

DONATION

Gift of the Givers to aid Groote Schuur Hospital

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DR IMTIAZ Sooliman, founder of Gift of the Givers, said his organisation will be assisting Groote Schuur with catch-up surgeries this year. | FILE

GIFT of the Givers has committed to helping one of the Western Cape's largest hospital perform as many as 1 500 catch-up surgeries in a bid to alleviate the province's growing surgical backlog.

And while health authorities in the province won't divulge surgical backlog figures, sources have revealed to the *Weekend Argus* that the waiting list is between hundreds to thousands of patients in some of the province's busiest hospitals. South African person of the year and founder of Gift of the Givers, Dr Imtiaz Sooliman, said the organisation would be helping Groote Schuur Hospital perform 1 500 catch-up surgeries. Sooliman also called on the government to step up and assist with the backlog in other parts of the country.

"We call on Finance Minister Enoch Godongwana to urgently support the National Health Ministry (and) Minister Dr Joe Phaahla, with the resources to correct everything that has gone wrong in the years prior to his appointment," he said.

"The R150 billion surplus tax revenue collected can be well utilised to make an enormous difference to the health of our nation.

"In addition, we request private health facilities to intervene and assist with the backlog in medical procedures in public health, pro bono. (We urge them) to extend a compassionate heart to poor people who have no economic means.

"We would appreciate the participation of corporates, international benefactors and foreign governments to assist with additional support as a stop-gap measure to rapidly correct our health challenges to prevent any further suffering to the masses in our country who have no form of health insurance."

Sources at Mitchells Plain and Tygerberg hospitals said the number of surgeries put on ice since the pandemic hit, are estimated to be in the hundreds. Also, adding pressure was a large number medical staff infected with Covid-19 who had to isolate or quarantine. Since Monday, 1 335 government healthcare workers were in isolation, of which 995 were clinical staff and 340 non-patient facing staff.

These hospitals have since confirmed that they have started to plan around maintaining normal theatre activity and capacity this year.

Provincial head of health, Dr Keith Cloete, said the staff shortage had a significant impact, in general health services, as well as surgeries.

"This time of the year we usually see a de-escalation in services, especially for people with booked surgeries, because it's always been a time where healthcare workers go on leave and there is normally a downscale of activities and you maintain your essential services. So, all those services we normally keep open were affected because of the first, second and third wave. Each time we had a peak, we had to decrease services, which included surgeries."

Cloete added that the surgery backlog was caused by a build up of the past three waves.

"What we see in the fourth wave is a cumulative backlog. At Tygerberg Hospital for this week, there is a significant cumulative (backlog)."

Cloete gave some assurance that talks were on the way to escalate the capacity for surgical procedures in the coming weeks.

"Now is a good time, with staff coming back,

that we open the theatres and over the next week or two escalate surgical capacity. We will try to maintain the surgical capacity and not decrease it, as we cannot afford another wave reducing surgical capacity."

An administrative clerk at the Mitchells Plain District Hospital, who spoke on the basis of anonymity, said staff were under extreme pressure; they had to step in to assist the nursing staff.

"We had to work smart, make space for Covid-isolation patients, see to emergency cases and also your general illnesses," she said.

"As a clerk in the ward, you would find yourself doing nursing duties. Cleaning wounds and stitching patients with training as you do it. It not only puts pressure on you physically, but mentally as well."

The clerk said mental bookings weren't always a definite as those patients were put back on the list if an emergency case came in.

"So say you booked for 12pm. Now you are waiting in the ward, but suddenly an emergency case comes in and they get priority. You, who were waiting, now goes on a waiting list or your surgery is cancelled," he said.

The worker added that staff's morale also affected. "Families of patients do not understand their loved one was placed in isolation before a major surgery, or while waiting for space. We, as workers, can only explain to a certain extent, keep to protocol and can't go into detail. That is also why many healthcare workers stay absent."

Another worker at Tygerberg agreed and said that the plan to return to normal would help but staff should be briefed thoroughly.

"It's scary having to fall into place the whole time without knowing exactly what to do, so I hope that they planned this properly."

The backlog has not only impacted surgeries in state hospitals but also took a toll on providing smiles for little patients.

Kim Robertson Smith, the general manager of the Smile Foundation, which focuses on transforming children's facial abnormalities and burns through surgery, said they were also affected by a de-escalation in health services.

"Smile foundation was able to facilitate 170 backlog of surgery over the last five months, 70 of these were in the Western Cape. But to date there is still a substantial amount of backlog which we need help with," she said.

Spokesperson for Tygerberg Hospital Laticia Pienaar said their immediate priority was to maintain normal theatre activity before planning and implementing any "catch-up" surgical plans. "We had to de-escalate our normal theatre services during the peak of the first, second and third wave for extended periods when we were only able to do emergency, or time-sensitive urgent procedures," she said. "Overall, our elective waiting lists became longer as a result. All surgical waiting lists have been impacted during this period. The Covid-19 hospital admissions during the fourth wave peak weren't that impactful and we could continue with normal theatre activity, except for the end of year de-escalation period of two weeks. We then re-escalated our theatre service on January 3."

Spokesperson for Groote Schuur Hospital, Alaric Jacobs said they also had to scale down on surgeries to ensure that there was sufficient capacity to deal with Covid-19 admissions, but added that emergency surgeries continued.



PROVINCIAL state hospitals will be escalating surgical procedures to tackle backlogs. | SUPPLIED