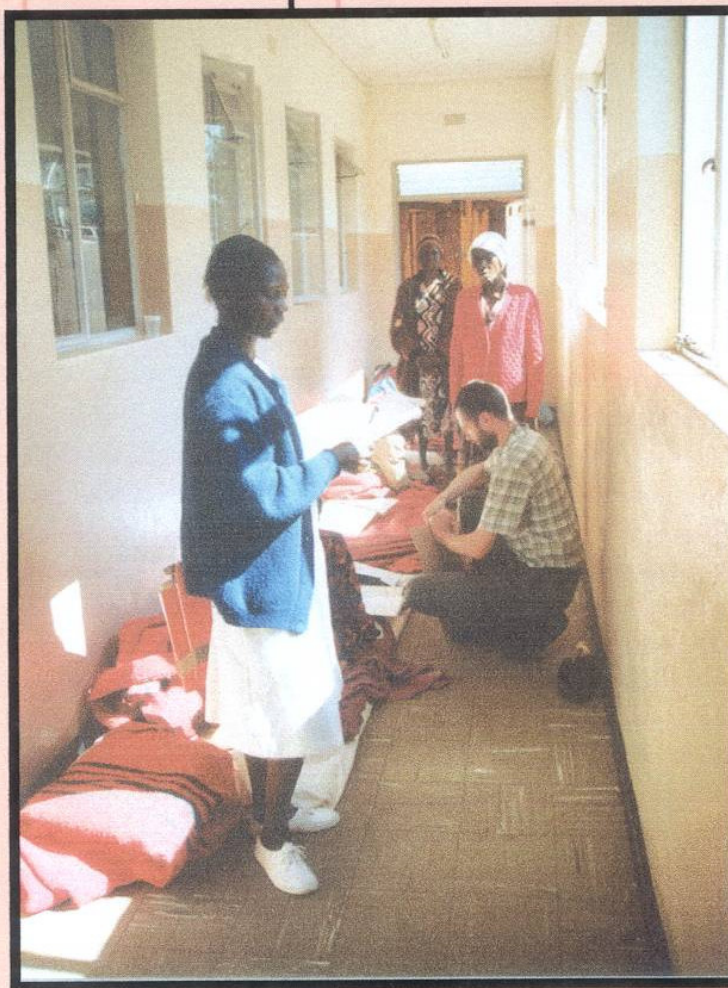


# **FRIENDS OF MURAMBINDA HOSPITAL**

## **ANNUAL REPORT 2002/2003**



This is a corridor in Murambinda hospital it is in use as a ward due to heavy demand.





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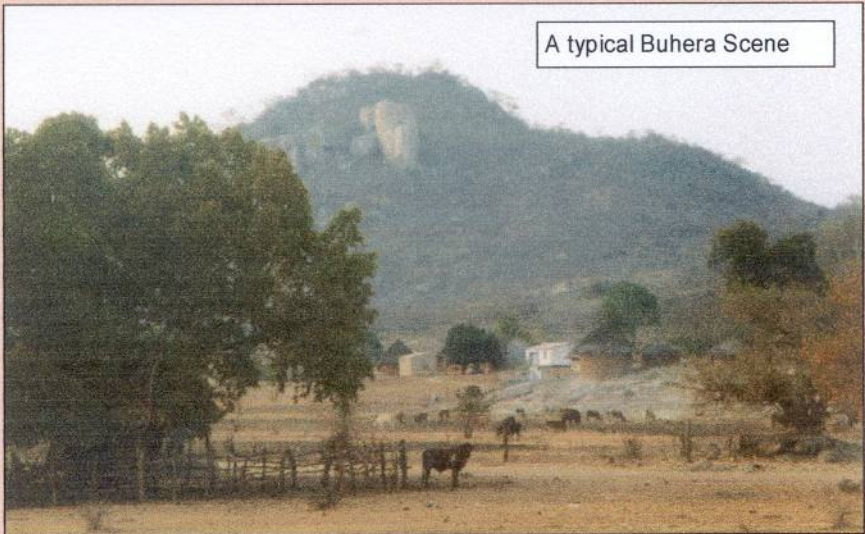


Murambinda Hospital is in the Buhera region of Zimbabwe. It is a poor area of semi arid land mostly inhabited by subsistence farmers.



**What is Buhera like ? Here is an extract from a letter from Dr. Monica Glen-shaw District Medical Officer Murambinda Hospital**

The landscape is what we would call hilly savannah and thorn bush. Scattered throughout this landscape are small farms consisting of two or three fields where the farmer, often a woman, grows maize, or in the drier southern part of the district sorghum, together with beans, sweet potatoes, and pumpkins. Usually there is a small vegetable garden where tomatoes and sweet cabbage and onions are grown. All this depends on the rain fall which is very unreliable.



Buhera is a dry low lying area, with relatively poor soil. Life in general is a struggle, and many of the men go to work in the larger towns of Zimbabwe. The main source of cash for the majority of the people in Buhera is money brought in by persons working in the towns.

Buhera is the second poorest district in Zimbabwe. The area is totally made up of what is called communal land i.e. there is no title to land. The chief grants land to members of his tribe. The people of Buhera are a hardy lot, they put up a stiff fight during the war of liberation, and in good years they harvest enough to feed themselves and are independent. This year the rains were initially poor and when they did come in good amount Feb./ March it was too late for much of the maize crop and there was no seed to plant late, thus times of food shortage continues, aggravated by the fact that food to buy commercially is in short supply, and if available at a price the local Buheran person cannot afford.

Literacy rates are just below the national average of 40-50%, but this will fall, as cash for building fees, a fee charged to the parents for school development, but in fact a school fee, becomes scarcer and scarcer. The number of Orphan headed or granny headed families grows with the AIDS epidemic. The HIV+ rate here is 30%, the infant mortality also just higher than the national average of 65/1000, life expectancy, about 47 years as for the rest of the country.



## **Introduction from Dr. Mike Thompson Chairman of FMH**

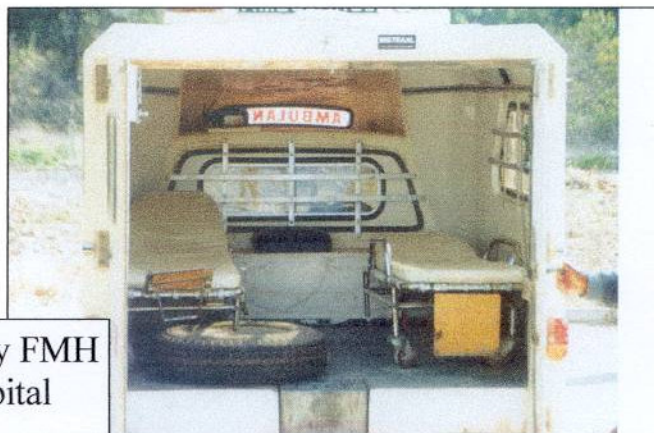
What a difficult year it has been for Murambinda Hospital, Buhera, and Zimbabwe as a whole. Rarely have drought; the threat of famine, unprecedented economic problems, the ongoing HIV/AIDS pandemic, lawlessness and political instability coincided with such effect. Keeping the hospital running has been a Herculean task. Our respect for the staff of the hospital, both paid and voluntary, has grown further and in particular for the Matron Sr. Barbara Armstrong and the senior doctor Monica Glenshaw.

Amidst the stormy waters there has been some great progress and real signs of hope for the future of Murambinda Hospital and health care for the people of Buhera. It has been a successful year for our charity.

We aim to provide long-term support in partnership with those working at the hospital. This is in contrast with short-term crisis intervention provided by other organisations. We listen to those working in the hospital and respond to the needs they identify. At times they may seem unglamorous demands such as salary support for administrative staff, but having stability in such posts can make the difference between chaos and a hospital that runs successfully through good times and bad.

Contact FMH by emailing  
[fmh@fish.co.uk](mailto:fmh@fish.co.uk)  
Or visit our web site  
[www.fmh.org.uk](http://www.fmh.org.uk)

This ambulance was provided by FMH  
for the use of Murambinda Hospital



## **Self Reliance**

### **Pharmacy manufacturing**

Economic difficulties have made imported medicines scarce and very expensive. FMH donated £1000 towards the cost of raw materials to allow manufacturing of certain medicines at the hospital. These include treatments for burns, stomach problems and painkillers.

### **Nurse Training School to reopen**

Since 1996 the nurse training school has been closed because it has been unable to attract a tutor. FMH have paid the costs for one of the hospital's senior nurses Sr Mudzingwa to obtain the necessary degree to allow her to become a nurse tutor. From June 2003 the training school will reopen offering a 2-year basic training to 12 Village Health Workers per year. Not only does this increase educational opportunities but it should also help the hospital's staffing problems.

### **New post of Donor Secretary**

As the Zimbabwe government's funding of the hospital declines after allowing for hyperinflation the hospital is increasingly dependent on non-governmental funding for survival. Applying for funds from such bodies and providing the necessary monitoring information, if successful, is very time consuming. FMH has agreed to fund a new post of donor secretary to undertake this role.

For publicity materials email [malcolm@mtodd95.freeseve.co.uk](mailto:malcolm@mtodd95.freeseve.co.uk)





Community carers visit severely ill people in their homes

## **New Zimbabwean Doctors**

It has been a long-term aim of both the hospital and FMH to attract Zimbabwean Doctors to work at Murambinda. At last that goal has been achieved with the appointment of Drs Thabani Mupudzi and Felix Kwenda in October 2002. This has been possible in part due to the partnership of the hospital with the ISPED (Institut de Sante Publique, Epidemiologie at Development) of the University of Bordeaux in implementing the Prevention of Mother to Child Transmission (PMTCT) programme. This involves encouraging HIV testing of mothers to be, and providing anti-retroviral drugs to those found to be positive. The two doctors have been appointed on two-year contracts. FMH has funded a grant as part of a package provided by the hospital to attract and retain doctors. Doctors will be paid a bonus of £800 after 1 year's service, £ 1600 after 2 years, then £1200 per year for up to 5 years service then £1800 per year after 10 years service.



## Staff Support

Inflation is estimated to be running at approximately 150%. Staff salaries were increased in January by 80%. One can only imagine the difficulty in keeping a household afloat, paying the compulsory school fees, paying bus fares, buying soap, cooking oil etc.

*“ When the hospital floors are swept, people do not bother to pick up \$1 coins as they are worth so little”*

### **Salary supplements**

The Zimbabwe government pays the salaries of most of the staff but at a lower rate than for non-mission hospitals. Hence there is an incentive for staff to leave to go to urban hospitals. For certain key posts FMH supplements salaries to help encourage staff to stay at Murambinda. Having stability of staff is a key factor in a successful hospital.

| <u>Posts wholly funded by FMH</u>                                                                         | <u>Current post holder</u>                                             |
|-----------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|
| Operating theatre nurse aide<br>General hand<br>Clerk                                                     | Mrs Cecilia Jengu<br>Mr Sekanwi Bera<br>Mr Forward Chikaka             |
| <b>Posts partly funded by FMH</b>                                                                         |                                                                        |
| Pharmacy technician<br>Anaesthetic nurse specialist<br>Pharmacy assistant<br>General Medical Officers     | Mr Mbizi<br>Mr David Murendo<br>Drs Thabani Mupudzi<br>Dr Felix Kwenda |
| District Medical Officer<br>Hospital Executive Officer (Until<br>December 2002 when Mr Nenza<br>resigned) | Dr Monica Glenshaw<br>Mr Nenza                                         |

In addition a small volunteer allowance is paid to 10 daily help nurse aide volunteers.





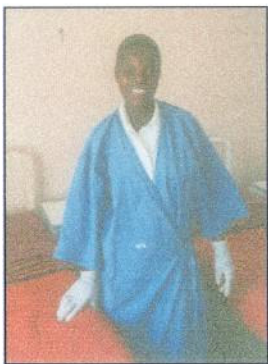
It is important to feel that we know as much as possible about what is happening in Murambinda. This letter is from one of our volunteer helpers at the hospital.

### My Social Background

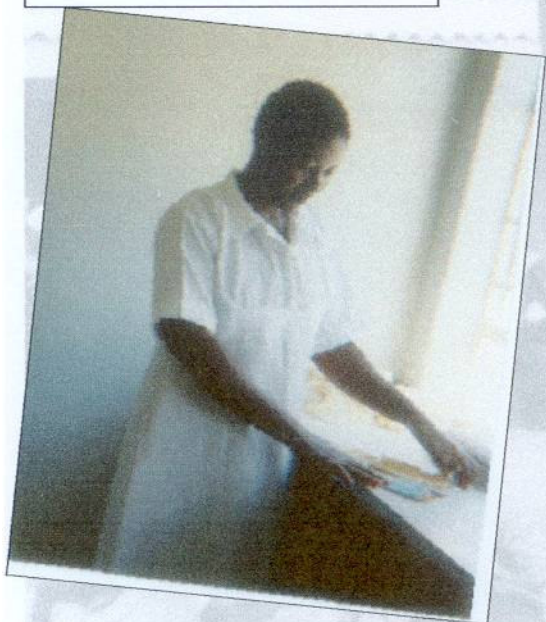
My name is Tariro. I live in Chaudza Village in Buhera District. I am twenty two years old. I am a female and still single. My parents are alive but my father is blind. I was born in a family of six, but one of my brothers died in 1996. I did Redcross training at Bika in September 2001. I did Advanced first aid at Maranki Mutcare Redcross centre January 2002. I did O' level in 1998 and failed. I want to re-sit for O' level examination but I cannot afford the examination fee because my parents are very poor. I intend to go for nurse training if I manage to meet the requirements.

Thank you  
TMadoro





And here are some more of the volunteers who work in the hospital



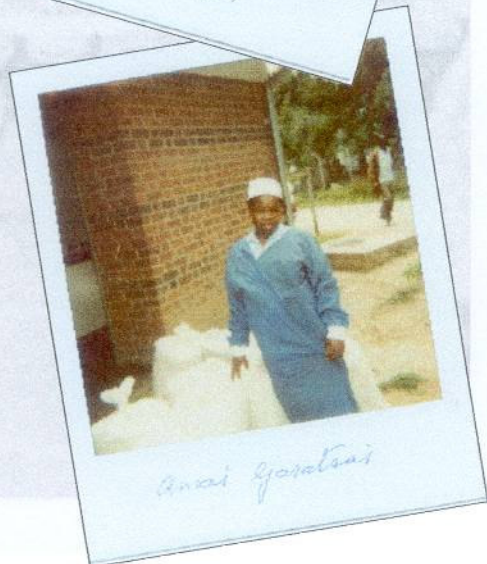
MURAMBINDA  
HOSPITAL  
HOSPITAL AMBULANCE  
AND BUSINESS ONLY  
OUTPATIENTS  
STAFF ACCOMMODATION  
MCH SCHOOL  
MIDWIFERY SCHOOL  
DANANAI  
DELIVERIES  
MOH & CH OFFICES



BEIRA



CECELIA



Anai Gonalas





Coffin making is a thriving business in Murambinda

### **Staff Appraisals**

As a part of our aim to support the staff who are wholly or partly funded by FMH staff appraisal was carried out by one of our trustees Dr Michael Thomson in March 2003. This process should allow us to support the career development of these individuals and has given us greater confidence that our donor's money is being well spent.

### **Staff Development Fund**

We contributed to a fund to help pay for staff education and training, to help career advancement and staff morale.

As an example of enthusiasm and commitment to high standards Mr D. Murendo, the nurse anaesthetist, has expressed his frustrations to me about not being able to maintain his standards by attending suitable courses.

## **Drought**

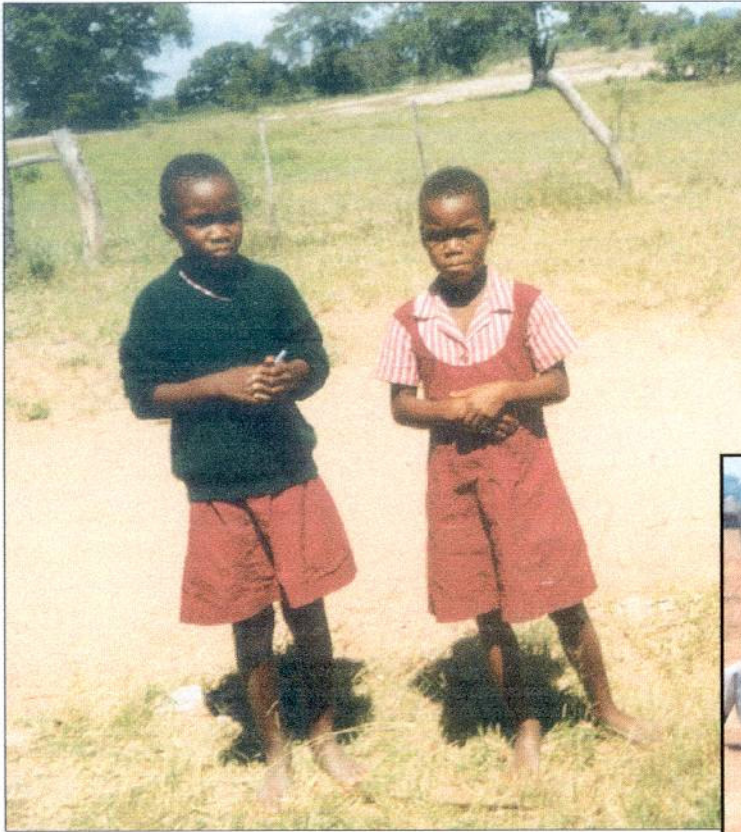
In a good year in Buhera 800mm of rain falls. In an average year 400mm falls. Last year the annual rainfall was 150mm. There are no commercial farms in Buhera so that land redistribution has not had any direct effect. Since most local people grow their own crops to eat last year most people would have gone hungry without food aid. FMH has not been directly involved in providing food aid as the scale of the problem is beyond our means, and because other organisations have stepped in. The Catholic church has been active in providing cooked meals at Murambinda to daily queues of people, UNICEF has been actively distributing food via the rural clinics and Medecin Sans Frontieres (MSF) have established a therapeutic feeding programme at the Waiting Mother's Shelter (Matumba) at Murambinda Hospital.

## **Economic Instability**

Inflation is estimated to be about 150%, and the Zimbabwe dollar is able to purchase less and less in real terms. The official exchange rate is pegged at approximately Z\$80 to £1, whilst banks are able to offer parallel exchange rates or around ten times that, whilst unofficial rates are many times higher again. We have calculated the money needed to fund projects at a rate close to parallel rates i.e. £1:Z\$900. We have not varied this rate over the year to reflect day-to-day fluctuations, as this would have been impractical. Our grants cannot reflect the depreciation of the Zimbabwean dollar until the time the money is spent. We feel that it is the best policy to allow the hospital to purchase some essential imported goods, such as medicine, with any surplus that accrues. Thus the hospital gains vital supplies which are only available in "hard currency". This year we made an emergency payment of £4000 towards pharmacy supplies to help meet an immediate financial crisis at the hospital. Fortunately since that time increased funding for pharmacy supplies has been obtained from the Prevention of Mother to Child Transmission programme. On a more down to earth note the hospital has noticed people having great difficulty raising money for bus fares so some are presenting far too late for treatment and more are defaulting from medical follow up.

*If you donate to FMH through gift aid we can reclaim tax on your donation at no cost to yourself you can download a gift aid form from [www.fmh.org.uk](http://www.fmh.org.uk) or write to our treasurer Dr. C. Rigby East Park Cottage, Hutton Lane, Guisborough 8AA*





## Orphan Education

We continue to fund the secondary school fees of 6 orphans via the Dananai Home Based Care Programme



## Organisation

### Communication

This year communication between the hospital and FMH has been particularly good. This is thanks to increased use of email and more direct contact. Dr Monica Glenshaw visited the UK in February during which she attended a meeting of FMH trustees and supporters. In February and March Dr Michael Thomson, one of our trustees, worked as a locum at Murambinda Hospital and was also able to assess the hospital's ongoing needs, inspect past projects and undertake appraisal of staff whose salaries are supported by FMH.

### New Trustee

We were delighted to welcome Mrs Mary Miller to join us as a trustee at our meeting on 16<sup>th</sup> November 2002. She has visited Murambinda Hospital frequently over the last few years whilst her daughter Dr Anna Miller was working there. She has extensive organisational skills, and has regional experience; one of her previous roles was as an election monitor in South Africa in 1991. Prior to her appointment the five trustees included four doctors and a teacher. Now we are six the balance between professions is improved



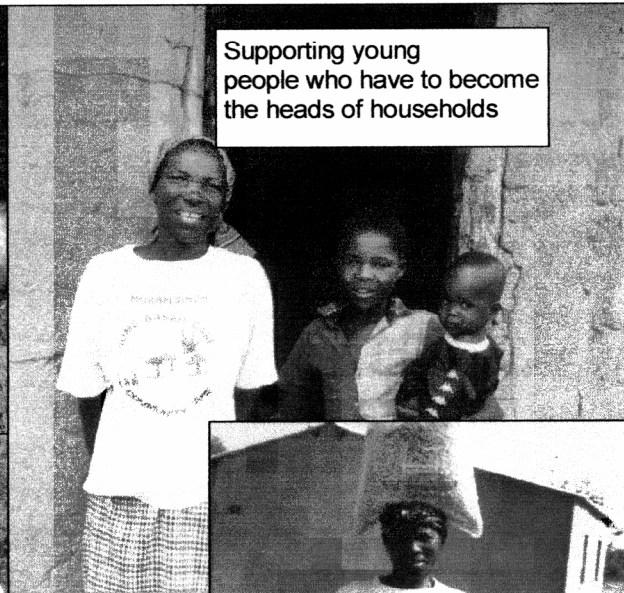
# Dananai

Dananai Home Based Care is the community outreach programme based at the hospital.

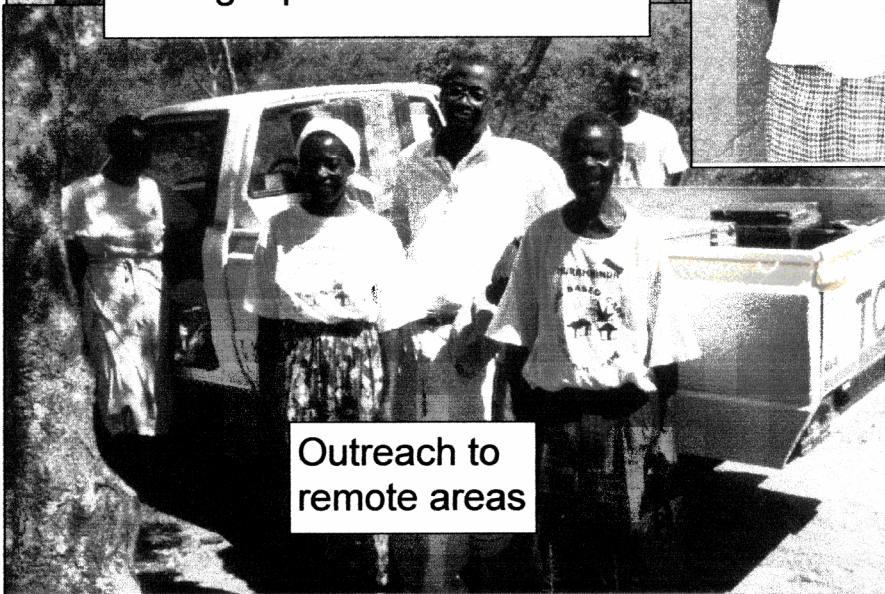
It provides care to the terminally ill and community support to people living with HIV/AIDS. Education is supported via schools, community groups and peer educator work.



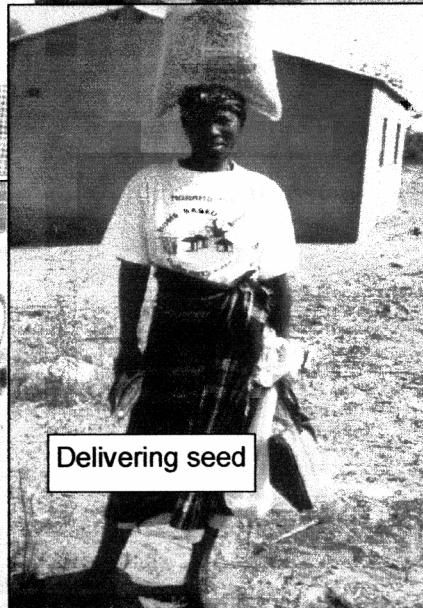
Visiting orphans in their homes



Supporting young people who have to become the heads of households



Outreach to remote areas



Delivering seed

DANANAI CENTRE, BOX 16, MURAMBINDA, ZIMBABWE,  
1.09.2002

ATTENTION: DR. C. RIGBY

DEAR CAROLYN

RE: ZS 190,565.78 LEFT OVER FROM EXCHANGE STERLING TO ZIMBABWE.  
DOLLARS

PURPOSE FOR WHICH FUNDS WERE USED: To replenish Home Care Kits for  
use in the homes.

USE OF FUNDS

We are very grateful for the finances to replenish the kits, we have been able to buy in a stock of materials with the money. We give an average of 60 kits to the volunteers per month which means they have a kit at any time if they need it for a sick person and we replace the used kit with a replenished one on our Home Care rounds. The kits are a tool for the community carers and have improved the quality of care in the community.

With Kind Regards from all in Dananai Aine

| BUD<br>GET | DESCRIPTION                                                   | INVOICE # | AMOUNT    | BALANCE            |
|------------|---------------------------------------------------------------|-----------|-----------|--------------------|
| 190,565.78 | NICETIME<br>Cotton wool & soda Bicarbonate                    | 4082      | 8145.00   | 182,420.78         |
|            | JUDINA SALES <u>Towels</u>                                    | 91        | 6720.00   | 175,700.78         |
|            | JUDINA SALES <u>Towels</u>                                    | 94        | 19500.00  | 156,200.78         |
|            | POWER SALES Buckets                                           | 246       | 11,497.50 | 144,703.28         |
|            | LILYS W/S Soap, Vaseline,                                     | 81128     | 27,070.00 | 117,633.28         |
|            | LILYS W/S Soap, Vaseline,<br>Soda Bicarb., <u>Cotton Wool</u> | 3482      | 85902.50  | 31,730.78          |
|            | JUDINA SALES<br>Face Towels                                   | 03        | 34,500    | Deficit<br>2769.22 |

94

DANIELA

**Bought of**

06-06-02

## Invoices are sent to FMH for scrutiny

[illegible]

000567

**Total**

TO: DAWANAI HOME BASED CARE  
FROM: POWER SALES

DATE SENT: 11.06.02

Bought of 25 20litre Buckets at \$459.90 each

Total \$11 497.50

With thanks. CHQ# 000570

**VER SALES**  
**4 CRAMBINDA**  
**BUMERA**

Tel 2305

THIS FORM TO BE RETURNED YES/NO

**I HAVE UNDERSTOOD THIS MEMO AND ACTIONED ANY INSTRUCTIONS GIVEN**

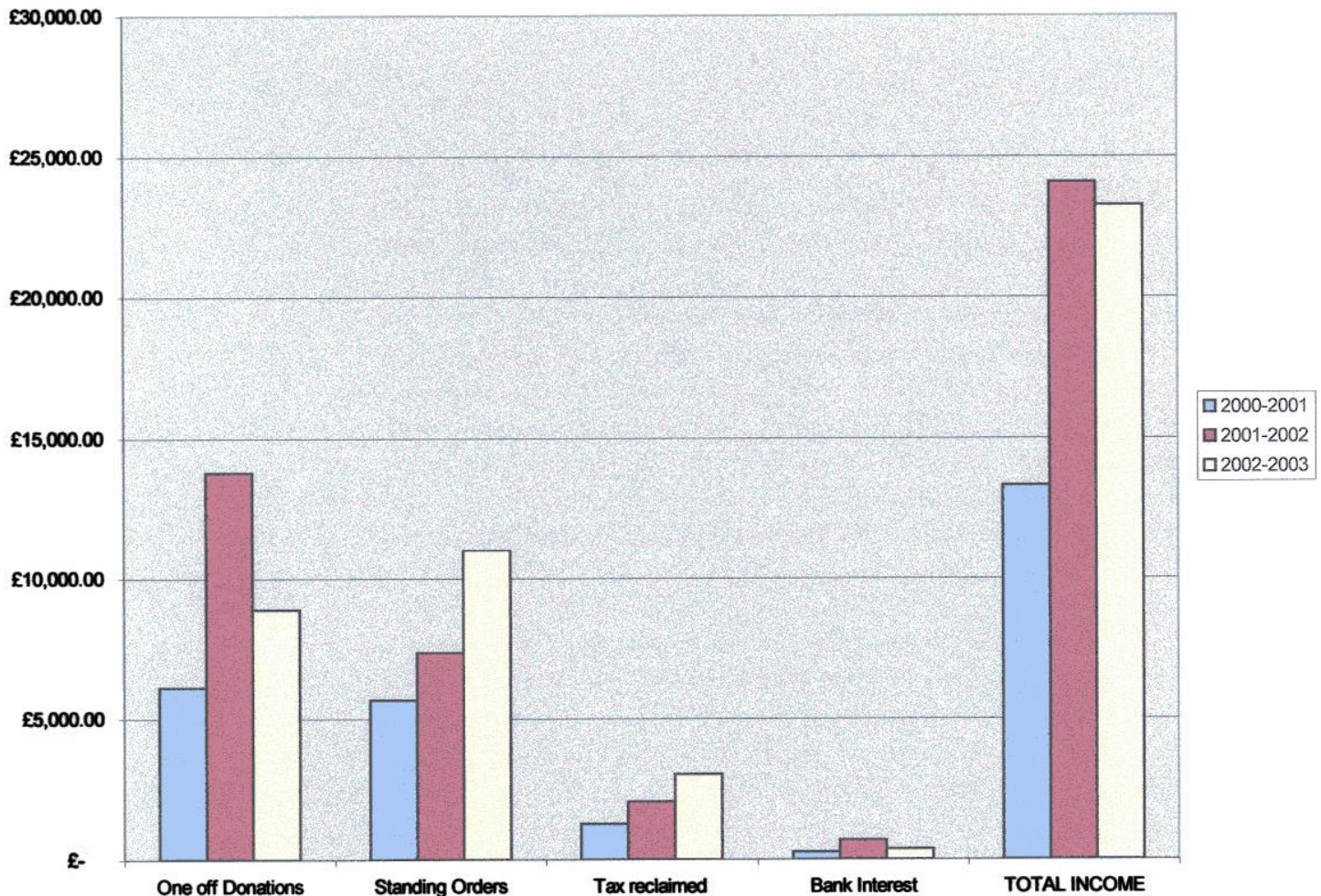
**SIGNATURE:**  
rml:ars - 89305

**DATE:**



# Fundraising

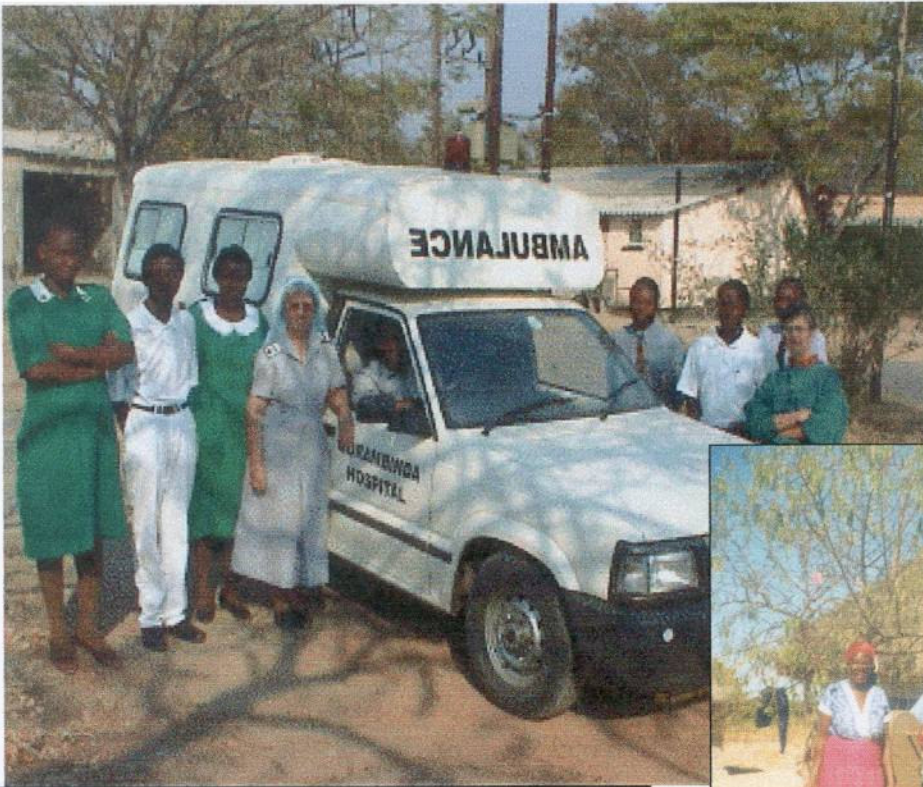
FMH INCOME 2000-2003



*Without our donors we could do nothing, we have no other source of funds. This year as in all previous years not a penny of donated money has been used in administration. All administrative costs have been borne by the trustees.*

*We particularly thank those donors who contribute regularly through standing orders. They allow us to plan ahead and commit to the longer-term projects such as staff salaries, which are vital to the hospital's future.*





**Can  
You  
Help ?**

*FMH provided Murambinda with an Ambulance and funded the building of this well*



**We are always on the look out for new ways to raise money.**

Many thanks to Bernadette and Stewart Reid who raised approximately £800 at a "Souper Day" where a soup lunch was offered alongside information and fundraising about FMH. As a result of this the Wetherby District Lions Club matched this with £800. This should help provide running water from the hospital borehole to staff houses.

**Why don't you hold a Souper Day?**

***We can provide you with an exhibition and publicity materials, you provide soup and people!***



And here is the report from Murambinda on the water project

# Murambinda Mission Hospital

## Progress Report

### Staff Water Supply Project

#### INTRODUCTION

On the 10<sup>th</sup> of April this year we applied for funds to finance our Staff water supply project, for full detail of the application, see attached copy. We hereby submit this report on its progress, coupled also with a supplementary version of "The project in pictures".

#### PROJECT ACHIEVEMENTS

The above-mentioned project, which was now breeding anxiety amongst Staff members and their families, was propelled to successful heights without impediments. Needless to say much, as denoted on the supplement attached, the project is now a finished work. It took Mr Mbau (The supplier of services) two and a half weeks to reach the stage of completion. From the word go, trenches were being dug, pipe laying- the place was hive of activity. In short, the project was initiated, implemented and capped off successfully, and from that juncture, water problems became a thing of the past. Without controversy, the project was conceived in style and smile across the staff residential complexes. "Long live FMH", one member of staff could not contain the joy. It was surely a historical set-up.

#### OUTLAY-(Expenditure)

The costs were as follows;

|               |                               |
|---------------|-------------------------------|
| [i] Materials | Z\$1,123,844.00               |
| [ii] Labour   | <u>Z\$ 600,000.00</u>         |
| *Total        | <u><b>Z\$1,723,844.00</b></u> |

*\*Please see attached invoices*

#### CONCLUSSION

On behalf of Dr Glenshaw, the Matron, Staff members and their families, I would like to thank FMH, particularly for solving the water problem at the hospital residential complexes which was now stinging. Hoping that this will ignite more developments at the hospital. We appreciate your stance. Thank you very much.



Fanisen Shuwa

[For Murambinda Mission Hospital]

# **Murambinda Mission Hospital**

## **Staff Water Project**

### **In Pictures**



---

**General view**



---

**Project gathers momentum**



---

**Stand Pipes ready for taps**

1



---

**Happy families with water splashing out**



## Mr Shuwa's Photograph

&

*Letter Of Appreciation*  
[Hospital Administrative Secretary]



In the midst of chaos and confusion that have crippled our once beloved country of origin- where decent ways of survival gradually becomes extinct and human values being compromised, I would like to appreciate the Friends Of Murambinda organization for employing me as an Administrative Secretary. If the transformation of reality into some eligible forms of communication were without impediments, then would it have marooned me to a richer and unobstructed island of hope. May God richly bless your organization for this episode, more also for your unwavering support at the hospital and the district at large. We say hats off to FMH. We salute you.



**Fanisen Shuwa**

## **Future Plans**

We will reduce the number of children suffering from dental pain by sponsoring a dental technician to get out of the hospital and into schools

We will support manufacturing of basic medicines on site at the hospital

We will continue to work in partnership with the management of Murambinda Hospital to help improve the health and well-being of the people of Buhera.

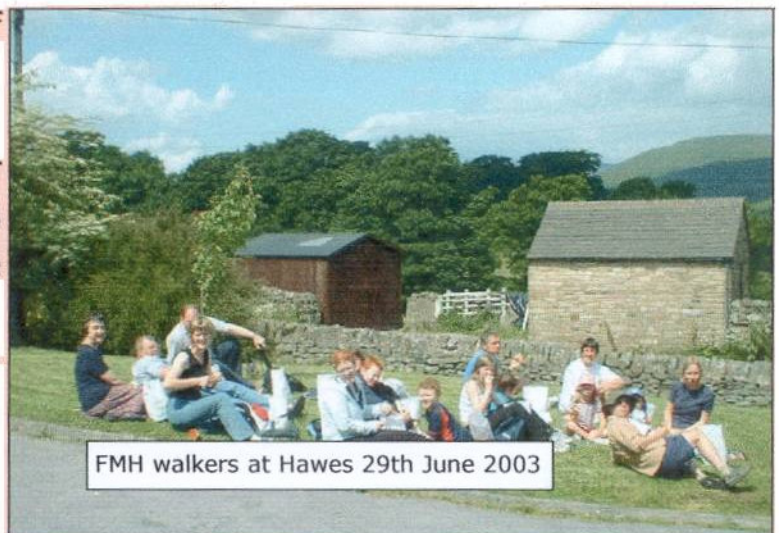
We will fund more water related projects at the hospital. Also we will initiate water projects at outlying clinics to benefit health workers and their patients in remote areas.

We will support development of staff skills, by funding education projects in the hospital and district to improve the hospital's self-reliance and improve the morale of our hard worked colleagues in Murambinda .

To increase the variety of methods used to fund raise. We have our first sponsored walk Hawes on 28/6/03!

To help support the formation of a Murambinda Mission Hospital Management Board to help safeguard the long term future of the hospital.

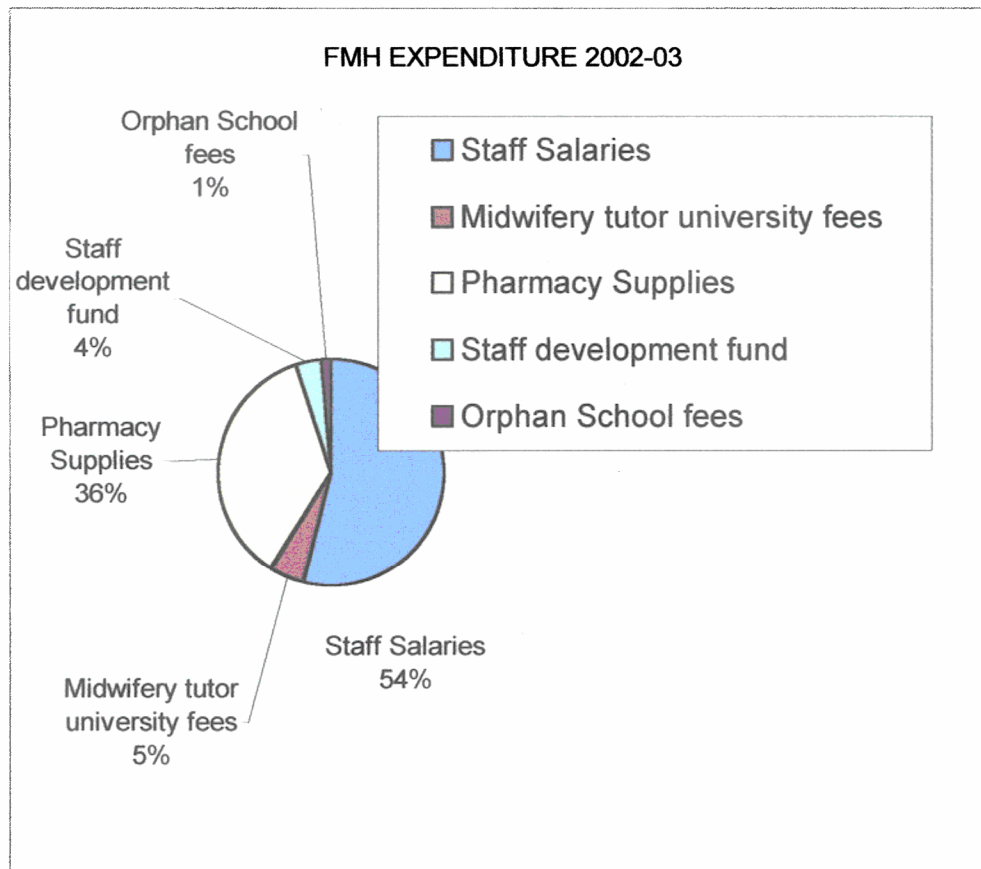
To improve links with other charitable bodies, especially TB Alert, in order that we allocate funds to areas of need not already covered by other organisations.



FMH walkers at Hawes 29th June 2003



# Financial



# Report





## FINANCIAL REPORT 6/4/02- 5/4/03

### INCOME

|                            |                   |
|----------------------------|-------------------|
| <i>Standing Orders</i>     | £10,999.0         |
| <i>Inland Revenue</i>      | £3,013.72         |
| <i>One – off Donations</i> | £8,887.75         |
| <i>Interest</i>            | £357.69           |
| <b><u>TOTAL</u></b>        | <b>£23,258.16</b> |

### DONORS

Iona Community  
John and Mary Miller  
Presbytery of Abernethy  
Queens Road Surgery  
Grantown-on Spey Women's Guild  
Abernethy Presbyterian Council  
Churches in Weardale  
Ruth Todd  
P. Marshall  
M. Bates  
E. & M. Thompson  
G.E.T. Thompson  
T. & T. Wooley  
Rotary Club (Northern Region)  
Ann & Phil Cudworth  
G. & M. Wells  
St Swithun's Parish, Southsea  
Anne Wordon  
M.J. O'Connor  
Mrs. C.E. McFarlane  
Mrs. E. Barratt  
Mrs. Rowe  
Neil MacGregor  
A. Rushton  
T. Shepherd  
M. Thomson  
Madeleine Thompson  
Dominic Thompson  
Tadcaster Medical Centre  
D.T. & M.F. Connolly  
J.V. Connolly  
Scotland-Zimbabwe group  
J. & A. Connolly  
S. & B. Reid  
Ivana Murphy  
Wetherby District Lions Club  
Derek and Helen Pope  
Peter Millar  
Ann Smith  
Celia & David Hetherington  
Dr.s R. & C. Rigby

Dr.s C & D Doran  
 Ms. Cynthia Takundwa  
 Robin Stott  
 K.&B. Saunders  
 Dr. P Hynes  
 Mr.&Mrs. J Slater  
 Mike Thompson & Kay Shepherd  
 Mr. W. Mitchell  
 Dr. R Gospel  
 Malcolm Todd & Helen Belger  
 Iain Yuill  
 David Stanley  
 Lorna Hudson  
 Sarah Miller  
 D. Stepien  
 Judith Harvey  
 W. & E. O'Neill  
 Clare Connolly  
 K. Howard

#### **EXPENDITURE**

|                        |                 |
|------------------------|-----------------|
| Midwifery tutor fees   | £700.00         |
| Pharmacy Supplies      | £4000.00        |
| Pharmacy Manufacturing | £1000.00        |
| Staff development fund | £500.00         |
| School fees            | £205.00         |
| Salaries               | <u>£7474.20</u> |

#### **TOTAL EXPENDITURE**

**£13,879.20**

#### **Salaries**

##### **Full salaries:**

Nurse Aid (Cecilia Jengu)  
 General Hand (Sekanwi Bera)

##### **Volunteer allowances:**

Pharmacy aid (Lindiwe Wagoneke)  
 Admin. clerk (Forward Chikaka)  
 10 daily help nurse aid volunteers

Pharmacy technician (Mr. Mbizi)  
 Hospital administrator (Mr. Nenza) *[terminated as of 30/12/02]*

Anaesthetic nurse on call uplift (Mr. Murendo)

Donor funds secretary (Mr. Shuwa)



## Salary Support

Dr. Kwenda      US\$300/month [to match payments made to other doctor from the University of Bordeaux]

n.b. we will plan to pay bonus payments to doctors if they stay at Murambinda on a sliding scale:

After 1 year: £800.00

After 2 years: £1600.00

3-5y: £1200/year

6-10y £1800/year

11y+ £2400/year

This amount will be negotiated annually between FMH and the doctor and will be honoured as long as FMH continues in its present form.

Bank balance as of 5/4/03 = £18,519.00

**Friends of Murambinda Hospital (FMH) is Registered Charity No 1073978**

**GOVERNING DOCUMENT**

Declaration of Trust 17 December 1998

**TRUSTEES** Dr. John Connolly (Recruitment Officer), Dr. Carolyn Rigby (Treasurer), Malcolm Todd (Publicity Officer), Mrs. Mary Miller, Dr. Michael Thomson and Dr. Michael Thompson (Chair).

Applicants wishing to become trustees to apply to the Chair for election by the trustees.

**CORRESPONDENT ADDRESS**

FMH, 35 Port Hall Road, Brighton BN1 5PD Tel/Fax  
01273 231899

email [fmh@fish.co.uk](mailto:fmh@fish.co.uk)  
[www.fmh.org.uk](http://www.fmh.org.uk)

**BANK**

Cafcash Ltd., Kings Hill, West Malling Kent ME19 4TA

**Charitable Objects**

**The relief of sickness and the promotion of good health among the population of Buhera District Manicaland Zimbabwe by the support of Murambinda Hospital and its associated facilities, and by aiding health education and health promotion initiatives.**

**The relief of poverty and sickness of orphaned children in Buhera District and the advancement of education of such children.**





Published by FMH,  
Swallow Barn,  
Birchtrees,  
Coanwood,  
Haltwhistle, Northumberland  
NE49 0QL