we have long-term funding contracts. Another factor is the ability of the Group to generate its own funds in order to finance operations aligned with its strategies and objectives.

Financial Report

Below is a summary of key financial information from the Annual Financial Statements for the year ended 29 February 2016.

The Ndlovu Medical Trust		
Statement of Financial Position as at 29 February 2016		
Figures in ZAR	**2016**	**2015**
Assets		
Non-Current Assets		
Investment Property	1 150 000	-
Investment in subsidiaries	367 133	367 133
	1 517 133	**367 133**
Current Assets		
Loans to related parties	644 232	176 475
Other financial assets		710 991
Trade and other receivables	6 224 141	4 264 861
Cash and cash equivalents	12 680 124	14 671 520
	19 548 497	**19 823 847**
Total Assets	**21 065 630**	**20 190 980**
Equity and liabilities		
Equity		
Retained surplus	8 938 488	8 597 302
Liabilities		
Current liabilities		
Loans from related parties	623 585	635 063
Trade and other payables	3 709 018	5 056 551
Deferred income	7 794 539	5 902 064
Total liabilities	**12 127 142**	**11 593 678**
Total equity and liabilities	**21 065 630**	**20 190 980**

Ndlovu's strong emphasis on operational research have secured documented evidence of accountability which has in turn secured project funding from a wide selection of funders in the past

Financial Report

The Ndlovu Medical Trust		
Statement of Comprehensive Income for the year ended 29 February 2016		
Figures in ZAR	**2016**	**2015**
Donation income	38 040 750	43 763 813
Rendering of services	19 081 117	5 606 741
Other income	362 528	411 861
Operating expenses	-57 297 001	-49 834 223
Operating surplus	**187 394**	**-51 808**
Investment revenue	153 792	371 154
Surplus for the year	**341 186**	**319 346**
Other comprehensive income	-	-
Total Surplus for the year	**341 186**	**319 346**

Accounting Policies

1. Purpose of financial statements and basis of preparation

Purpose of financial statements

These financial statements are prepared to meet the requirements of the Trust Deed.

Basis of preparation

The financial statements are prepared in accordance with the basis of accounting set out below. The Trustees consider this basis suitable to meet the financial provisions of the Trust Deed.

1.1 Investment property

Investment property is land and buildings held to earn rentals or for capital appreciation or both, rather than for use in the production or supply of goods or services or for administrative purposes; or for sale in the ordinary course of business. In addition, only investment property whose fair value can be measured reliably without undue cost or effort on an ongoing basis is included in investment property. All other investment property is included in property, plant and equipment.

Investment property is initially recognised at cost.

Costs include costs incurred initially to acquire or construct an investment property and costs incurred subsequently to add to, replace part of, or service it. If a replacement cost is recognised in the carrying amount of an item of investment property, the carrying amount of the replaced item is derecognised.

Good governance ultimately protects Ndlovu's reputation & manages risks that might preclude it from achieving its goals...

Financial Report

2015 - 2016

1.2 Investments in subsidiaries
Investments in subsidiaries are carried at cost less any accumulated impairment.

1.3 Financial instruments
Financial instruments at amortised cost.
Financial instruments may be designated to be measured at amortised cost less any impairment using the effective interest method. These include trade and other receivables, loans and trade and other payables. At the end of each reporting period date, the carrying amounts of assets held in this category are reviewed to determine whether there is any objective evidence of impairment. If so, an impairment loss is recognised.

1.4 Interest received
Interest is recognised, in profit or loss, using the effective interest rate method.

1.5 Impairment of assets
The company assesses at each reporting date whether there is any indication that an asset may be impaired. If there is any indication that an asset may be impaired, the recoverable amount is estimated for the individual asset. If it is not possible to estimate the recoverable amount of the individual asset, the recoverable amount of the cash-generating unit to which the asset belongs is determined.
If an impairment loss subsequently reverses, the carrying amount of the asset (or group of related assets) is increased to the revised estimate of its recoverable amount, but not in excess of the amount that would have been determined had no impairment loss been recognised for the asset (or group of assets) in prior years. A reversal of impairment is recognised immediately in profit or loss.

1.6 Revenue

1.6.1 Donations received
Donation income is recognised as deferred income on the statement of financial position when received.
Donations and Grants are accounted for when the funds are deposited in the Trust's bank account.
Donations restricted for specific purposes are recognised as deferred income on the statement of financial position when the cash has been received from the donors.
Income from restricted donations is only recognised in the statement of comprehensive income to the extent that expenditure is incurred.
Unrestricted donations are recognised as income in the statement of comprehensive income when the cash has been received from the donors.

1.6.2 Rendering of Services
Revenue from rendering services is recognised in surplus or deficit in proportion to the stage of completion of the transaction at the reporting date.

1.7 Expenses

All expenditure incurred for the project is recognised in the statement of comprehensive income in the period in which it is incurred.

Stakeholders' interests are safeguarded at all times with responsible comprehensive & transparent reporting

on behalf of every beneficiary & all of us...

Thank You

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in alphabetical order:

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Diep in die Berg
Hugo Tempelman Stiftung Germany
Hugo Tempelman Stiftung Switzerland
International Partnership for Microbicides
MAMAS
Orasure Technologies Inc
Peoples Postcode Lottery
Rens Joosen Foundation
Reuter Choldwig
Right To Care
Rotary Club Oosterhout
Sapinda Rainbow Foundation
Stichting Sonnevanck
Stichting Health
TJOMMIE
University of JHB
UNISA
UMC Utrecht
University of Utrecht
Virgin United
Welfit Oddy
WITS
Worldpay AP LTD
Zorg Voor Elandsdoorn
A.M.M. Wismanmeester
...and many more....








Head Office:
Physical Address:
22 Witstinkhout Street, Groblersdal, Limpopo, SA
Co-ordinates:
S 25° 10" 11.14" E 29° 23"3.62"
Postal Address:
P O Box 1508, Groblersdal, 0470, SA
Tel: +27 13 262 9000
Fax: +27 13 262 3498

Pretoria Office (Workplace Wellness):
Physical Address:
1250 Pretorius Street, Pro Equity Court, Pretoria, SA
Tel: +27 12 430 2094

e-mails: info@ndlovu.com
www.ndlovucaregroup.com
www.workplacewellnessncg.co.za

Elandsdoorn Clinic:
Physical Address:
Dennilton, Limpopo, SA
Co-ordinates:
25°17"3.90"S, 29°11"37.30"E
Postal Address:
P O Box 14, Groblersdal, 0485, SA
Tel: +27 13 980 0329
Fax: +27 13 980 0016

Bhubezi Clinic:
Physical Address:
Lilydale, Mpumulanga, SA
Co-ordinates:
S 24° 52" 48,2"" E 31° 22" 52,9""
Postal Address:
P O Box 877, Hazyview, 1242, SA
Tel: +27 82 891 2089

Contact Details