

# **Friends of Murambinda Hospital**



UK Registered Charity 1073978



## **ANNUAL REPORT**

**2007-8**

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# Background

Murambinda Mission Hospital (MMH) is the Designated District Hospital for Buhera District in Manicaland Province, Zimbabwe. The Hospital was founded in 1968 by the Sisters of the Little Company of Mary, under the Catholic Church's Archdiocese of Harare. The Hospital carries out its mission to care for the poor by serving a population of almost 300,000 people in an area with a diameter of 200 kilometres.

The hospital's mission - to care for the poor - was as relevant in 2007 as it was in 1968, and it continues to be pursued with energy and dedication.

## Geography & Resources

Buhera District consists mainly of 'Communal Land'. This means there is no title ownership of land, (except within designated growth points, Murambinda and Birchenough Bridge). Land use is governed through a system of traditional leaders and elected councillors. Buhera covers an area of 5,364 km<sup>2</sup>. The area can be designated 'poor' in many ways:

- **Agriculturally:** 50% of the area is at low altitude with very low rainfall, and a minuscule land area is under irrigation. Irregular rainfall leads to poor harvests and food shortages.
- **Commercially:** 'Growth points' are centres that have been subsidized by the government to develop urban type residential areas, commercial enterprise and small industry. There are two 'growth points' in this area, but there are no major urban towns.
- **Industrially:** Dorowa Minerals – a phosphate mine – is the only sizable industry in the area, employing 300 persons.

Through hard work and experience gained from previous periods of hardship, the population of Buhera has developed a remarkable capacity for survival. However, poverty remains a great hindrance to the development of Buhera and its people. MMH, among others, aims to assist the community to overcome these hurdles.



## Introduction

Dear All,

Zimbabwe has rarely been out of the news recently and the national situation has had a severe impact on the running of the hospital. FMH's partnership with Murambinda Mission Hospital is vital to its survival and development. In these difficult times we have had two trustees visit Murambinda to offer support, help and monitoring of projects. Mary Miller has been at Murambinda since the late 2007 helping with development of the new Child and Adolescent clinic using her experience in child therapy. Carolyn and Richard Rigby made a brief and valuable visit in April.

From minutes of Hospital Executive meeting.

*“Collected 33 billion dollars from hospital fees and have spent 22 billions leaving a running balance of 11billion dollars.*

*The total expenditure for the month of April was Z\$1.2Trillion dollars and ninety percent of it was paid from donor money.”*

From Food grant application

*“There is shortage of basic commodities in the country and that has increased demand and pushed up prices. Many retailer shops have closed because they have no stock to sell a few wholesalers that are still doing business are importing groceries from neighbouring countries (Botswana and South Africa) and are charging exorbitant prices for their goods.*

*Prices of food in the country are sky rocketing making it difficult for many households to feed their families it has also affected hospitals as they are finding it difficult to buy adequate food for the patients. The situation is getting worse and this has seen some hospitals reducing number of admissions and even planning to stop admitting patients and treat them as outpatients.”*

We at FMH thank you and encourage you to continue so that we can maintain our long term partnership with Murambinda Mission Hospital and the people of Buhera. Your help is now more valuable than ever. We hope that we can help keep the hospital running in these turbulent times to see it through

Mike Thompson

Chair FMH





**Mary Miller at new Child & Adolescent resource centre**

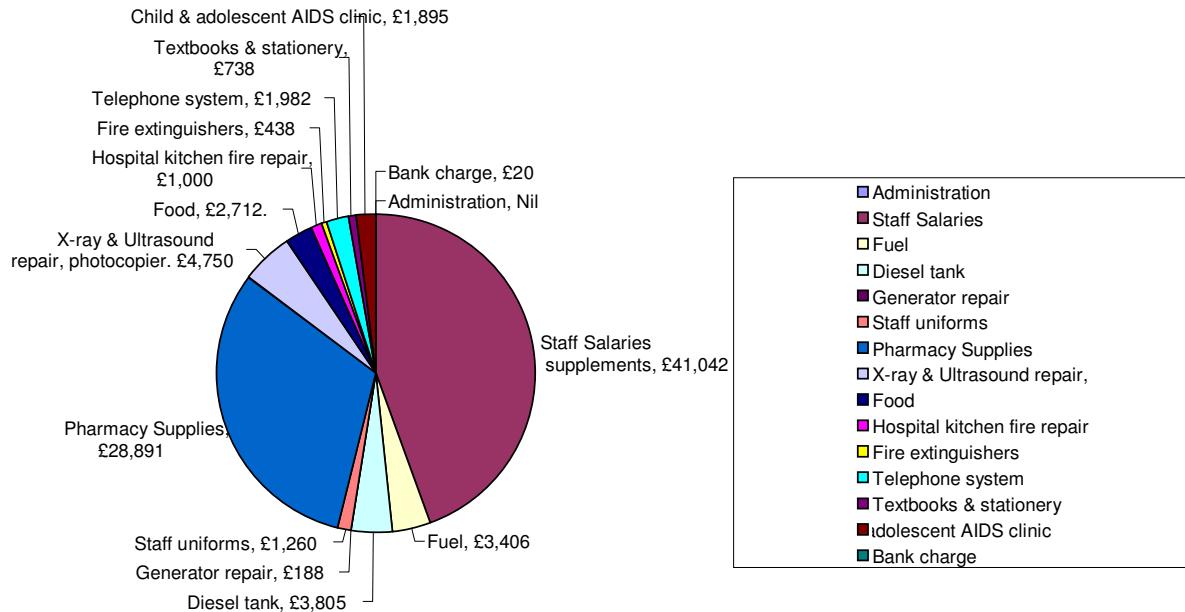
## Extract from report from Mary Miller from Murambinda

My admiration for Mr. Mudzi rises daily as we get to grips with the additional hassles of life at Murambinda. For e-mail, he can only connect when the power is on, and then can't always get a dial up connection; and the power goes off without warning or regularity, usually around 7 a.m. or earlier and comes on again (if at all) at 2 or 3 in the morning. So he has been getting up at 3 a.m. to go to the office to e-mail when there's power. When that fails he has been trying to get to Mutare and back with a memory stick to do it from there, but any travel is fraught with immense fuel problems. The hospital is now finding that even with coupons or money they can't always get fuel, e.g. last week Mr. Tirivanhu went to Mutare for a delivery, using nearly all they had left, and when he got there it didn't arrive, so he had to stay over and then get it the next day. I saw him coming back in the dark with 2 immense drums of diesel on the back of the van, which he and another man then still had to unload and store.

The knock-on effect of the diesel is of course that they can't pump water from the bore hole, and the water situation is very dire indeed. The river is dry and there is no water at all in the staff accommodation (I think the doctors may get some). There is a tap open near Monica's house between 6 & 7 every evening, and that's it. We have got 2 x 50-litre drums in which to collect it – I get John to carry these, as you can imagine! We have got a lovely little house in a row of cement houses beside the training school. It is somewhat dusty as they are building the extension to the training school next door, but that is going really well and they hope it may be finished by Christmas.

We are quickly learning the knock-on effect of all the hassles, e.g. no power means no cooking except by a fire, which needs firewood, which is hard to get, or gas which is even harder. We haven't got either yet but intend to. How on earth people do a washing I haven't quite figured out yet, but will have to do so fairly soon or we will be not at all nice to be near. I really don't know how the nurses manage to go to work in the morning and put in a heavy day. The power came on at 2 a.m. on Saturday and I heard all the women in the houses round about getting up and trying to do housework and cooking while it lasted – I did the same myself. Put on a porridge pot but then the power went off so I had to leave it, and when we eventually got power again this morning I thought I'd make it for breakfast and it had fermented!

## FMH Expenditure 2007-8



Staff salaries supplements: £41,042 allocated.

*“Essential staff allowance target to reduce staff turnover at Murambinda Mission Hospital. There is a lot of brain drain happening in Zimbabwe this is because of high cost of living that is not matching with the disposable income of the people living in Zimbabwe. Highly qualified staff is moving from the country seeking for employment in other countries.*



*Ministry of Health is one Ministry most affected by drain brain leaving most hospitals in the country under staffed. It is a major concern of every hospital in the country to try to retain the staff they have and be able to attract more staff. It has been realized that the money being paid to health staff by Ministry of Health is very low compared to what their counterparts are being paid in other countries.*

*Essential staff project has been very successful this is indicated by small number of staff turnover and a significant increase in number of qualified staff at Murambinda Mission Hospital.*

*Murambinda hospital has adequate human resources to serve the community and also the patients are benefiting a lot as they now have adequate qualified staff to look after them.”*

*Your support has made Murambinda one of the best hospitals in the country.*

*Thank you for the tremendous support.” Mr. Mudzi Donor Secretary, Murambinda Mission Hospital.*

**Fuel: £3,406 allocated.**

*“We have almost finished the funds from 2006 fuel project and hopefully the funds we received in April 2007(GBP 3,406) will take us to March 2008. This fuel project has helped Murambinda a lot as the fuel situation in the country remains uncertain with most fuel service stations drying up.*

*Murambinda has got enough fuel to move its vehicles and to run the alternate current supply (generator). There is a serious black out in the country as the local Electricity Authority is struggling to provide the nation with adequate power supply. Zimbabwe Electricity Authority has resorted to load shedding as a method of rationing electricity around the nation. This is causing Murambinda hospital to run the generator on daily basis and this consumes a lot of fuel.*

*Without this support could have been a disaster to run the hospital without transport and electricity.*

*Thank you very much for the continued support”*

**Diesel tank: £3805 allocated.**

*“Fuel situation in Zimbabwe remains critical and uncertain; Murambinda hospital is surviving on coupons that are purchased in US Dollars. Murambinda hospital used to get fuel through Provincial Medical Director but it is now erratic.*

*There are a few fuel stations that have fuel in Zimbabwe and thus the ones that are selling the commodity in US Dollars. Even the fuel being sold in US dollars it is not largely available and it is difficult to get.*

*Murambinda hospital would like to increase its storage for fuel so that it can buy in bulk. Buying in bulk will reduce cost of transport as fuel will be collected once in bulk.*

*Since fuel situation remains critical and uncertain, Murambinda would like to make contingency plan for dry spells by buying in bulk.*

*Murambinda hospital would like to buy a 5000 litre tank and secure the place by putting fence around the place where the diesel tank will be constructed. The 5000 litre tank will increase our storage capacity to 9000 litres.”*



**New diesel tank being filled for the first time**

Generator repair: £188. X-ray, Ultrasound & photocopier repair: £4750.

*"Murambinda hospital has one x-ray machine which is used to take all requested x-rays in the hospital. X-ray machine has developed some problems sometimes it takes longer time to start; we fear that if this problem persists it may cause the machine to breakdown.*

*Murambinda hospital as a designated district hospital receives many cases that requests for x-rays therefore it cannot operate without x-ray machine. The machine was last serviced in 2006 and because of increasing running costs*

Murambinda could not afford one service in 2007. There is increase in number of x-ray requests this is reflected by the number of X rays done in 2007 compared with 2006 as stated in MMH 2007 Annual report. (3163 in 2007 compared to 2715 in 2006). There is an ultra sound scan machine that is broken down , ultra sound scan machine is used in maternity department to check the position of the baby in the womb ,position of the placenta ,gestation period and also it is going to be used to diagnose abdominal TB.

*Ultra sound scan machine is very helpfully in maternity for decision making in methods of delivery that is based on the position of the baby in the womb.*

*Murambinda hospital is kindly requesting for funds to service its x-ray machine and repair ultrasound scan machine”*

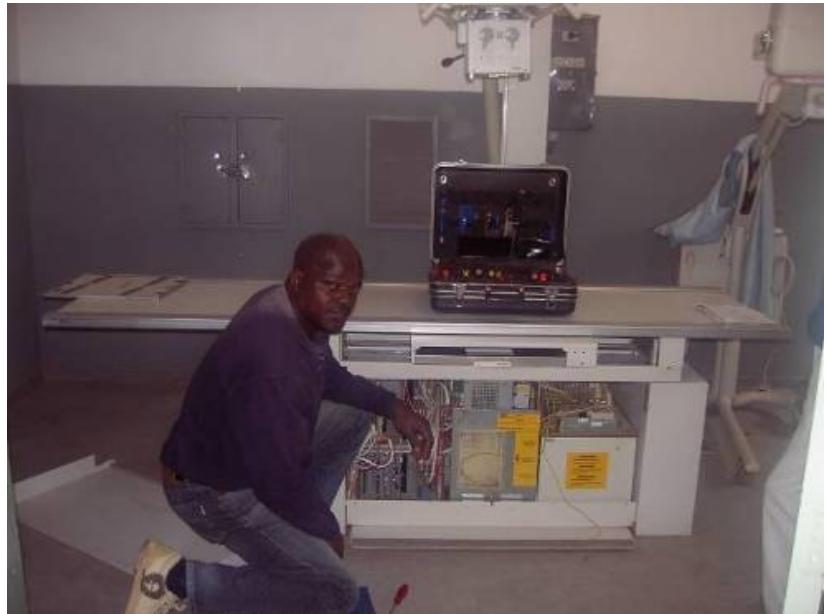
*Murambinda greatly appreciates the tremendous support from Friends of Murambinda*

Food: £2712 allocated.

*Murambinda Mission Hospital is pleased to submit this feedback on food project. The project was very successful this was indicated by a big improvement on the patient diet.*

*Murambinda managed to buy sugar, cooking oil and milk, which was not possible to buy out of the daily collection and monthly grants from Ministry of Health. Prices of food are shooting up and it is difficult to budget for food items every month.*

*Murambinda Mission hospital initially planned to buy in bulky non perishable commodities but that did not happen because the budget was eroded by inflation”*



Emergency repair to kitchen following fire £1000 allocated, fire fighting equipment £438 allocated.

*"Murambinda hospital had a tragedy on Saturday night the 6<sup>th</sup> of October 2007. The hospital main kitchen caught fire due to an electrical faulty, the electricians have come to assess the cause of the fire and have concluded that it was an electrical faulty that could have been caused by unexpectedly on and offs of electricity. (Due to national power cuts)*

*Fortunately the staff who managed to get to the terrific scene managed to put off the fire before it caused an extensive damage to the hospital.*

*The fire caused a considerable damage in the kitchen. Wiring of all electrical gadgets in the kitchen was totally burnt and need rewiring, the ceiling caught fire and need to be replaced, windows were broken and walls need repaint.*

***Temporarily Murambinda is using firewood to prepare food for the patients and this is being done outside the kitchen. We are approaching rain season and it will be difficult to get and use firewood when it is raining.***

***Staff struggled to put off the (hospital kitchen fire on 6/10/07) fire as they were not equipped to do so. There is one fire hose reel in the hospital which is near the male ward and could not be used to put off fire at the kitchen since it is distant from the male ward side. The fire extinguisher tanks in the hospital were empty and could not help. In normal circumstances the fire extinguishers should be serviced at least once per year but due to escalating running costs, hospital could not afford one service the whole year.***

*Murambinda Mission hospital feels that if there was adequate fire fighting equipment (serviced) the fire could have been put off before it caused a big damage.*

*Murambinda hospital would like to service its fire extinguishers and get two more hose reels put in the hospital that will increase its ability to fight fire.*

*This is a request for money to service fire extinguishers and buy two hose reels one to be installed at the main kitchen and the other in maternity.*



#### ***COST.***

*Service and installing two hose reels Z\$3,500,000,000: £438  
Exchange rate: Z\$8,000,000: 1£."*

## New telephone system: £1982 allocated.

The old hospital switchboard had developed faults and was beyond repair. It had difficulty with incoming and outgoing calls and with internal calls. At times only one outside line was functioning for a hospital with over 100 beds. Clearly this was hampering good patient care. A new telephone system has been installed.

**MTPEX SYSTEMS P/L**

12 Wimbledon Drive. Eastlea  
Harare.  
704258/9 Cell 011605011/ 091330070/ 023275402

**PROFORMA**

**QUOTATION**

<b>Customer</b>			
Name	Murambinda Hospital		
Address	12 Wimbledon Drive. Eastlea Harare.		
City	Murambinda		
Tel/Fax			
Date	11/16/2007		
Rep	Salome		
VAT Reg #	10015564		

Qty	Description	Unit Price	TOTAL
1	LG Opticon 8:60PABX	\$5,000,000,000.00	\$5,000,000,000.00
1	LG Opticon 30DS Switchboard	\$270,000,000.00	\$270,000,000.00
2	LG Opticon 48DSS Unit (Optional)	\$144,000,000.00	\$288,000,000.00
2	LG Opticon Back-up Battery (Optional)	\$144,000,000.00	\$288,000,000.00
1	Lightning Protector	\$20,000,000.00	\$20,000,000.00
50	Telkom Handsets	\$32,400,000.00	\$1,620,000,000.00
50	Rj11 Blocks	\$1,500,000.00	\$75,000,000.00
6	Installation of line into PABX	\$10,800,000.00	\$64,800,000.00
50	Installation of extension within 20 metres	\$12,600,000.00	\$630,000,000.00
540	Transport Charge	\$200,000.00	\$108,000,000.00

**Order & Payment before delivery.**

Account Name: MTPex Systems  
Bank: CBZ  
Branch: Sam Nujoma  
Account Number: 02120515870010

<b>Payment Details</b>	
<input checked="" type="radio"/> Cash on Delivery	
<input type="radio"/> Cheque	
<input type="radio"/> Credit Card	
Name Mtpex Systems	
Terms: 80% Deposit, Bal after installations	
Validity: 48 Hours	

<b>SubTotal</b>	\$8,363,800,000.00
<b>VAT @ 15%</b>	\$1,254,570,000.00
<b>TOTAL</b>	\$9,618,370,000.00

**Office Use Only**

*This is a proforma invoice to guide you of the approximate cost. Hoping to hear from you soon.*



Thank you.

## Textbooks and Stationery: £738 allocated.

It is difficult to source these goods at reasonable prices within Zimbabwe. We were fortunate to be able to buy some of these goods in the UK and send them in the container organized by SVMH our Dutch sister organization. The container had supplies and furniture for the nurse training school- see cover picture.

Staff uniforms: £1260 allocated.

*"Murambinda hospital employs 19 General Hands, 2 drivers and 15 Nurse Aids. The mentioned working class are the lowest paid people on the government payroll. Unlike Nurses General hands and Nurse Aids they do not get uniform allowance. Ministry of Health has got a dress code and all general hands should be dressed in blue uniforms and Nurse Aids in pink uniforms. Government hospitals have budgets for General hands and Nurse aids uniforms every year they give new uniforms to these staff.*

*Mission hospital operates under Government regulations and it is policy that general hands come to work in uniform which is acceptable because it makes them look smart and identifiable. Mission hospitals do not have budgets for general hands, drivers and nurse aids uniforms. Nurses receive uniform allowances which help them to repair and buy new uniforms.*

*Murambinda hospital cannot afford to buy uniforms for the general hands and Nurse Aids as it is getting little support in money (Z\$60,000,000 /month )from the Government and it is collecting a few dollars from the patients which cannot cover its running costs .Finance in Zimbabwe situation is difficult to manage because every income is quickly eroded by inflation.*

*The job description for general hands and drivers at Murambinda hospital has been expanded to cover other posts that are not allocated to Murambinda hospital which are Mortuary attendants, Maintenance officers, and cookie. Those whom are working in hospital kitchen should dress in white uniforms with aprons and hats and those that are doing maintenance work should be dressed in protective clothing.*

*Nurse aids and general hands out of their salaries are not able to buy their own uniforms their salaries are very low and they are finding it difficult to make ends meet as inflation is taking everything out of them. Murambinda hospital as the employer would like to help them to buy uniforms so that they look smart like any other employee at Murambinda hospital.*

*Murambinda mission hospital is requesting for funds to buy uniforms for Nurse Aids and General Hands two pairs each."*

Child & adolescent HIV/AIDS Resource Centre £1895 allocated

As a result of the success of new treatments for HIV/AIDS (Anti Retroviral Treatments [ART]) many children with this condition can now expect to live for many years and perhaps have a near normal lifespan.

This will present many challenges, facing stigma, disrupted schooling, difficult drug regimens, and difficulty in developing a positive self image. Most will have parents who have died or are sick or they may have been sexually abused.

At present at Murambinda 400-500 children are treated with ARTs. These are treated in the adult clinic where the service is not child friendly and is barely able to address their psychological and social needs.

The intention is to locate the clinic in a cluster of existing huts in the hospital grounds that badly need refurbishment and repair.





## **- Planned projects for 2008-9**

**WE NEED YOUR DONATIONS TO HELP FUND THE FOLLOWING**

- Vehicle required to get supplies for the hospital.
- Generator connections
- Essential staff allowances to try to provide a living wage.
- Upgrade of storeroom at Training school to a library
- Pharmacy supplies to order from UK via Durbin a company which specializes in supplying overseas charitable institutions.

- Murambinda Mission Hospital is a beacon of good care and humanity. It is more reliant than ever on external funding due to conditions within Zimbabwe. Help it to survive in these turbulent times.
- We rely entirely on donations to pay for the projects we are asked to fund.
- We are very grateful for all those who have made a donation.
- Be assured all donations go to help projects at Murambinda,
- All administrative costs are met by the trustees; we have no paid employees, no advertising or fund raising costs.

FMH are very grateful to the following who gave generously in 2007-8.

We especially thank all those who contributed to Rev John Miller & Mary Miller's retirement fund in particular the people of Castle Milk Parish, Glasgow for their outstanding generosity.

A & P Cudworth	E Briggs	JPC penny jar	Pat Scott
A & W Brichieri-Columbi	Eli Lilly Staff Fund, Kinsale, Ireland	K & B Saunders	Peter Millar
A Lewis	E Lockhart	K Howard	Pope & Crawford
Alison Totty	Eston Trefoil Guild	Linda Lane	PW Sheppard
All Saints Church, Gosforth	G & A Antunes	Louise Coidan	R & C Rigby
A McCall Smith	G & K Clark	Lynda Walker	R & J Last
A McClelland (Mem fund)	G & M Wells	M & C Benson	R J Winslade
Alice Elsie Bell	G & S Milne	M & J Fletcher	R Stott
B & G Hoyer	G Thompson	Dr M Coghlan	RE Millard
B & M Lodge	Glasgow Cathedral	M Craggs	Retirement-Millers
B Laine	Guisborough Methodist Tuesday at 8 Group	M Griffiths	Rotary Club (Guisborough)
Belger H & M Todd	Iona Community Glasgow South Family Group	M J Dennis	Ruth Todd
C & J James	I M Betton	M Howard & R Germain	S & C Doran
C Sherwood	I Monro	M MacTaggart	Serena Gavin
C Takundwa	Isobel's card shop	M Thompson	Sheena Kennedy
C & E Jones	I Yuill	M Thomson	S Paul (Scotland Zimbabwe Group)
C&N Pressick	J & A Connolly	Madeleine Thompson	Dr S Pope
Carmunnock, Church Glasow	J & D Matthews	Marion Mitchell	S Ray & F Mazimbamuto
Carnwadric Church	J & J Slater	MS Kuenssberg	St Swithuns Church Southsea
Castlemilk E. Parish Church	J & L Kelly	N & B Smith	St Werburghs
Chris Mullin MP	J Millard	N & E Carden	S Ray & F Mazimbamuto
Clare Connolly	J & M Miller	Mr & Mrs N Pressick	T Rault-Smith
Cleveland Guides	J Fletcher	N & S Kuenssberg	T Waffelaert
Cresswell maternity unit	J Harvey	Neil MacGregor	The Tibden Trust
D & H Pope	J Jameson	O Newson	V Graham
D & J Woolley	J Raimondo	P & M Dunt	Pere Philippe Waffelaert
D & M Connolly	J V Connolly	P H Scudder	W & E O Neil
D & R Stepien	J Yuill	P Hynes	W Mitchell
Prof D Chamberlain	Janice Royle	P W Sheppard	Wolsingham.Church
D Thompson	Jean McLeod	P. Renton	Wolsingham Primary School
E & M Thompson	Jeely Piece Club	P.W Sheppard	Woodside Surgery Loftus

## FINANCIAL REPORT 6.4.07- 5.4.08

BALANCE BROUGHT FORWARD £ 48,212

INCOME £ 80,184

Standing orders	£	13,994
Interest	£	2,594
Reclaimed tax	£	6,348
Other donations	£	57,248

### PROJECTS FUNDED

Salaries + salary supplements	£	41,042
Fuel & diesel tank	£	7,211
Pharmacy goods	£	29,629
New telephone system	£	1,982
Repair of generator, ray, Ultrasound, photocopier	£	
Fire fighting equipment	£	5,376
Child & adolescent clinic	£	1,895
Staff uniforms	£	1,260
Food, kitchen refurbishment	£	3,712

BANK CHARGE £ 20

EXPENDITURE £ 92,127

BALANCE AT YEAR END £ 36,269

Every penny donated went to Murambinda Mission Hospital. The trustees bear all administrative costs themselves (including the £20 bank charge) and give their time freely.

### Trustees

We have five trustees, Dr John Connolly, Mrs. Mary Miller, Dr Carolyn Rigby, Dr Michael Thomson, and Dr Michael Thompson. All have worked at Murambinda in the past. Mary has been at Murambinda since late 2007 and Carolyn visited in April 2007 to help build our partnership with staff at Murambinda and to monitor projects. A monitoring and supportive visit was also carried out in March 2007 by TBAAlert a UK based charity with whom we have close links.

Gift Aid  
Declaration

Friends of Murambinda Hospital (Reg Charity) 1073978

I [REDACTED] title [REDACTED]

of [REDACTED] (address)

Postcode [REDACTED]

would like Friends of Murambinda Mission Hospital to treat all donations I have made since 6 April 2000, and all donations I make from the date of this declaration until I notify you otherwise, as Gift Aid donations. I will notify Friends of Murambinda Hospital if I no longer pay an amount of income tax equal to the tax reclaimed on my donations.

Signature [REDACTED] Date [REDACTED]

Please return this half of completed form to

Dr C Rigby, Treasurer,  
Friends of Murambinda Hospital  
East Park Cottage  
Hutton Lane  
Guisborough  
Cleveland TS14 8AA

Please cut-----

BANKERS ORDER FORM

To the manager of my bank

Date [REDACTED] / /

Name of my bank [REDACTED] Bank plc

Address of my bank [REDACTED]

Postcode [REDACTED]

Please pay Friends of Murambinda account no. 40-52-40 00006100  
at Cafcash Ltd, Kings Hill, West Malling, Kent ME19 4TA

the sum of £ [REDACTED] every month/quarter/year\* \*delete as required

starting on [REDACTED] / / until further notice.

Please debit my account no. [REDACTED]

Name (capitals) [REDACTED]

Address [REDACTED]

Postcode [REDACTED]

Signed [REDACTED]

Please return this half of completed form to your bank

# FMH Contact Details

<b>The Treasurer</b> <a href="mailto:richardrigby@doctors.org.uk">richardrigby@doctors.org.uk</a>	East Park Cottage, Hutton Lane, Guisborough TS14 8AA
<b>The Chair</b> <a href="mailto:fmh@fish.co.uk">fmh@fish.co.uk</a>	55 Wilbury Avenue Hove BN3 6GH
www.fmh.org.uk	

## Donations

Please donate what ever you can by sending cheques payable to “Friends of Murambinda Hospital” to the treasurer at the above address or by filling in a standing order form overleaf. If you are a UK tax payer please also complete the Gift Aid form so that we can reclaim the tax from the Inland Revenue. If you have a non UK bank account please contact the treasurer or Chair for SWIFT and IBAN details.

## Fundraising

If you would like to organise a fundraising event we are happy to provide publicity materials including leaflets, a small exhibition and Powerpoint presentation, and perhaps a speaker. Please contact the Chair; details above.

