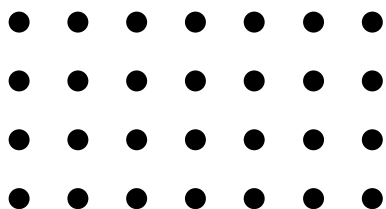




2023
**Annual
Report**
2024



www.khethimpilo.org



Table of Contents

1 Executive Summary

2 Message from the Board

3 Achievements

4 Strategic Information Management

- Advanced Clinical Care Program (ACC)
- ORBIT System – Imagine Programme
- RedCap System
- Research
- Integrated School-Based Sexual Reproductive Health & Rights (SRHS) Programme
- Community Orientated Primary Care (COPC)
- Substance Abuse System Project

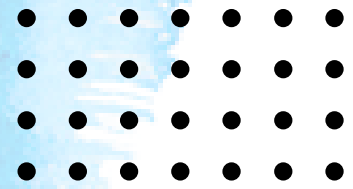
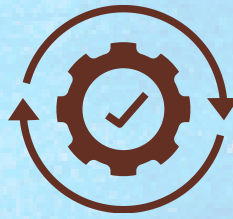
5 Finance

6 Human Resources

7 Information Technology



Executive Summary



Kheth'Impilo AIDS Free Living

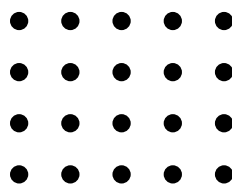
Kheth'Impilo (KI) continues to serve as a trusted partner in public health transformation, rooted in the principles of community-centered innovation, resilience, and integrated service delivery. For over a decade, KI has strengthened South Africa's response to HIV and TB through the provision of holistic, differentiated healthcare solutions that respond to the evolving needs of communities.

A Holistic Public Health Ecosystem

During the 2023/24 financial year, KI solidified its role as a public health innovator, integrating health, education, and social welfare services to deliver person-centered care across both urban and rural settings. With its strategic pivot toward environmental health integration, KI is setting the foundation for next-generation models of healthcare that respond to climate-related risks and broader determinants of well-being.

Across the country, KI's work spans prevention, care, treatment, and adherence support, all underpinned by community-based models that prioritise accessibility and dignity. These include home-based HIV testing, adherence clubs, school health programs, early childhood development, youth economic strengthening, and accredited training initiatives; all designed to elevate health literacy and reduce systemic barriers to care.



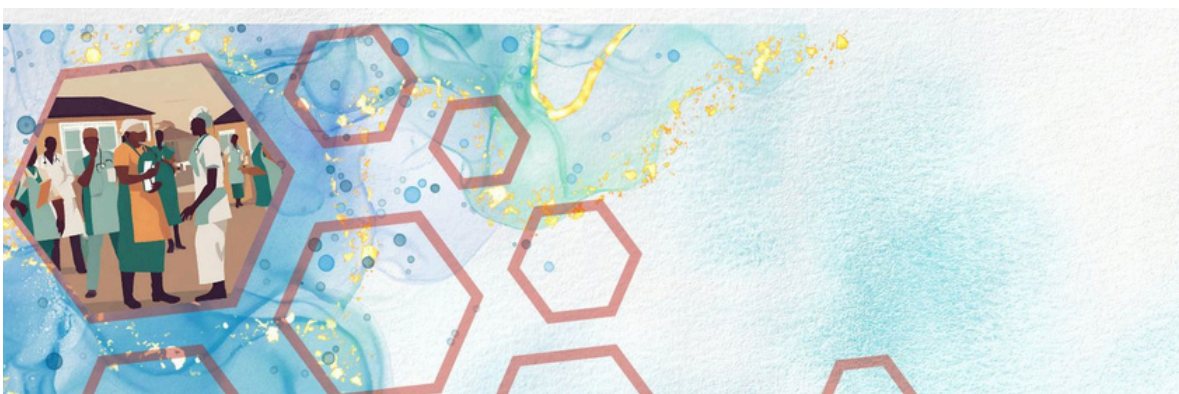


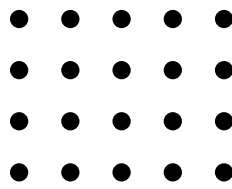
Key Programmatic Milestones

- **Advanced Clinical Care (ACC):** Expanded nationally, enhancing the capacity of health workers and strengthening HIV care through digital innovation, training, and policy alignment.
- **Community-Based Services (Western Cape):** Provided accessible, preventive and curative health services, including medication delivery and wellness hubs, across Cape Metro and rural West Coast districts.
- **Integrated SRHR:** In iLembe District, KwaZulu-Natal, KI delivered impactful school-based services under budgetary constraints, achieving outstanding coverage, ART retention, and psychosocial support outcomes.

In Amajuba, The Imagine Programme (Amajuba District, KwaZulu-Natal): Empowered adolescent girls and young women (AGYW) through school-based sexual and reproductive health services, achieving exceptional PrEP uptake, reduced HIV incidence, and strong reintegration outcomes.

- **Substance Abuse System Project:** Progressed towards full national implementation, modernising referral systems for in-patient treatment through a phased digital rollout.





People at the Core

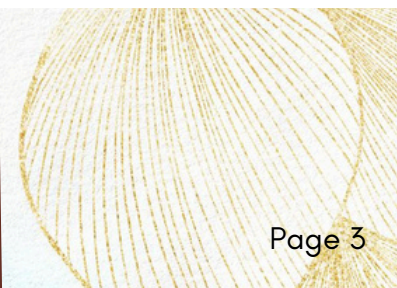
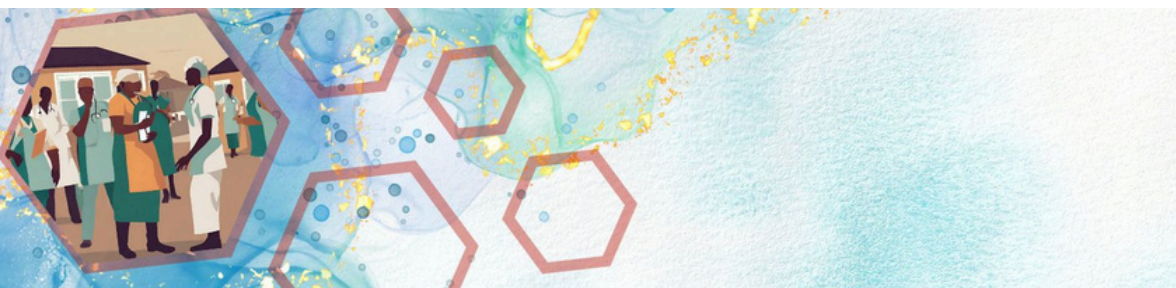
At the heart of KI's achievements lies a deep commitment to humanity and service. In a context marked by economic instability, climate extremes, and social fragility, KI staff consistently go beyond the call of duty. Whether responding to systemic health challenges or standing in the gap during crises, their work is defined by personal sacrifice and a shared belief in community upliftment.

KI does not merely deliver services; it co-creates solutions with the people it serves. Through sustained collaboration with government, donors, and grassroots organisations, KI continues to build strong, adaptable systems that protect and empower vulnerable populations.

Strategic Outlook

Looking ahead, Kheth'Impilo is poised to scale its innovations further. Key priorities include strengthening integration across service streams, expanding reach to underserved populations (particularly out-of-school youth and rural areas), and embedding environmental health considerations into all programming. These directions are guided by the organisation's enduring mission: to deliver excellence, innovate responsibly, and champion a future where health equity is not an aspiration, but a lived reality for all.

In every province where we work, through every intervention, KI continues to define excellence by action, delivering measurable impact and forging partnerships that transform communities.



Relations with Donors

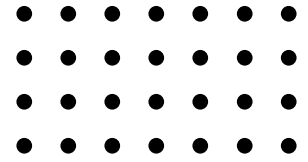
KI continues to enjoy strong and productive relationships with its donors. The Western Cape Department of Health (WCDoH) increased funding over this financial period, reinforcing its confidence in the organisation's delivery model. The Centers for Disease Control and Prevention (CDC) remains a key partner in the Advanced Clinical Care (ACC) program, supporting both implementation and innovation in ACC. While funding applications to MACAIDS were unsuccessful during this period, NACOSA funded us for a similar type of program in Amajuba. Partnerships with the South African Medical Research Council (SAMRC) and the Department of Social Development (DSD) continued under the substance use disorder initiative, with KI serving as the national coordinating body despite a modest operating budget. These partnerships demonstrate the organisation's credibility and its ability to manage complex, multisectoral programs with accountability and impact.

Sustainability and Strategic Transformation

In pursuit of long-term sustainability, KI has embarked on a major strategic review of its five-year organisational roadmap. As part of this process, the organogram was restructured to increase efficiency and responsiveness to a changing operational environment. Furthermore, new business vehicles were developed to complement the existing Voluntary Association model, with the aim of expanding KI's capacity to attract diversified funding and form strategic partnerships across sectors.

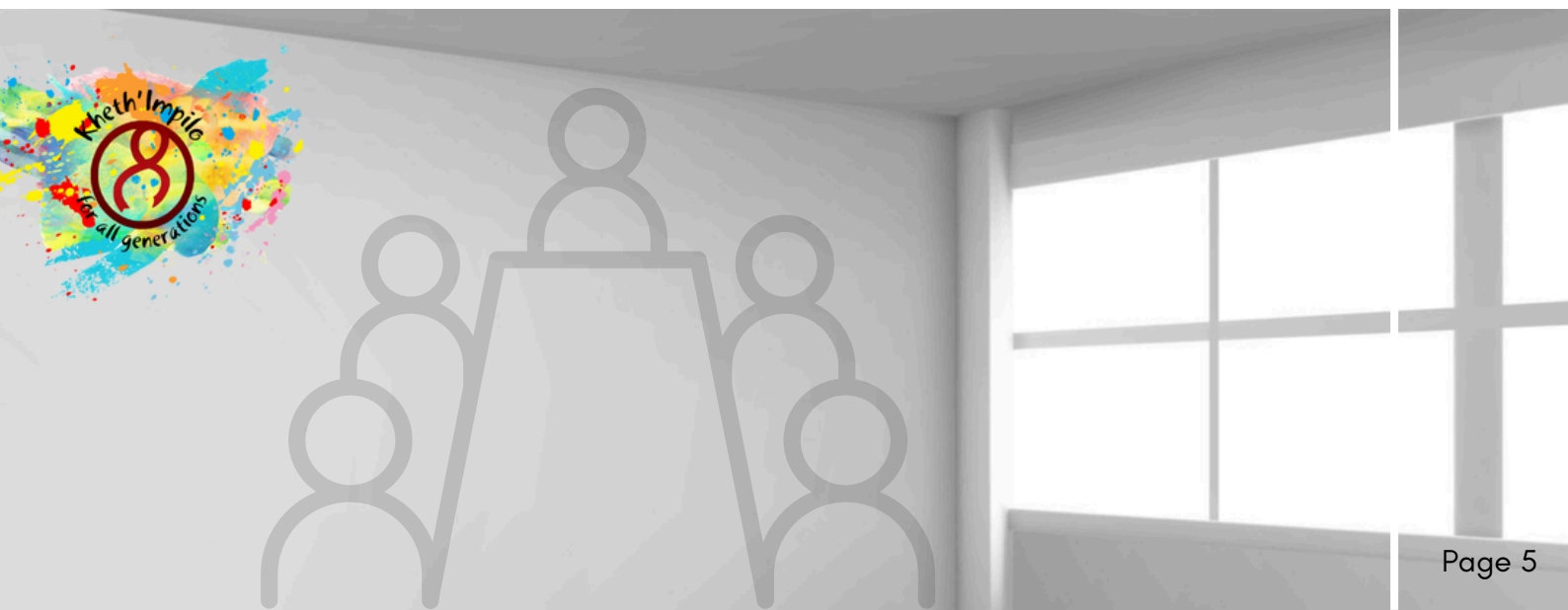


Message from the board

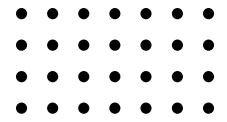


It gives me pleasure to have been asked to contribute to the 2024 Annual Report of Kheth’Impilo on behalf of the Board.

For public health organisations around the world, 2024 was a hard year as many suffered continued financial strife in the wake of budget cuts, emanating mainly from on-going global health funding imperatives. In the face of declining funding for major programmes, KI remained resolute in advancing its mission and core values and continued to deliver services and explore and implement programmatic options.



Message from the board cont.



The concept of health as being more than the absence of disease, along with the practice of community workers as development agents, endorsed the recognition that health and development are deeply intertwined in the work that KI does. In the course of the year, while programmes in sexual and reproductive health ended, a focus was placed on areas such as early child development and climate change, and the goal of ensuring universal health care through universal health access was sustained through clinical programmes and community development workers.

This organisation continues to be a role model for community-engaged, -supported and -delivered practice.

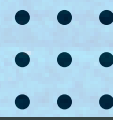
At KI's heart is a dedicated workforce with strong leadership and a frontline of health and community development workers, all of whom are deeply loyal to the mission and its elaboration, and who are consistent in abiding by the organisation's values of integrity, respect and support for the most vulnerable and marginalized communities.

It remains a privilege for the Board to provide oversight and support to this wonderful organisation, and we extend deep appreciation for everything each staff member contributes to its success.

Marian Jacobs
Chair : On behalf of the Board



The Organisation's major achievements over the past year



01 October 2023
to
30 September 2024

Introduction:

Kheth'Impilo (KI) continues to serve as a trusted partner in public health transformation, rooted in the principles of community-centered innovation, resilience, and integrated service delivery. For over a decade, KI has strengthened South Africa's response to HIV and TB through the provision of holistic, differentiated healthcare solutions that respond to the evolving needs of communities.

A Holistic Public Health Ecosystem

During the 2023/24 financial year, KI solidified its role as a public health innovator, integrating health, education, and social welfare services to deliver person-centered care across both urban and rural settings. With its strategic pivot toward environmental health integration, KI is setting the foundation for next-generation models of healthcare that respond to climate-related risks and broader determinants of well-being.

Across the country, KI's work spans prevention, care, treatment, and adherence support, all underpinned by community-based models that prioritise accessibility and dignity. These include home-based HIV testing, adherence clubs, school health programs, early childhood development, youth economic strengthening, and accredited training initiatives; all designed to elevate health literacy and reduce systemic barriers to care.

Strategic Information Management/Monitoring and Evaluation (M&E)

Strategic Information Management

The Kheth'Impilo M&E team is tasked with the development of data collection systems that provide insight into the various interventions implemented by the organization, and to report to funders. KIs M&E outcomes provide valuable information that influence management decisions and ensure high quality program management. The approach ensures that Kheth'Impilo continues to assist the communities where the data originated from by providing unique, data-driven solutions which address root causes and ensure that donor resources are deployed effectively and efficiently.



KI produced regular reports for a number of funders including the Western Cape Department of Health, Centres for Disease Control and Prevention and NACOSA.

Advanced Clinical Care Program

(ACC)

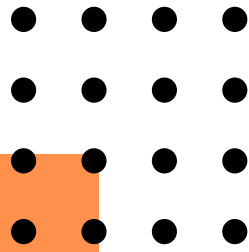
Major Organisational Achievements:

- Expanded nationally, enhancing the capacity of health workers and strengthening HIV care through digital innovation, training, and policy alignment.
- Enhancing Patient Outcomes through Advanced Clinical Care Interventions for Advanced HIV Disease
- Patients suffering from advanced HIV disease (AHD) often face complex clinical challenges, including severe immunosuppression, opportunistic infections, and higher risks of mortality. The "Advanced Clinical Care for HIV Disease" platform provides a comprehensive approach to improving outcomes for this vulnerable group through a synergy of education, mentorship, and clinical systems strengthening.



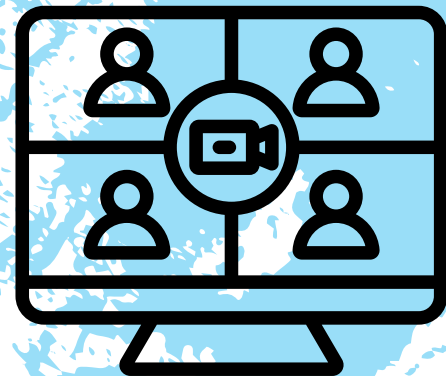
Advanced Clinical Care Program

Cont.



1. Courses and Webinars

The structured online courses and live webinars serve to build the capacity of frontline healthcare workers, clinicians, and program managers in diagnosing, staging, and managing AHD. These educational offerings ensure that providers are up to date with WHO guidelines, including timely initiation of ART, screening and prophylaxis for opportunistic infections like TB and cryptococcal meningitis, and adherence support strategies. As healthcare providers become more proficient, patients receive earlier, more accurate diagnosis and better-informed clinical care, directly improving treatment outcomes.



2. Champions Model

Through the Champions Model, select clinicians and nurses receive advanced mentorship and clinical coaching, allowing them to serve as expert resources within their facilities or districts. These champions become local leaders in AHD management, promoting best practices, mentoring peers, and facilitating case discussions. Patients benefit from a more skilled and confident clinical team, with fewer delays in complex decision-making and enhanced continuity of care.



Cont.

Advanced Clinical Care Program

3. Lab Tracking Systems

Effective management of AHD is heavily dependent on timely and appropriate lab investigations (e.g., CD4 count, CrAg screening, TB diagnostics, and VL monitoring). Lab tracking systems introduced through this platform help facilities monitor and follow up on critical test results. This ensures that patients are not lost in the cascade of care and receive prompt treatment interventions based on lab findings—thus preventing clinical deterioration and death.



4. Clinic Gap Assessments

Using standardized tools, the platform supports facility-level assessments to identify gaps in AHD service delivery, ranging from stockouts of essential diagnostics to workflow inefficiencies. These assessments drive targeted quality improvement interventions that create more patient-friendly, responsive clinics. By addressing systemic gaps, patients are more likely to receive timely, holistic care aligned with national AHD packages.



Cont.

Advanced Clinical Care Program

5. Conclusion

Through knowledge transfer, mentorship, and health system strengthening, this suite of interventions equips health workers and facilities to provide comprehensive, life-saving care for patients with advanced HIV disease. The result is improved survival, reduced morbidity, and a strengthened continuum of care for those most at risk.



AHD Toolkit Introductory Workshops

During Q1 of the reporting period, KI conducted AHD Toolkit Introductory Workshops in the outstanding KZN districts of Zululand and eThekweni. In Q3, these workshops were conducted in the NW.

Table 1: Toolkit Workshops - Districts and Number of Attendees (Oct 23 – Sept 24)



Table 1:

<u>Topic</u>	Registered	Attended	% Attendance
General overview of Advanced HIV Disease and TB Diagnostics	Detailed report not shared by SP	1346	Detailed report not shared by Support Partner(SP)
An approach to management of the adult HIV patient with Drug resistant TB	Detailed report not shared by SP	1210	Detailed report not shared by SP
Adolescents and Advanced HIV Disease: Advanced Clinical Care	3078	1210	24%
Management of patients with high viral load	Detailed report not shared by SP	1210	Detailed report not shared by SP
AHD and co-morbidities (cancer, CVD, diabetes)	Detailed report not shared by SP	715	Detailed report not shared by SP
Paediatric HIV and Advanced Clinical Care	2691	545	20%
Cryptococcal Meningitis	4097	1550	38%
Managing the patient with Advanced HIV	3311	1200	36%
Cytopenias in Advanced HIV Disease	2104	644	31%
An Approach to diarrhoea in Advanced	1679	551	33%
An approach to renal failure in a patient with	Detailed report not shared by SP	992	Detailed report not shared by SP
Management of HIV and hepatitis B virus	2934	956	33%
An approach to respiratory	2383	747	31%
An approach to liver disease in HIV	Detailed report not shared by SP	887	Detailed report not shared by SP
Adverse Drug reactions and	2871	832	29%
How to identify opportunistic	3020	1358	45%
TB diagnosis and management among	2854	1337	47%
HIV-related ethical dilemmas:	3377	1113	33%
TOTALS	34399	17593	

NDOH KNOWLEDGE HUB AHD TRAINING

KI supported NDOH's Knowledge Hub in hosting their AHD Training Course Cohort 4, which was open for the period 1 Oct 2023 – 30 Sept 2024. A total of 34 339 healthcare workers (HCW) registered for the course of which only 17593 completed the course within the given time frame and received certification. The large variance between learners registered and those that completed and were certified, strongly reflects the sentiment of KI's AHD team that this course is possibly too advanced for the PHC Nurses at which this course was pitched and that a more practical course is required that aligns to related AHD patient identification and care, and clinical care activities in the field. The number of certified learners per province and cadre are indicated in Table 2, with KI supported provinces indicated in bold.

Table 2: Knowledge Hub Cohort 4 AHD Certified HCW cadres per province (Oct 23 – Sept 24)

Topic	EC	FS	GP	KZN	LP	MP	NW	NC	WC
Adolescents and	89	35	218	125	71	33	42	19	98
Paediatric HIV	42	20	189	53	55	33	74	12	67
Cryptococcal	153	70	508	247	145	75	107	57	188
Managing the	113	49	365	202	140	70	70	43	148
Cytopenias in	60	28	206	127	45	25	36	27	90
An Approach	38	34	177	88	56	35	24	24	75
Management of	68	47	321	168	96	35	71	36	114
An approach	53	44	245	131	65	30	52	27	100
Adverse Drug	91	40	256	159	81	27	60	24	94
How to identify	107	57	431	268	119	62	103	36	174
TB diagnosis	118	73	429	227	120	83	92	58	137
1394HIV-related	99	50	380	200	88	70	64	53	109
TOTALS	1031	547	3725	1995	1081	578	795	416	1394

** On 26 Oct and 15 Aug one participant did not report a province and Job Role

The SA HIV Guidelines were revised in April 2023. As such the existing NDOH's KH Advanced AHD Course will be amended in the next financial year to align to the updates. KI was instructed by NDOH to delay all planned amendments to the KH AHD Curriculum until the consolidated guidelines have been officially released; hence, no further KH AHD Training cohorts have been offered.

To enhance Cohort 4 Learner experience and understanding of the modules, KI facilitated formal interactive tutorials through the KH platform. Table 3 below indicates the topics discussed, the number of registrations, number of actual attendees, the number of queries responded to and the health cadre of attendees.

Knowledge Hub Cohort 4 Interactive Tutorials

Topic	Social Worker /Social Aux Worker	PN	MD	Pharmacist	Other	Admin or Management	Environmental Health Practitioner	EN	Clinical Associate	Allied Health	Emergency Medical Services
Adolescents and Advanced HIV Disease: Advanced Clinical Care	40	239	131	11	88	21	109	15	14	62	
Paediatric HIV and Advanced Clinical Care	14	217	117	18	54	13	40	12	15	45	
Cryptococcal Meningitis Management Webinar Stats and Report	4	387	477	53	179	28	205	15	35	167	
Managing the patient with Advanced HIV Disease	15	373	308	24	112	26	156	24	22	140	
Cytopenias in Advanced HIV Disease	9	171	180	7	59	14	86	14	19	85	
TOTALS	82	1387	1213	113	492	102	596	80	105	499	0



ORBIT System – Imagine Programme

The implementation of the ORBIT system for the Imagine programme in the Amajuba District, KZN plays a pivotal role in tracking service delivery, measuring performance against targets and ensuring data quality for informed decision making.

The primary objective of the ORBIT system is to provide a centralised platform for data capturing, management and reporting across the Imagine Programme. The system facilitates real-time monitoring of services rendered to adolescent girls and young women in the 8 supported schools.

The ORBIT system is designed to align with the programme's M&E framework, and the system captures individual level data allowing for de-duplication and tracking of services across multiple service points. The system generates routine data exports for analysis and tracking of performance against set targets.



IMAGINE
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RedCap System

Community Based Services (WC)

Redcap is a secure web-based application designed to facilitate data collection and management of the Community Based Services Programme in the Western Cape. Implementing Redcap aims to enhance data collection, data accuracy, streamline data collection processes and improve overall programme evaluation.


The system is aligned with the source documents used by the nurses and community health care workers ensuring efficient data collection and management by data capturers.




The use of standardised data entry fields reduces discrepancies between paper records and digital entries, ensuring data consistency. The system allows for precise control over user access, ensuring data security and confidentiality. Custom exports are generated for analysis and to track progress against referrals made by the department of health facilities for rendering of prescribed services.



Research



Kheth'Impilo performs operational and implementation science research related to public health programs in Southern Africa. Kheth'Impilo continued partnering with the International Epidemiological Databases to Evaluate AIDS–Southern Africa, based at the University of Cape Town and University of Bern, in conducting longitudinal analyses of clinical data from HIV treatment facilities. KI also partnered with the division of Epidemiology and Biostatistics, Department of Global Health, Stellenbosch University with analyses of routine HIV treatment effectiveness in South Africa. In 2024, Kheth'Impilo contributors authored two peer reviewed publications and three conference presentation. Cumulative citations of Kheth'Impilo's research output reached nearly 2000, including > 200 citations during 2024.



RESEARCH

Peer-reviewed publications (KI contributors in bold)

1. Zaniewski E, Skrivankova VW, Brazier E, Avihingsanon A, Wagner Cardoso S, Cesar C, Chenal H, Crabtree-Ramírez BE, Ditangco RA, Ebasone PV, Eley B, Euvrard JG, Fatti G, et. al. Transition to dolutegravir-based ART in 35 low- and middle-income countries: a global survey of HIV care clinics. *AIDS*. 2024 Dec 1;38(15):2073–2085. Epub 2024 Sep 26.
2. Trickey, A., Johnson, L.F., Fung, F. Bonifacio R, Iwuji C, Biraro S, Bosomprah S, Chirimuta L, Euvrard J, **Fatti G** et al. Associations of inter-annual rainfall decreases with subsequent HIV outcomes for persons with HIV on antiretroviral therapy in Southern Africa: a collaborative analysis of cohort studies. *BMC Infect Dis* 2023 Dec 19;23(1):889.

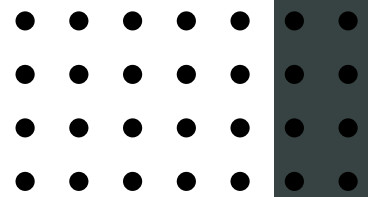
Conference presentations Oral:

1. Kitenge M, **Fatti G**, Eshun-Wilson I, Aluko O, Nyasulu P. Prevalence and trends of Advanced HIV Disease among Antiretroviral Therapy-naïve and Antiretroviral Therapy-experienced patients in South Africa between 2010–2021: A systematic review and Meta-analysis. 11th SA AIDS Conference 20–23 June 2023, Durban, Kwazulu-Natal, South Africa.

Poster:

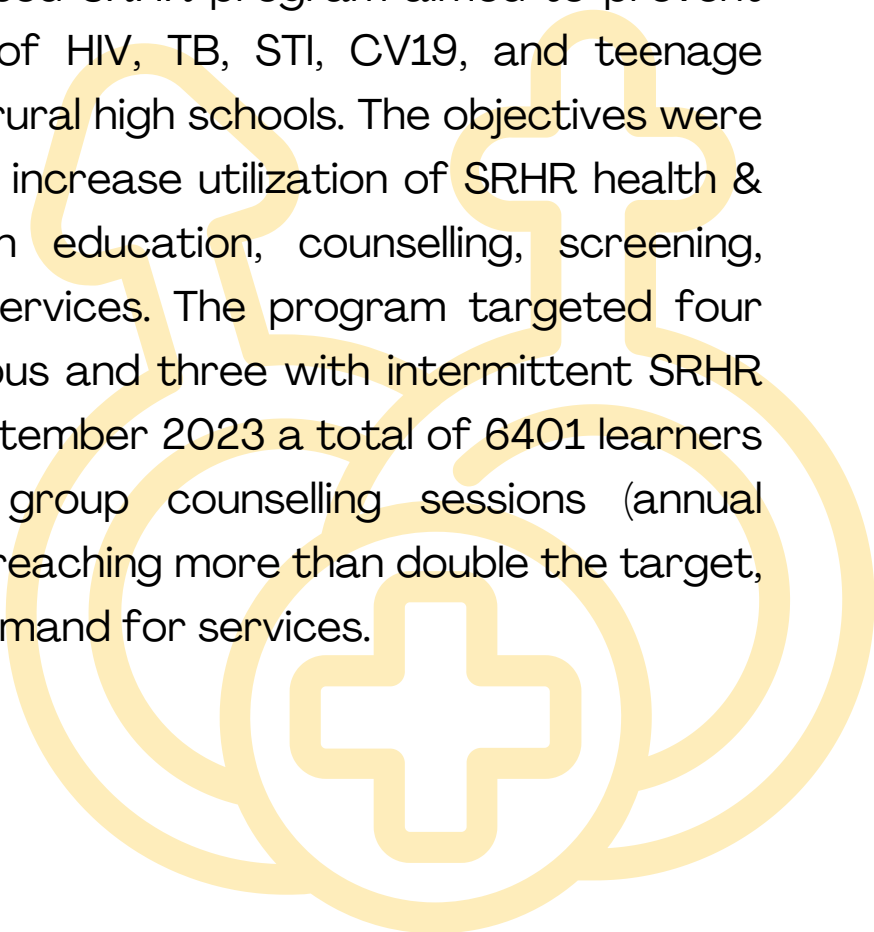
2. **Julius H, Jacobs M**, Meyer Z. Benefits of a comprehensive model of care for women living with HIV. International conference on HIV & Women. Washington DC, USA, April 2024
3. **Jacobs M**, Lachman A, Van Niekerk E. Infant Malnutrition and maternal mental health in home based care. World Public Health Nutrition Congress. London, England, June 2024

Integrated School-Based Sexual Reproductive Health & Rights (SRHS) Programme



In iLembe District, KwaZulu-Natal, KI delivered impactful school-based services despite budgetary constraints, achieving outstanding coverage, ART retention, and psychosocial support outcomes.

Kheth'Impilo continued to implement an integrated school-based Sexual Reproductive Health and Rights (SRHR) program in the iLembe District of KwaZulu Natal province with a limited budget. This integrated school-based SRHR program aimed to prevent and reduce the impact of HIV, TB, STI, CV19, and teenage pregnancy in a cluster of rural high schools. The objectives were to improve access to and increase utilization of SRHR health & welfare services through education, counselling, screening, referral, and linkage to services. The program targeted four high schools with continuous and three with intermittent SRHR services. As up to end September 2023 a total of 6401 learners were reached through group counselling sessions (annual program target n=3040), reaching more than double the target, highlighting the surge in demand for services.



Integrated School-Based Sexual Reproductive Health & Rights (SRHS) Programme

A headcount of 1553 individual counselling sessions was offered, and 671 learners sought healthcare at clinics through a referral from the school program. The ART retention and suppression rates were 100%. A total of 697 learners were provided psycho-social support, and 294 (42%) were referred for services.

Learners were assisted with Identity Documents (n=234), counselled and referred for substance abuse (n=66), and 577 females were provided menstrual hygiene products & support. The annual cumulative program coverage was 95%, 45% for family planning services, and the HIV Testing Service uptake rate was 52% for new visits. The annual teenage pregnancy rate was below 1%.

Given extreme environmental challenges manifesting as catastrophic floods in 2021 and 2022, and 2023, COVID-19, and food insecurity, this impoverished community remains vulnerable, particularly the adolescents. Failure to respond timeously runs the risk of reversing the gains made thus far concerning SRHR outcomes in this underserved group of adolescents.



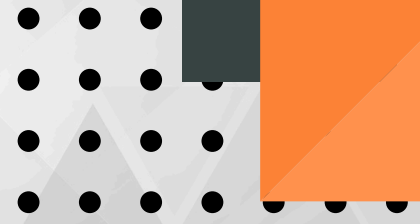
Community Orientated Primary Care (COPC)

Provided accessible, preventive and curative health services, including medication delivery and wellness hubs, across Cape Metro and rural West Coast districts.

COPC is an Integrated Health and Wellness Services project, funded by the Western Cape Department of Health (WCDOH). For the period, 1 Oct 2023 – 30 Sept 2024, Kheth'Impilo was awarded funding by the Western Cape Department of Health (WCDoH) to assist with the implementation of an integrated home and community-based service in Northern Tygerberg sub-structure (NTSS) and Khayelitsha and Eastern sub-structure (KESS). KI adopted the Community Orientated Primary Care (COPC) approach as devised by the WCDoH. The aim is to promote health and implementing preventative interventions at households and community level. KI employed 146 Community Health Workers (CHW's), 3 enrolled nurses and 12 professional nurses (PNs) during the period under review to meet the targets that WCDoH set.

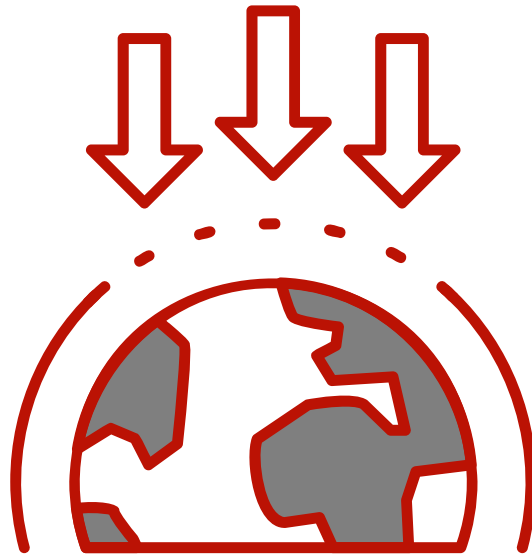
Outcomes included: 12624 household 1st visits were conducted across the 5 nodes during the reporting period, 51948 follow up visits (9 months post the initial visit) were conducted during the same period, across all 5 nodes. The head count total seen by the staff for the reporting period totalled 327612. 292560 clients were screened for TB by the CHWs and 99804 chronic medication parcels were delivered to the homes of patients who were unable to visit the health facilities; this was a late addition to the service package from WCDoH.

Substance Abuse System Project

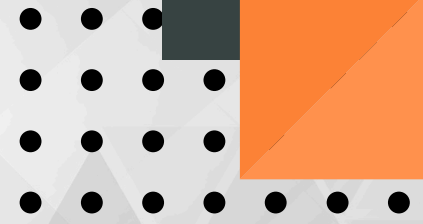
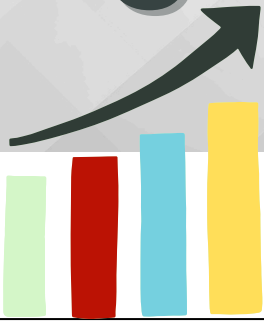


Overview

The Substance Abuse System Project entered Addendum Phase 1 during the reporting period to accommodate delays in the full national roll-out of the system, as outlined in the initial contractual framework. These delays were primarily due to the ambitious timelines set during the initial planning, which were reassessed and adjusted following insights gained during the pilot phase.



Substance Abuse System Project



Cont.

Progress and Achievements

Despite the need for adjusted timelines, the project successfully met its key deliverables. By September 2024, the Substance Abuse System had been implemented in 7 of the 9 provinces, reflecting significant progress toward national coverage. This milestone marks a major step forward in enabling streamlined, digital management of substance abuse services across South Africa.

In parallel, the project team initiated a complementary sub-project—the Substance Abuse Community Service (SACS) digital referral module. This initiative aims to modernise and digitise the referral process for service users requiring in-patient treatment, replacing the traditional paper-based system. The digital referral system is scheduled for phased implementation starting in Q2 2025.

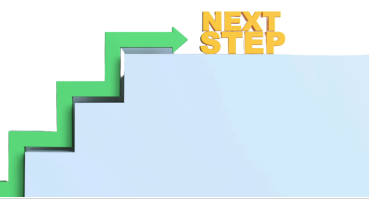


Substance Abuse System Project

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Strategic Decisions

During the year under review, the South African Medical Research Council (SAMRC) opted to continue using its own internal system for the processing of SACENDU surveillance forms, diverging from integration with the Substance Abuse System for this function.

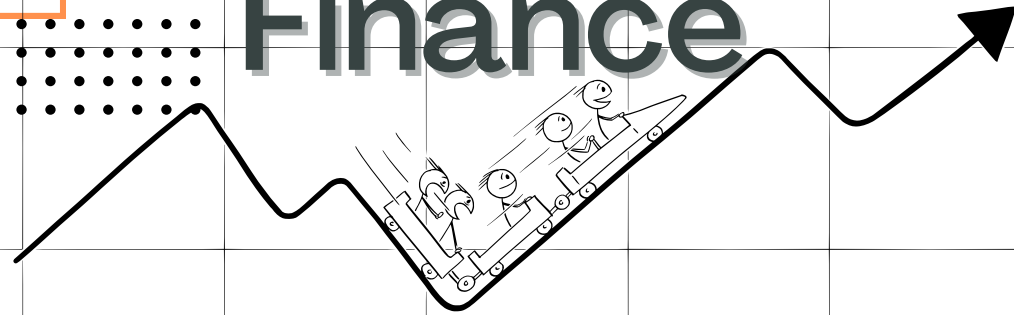


Outlook and Next Steps

The project remains on track to achieve full implementation in all 9 provinces by February 2025. In anticipation of national coverage, the project team has planned a comprehensive refresher training program, ongoing technical support, and the accommodation of enhancement requests. These activities will be carried out through to December 2025, ensuring sustainability, user engagement, and optimal system performance



Finance



In the financial year ending 30 September 2024 funding remains a challenge. Donor programmes came to an end which reduced funding significantly.

Donor Funding

Total Funding	FY23	FY24
USAID	22 828 418	759 442
Other	59 632 872	63 523 174
Total	82 461 290	64 282 616



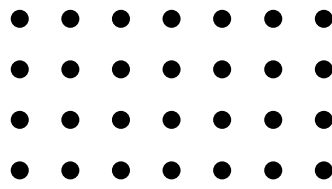
Funding reduced by 22%.

Awards

The following table lists the burn rate per funded programme programmes implemented during the fiscal year ending 30 September 2024. The table shows estimated award amounts for the full implementation period, life of project expenditure and the projected pipeline budget for the annual reporting period. Kheth'Impilo maintained a healthy burn rate throughout the implementation period of mentioned programmes.

#	Award	End Date	Months Remaining	Obligation	Total Expenses (Sep '24)	Remaining Obligated Balance	Burn Rate
1	DOHEAST	03-31-25	6	77 276 433	71 439 790	5 836 643	92%
2	DOHNORTH	03-31-25	6	50 292 026	46 640 934	3 651 092	93%
3	DOHMP	03-31-25	0	30 533 857	18 327 376	12 206 481	60%
4	DOHSW	03-31-25	6	14 348 047	9 226 486	5 121 561	64%
5	DOHWC	03-31-25	6	7 336 139	5 025 713	2 310 426	69%
6	FHI	10-31-23	0	118 661 819	118 661 819	-	100%
7	CDC	09-30-25	12	31 998 529	30 995 681	1 002 848	97%
8	MACAIDS	05-31-24	0	27 765 604	27 765 604	-	100%
9	NACOSA	06-30-25	9	17 033 465	8 824 998	8 208 467	52%
				375 245 919	336 908 401	38 337 518	90%

Human Resources



The **HR Department** serviced a staff complement of 642 individuals during the fiscal year ending September 2024. The organisation paid out to its staff just over R 58 million in salaries and benefits that included a 13th cheque, contributions to Pension, Medical Aid and Group life; where applicable.

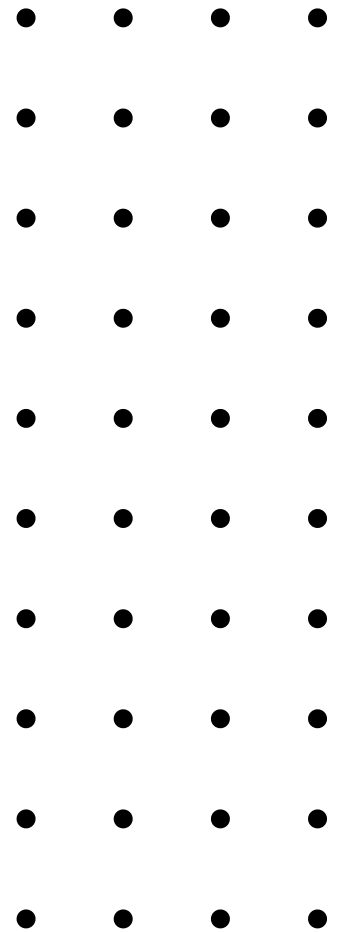
KI Staff demographic

	AFRICAN	COLOURED	INDIAN	WHITE	TOTAL
FEMALE	293	312	1	4	610
MALE	17	11	2	2	32
TOTAL	310	323	3	6	642

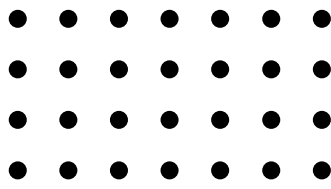
Staff Turnover

Termination Reason	Number
Abscondments	5
Dismissed	2
End of Contract	41
Resignations	42
Retirement	1
Retrenchments	4
Grand Total	95

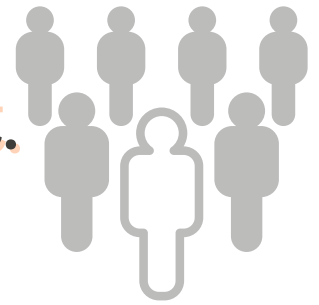
Terminations during period October 2023 to September 2024 were mainly due to contracts coming to an end. KI had minimal staff turnover, 40 in total.



Human Resources



Cont.



Human Resources highlights

The HR Department recruitment for this financial year was only maintenance recruitment. The organisation had no new funding that recruitment human resource intervention.

Our staff complement on the Integrated Home Based Care project funded by Western Cape Department of Health, is now a total of 548 servicing Cape Town's vulnerable communities.

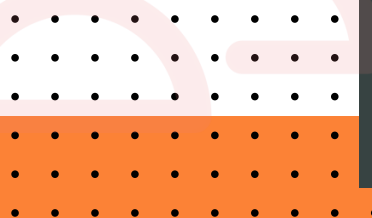
We employed 45 staff members on the IMAGINE project funded by NACOSA focusing on empowering of young women and adolescent school-going girls in Amajuba, Kwa-zulu Natal.

The Sexual reproductive school health project in Ndwedwe came to an end after nearly 15 years in the region. As such the organisation undertook S189 retrenchment process with the staff members working in that project.

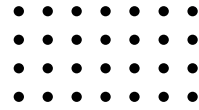
EMP501 was successfully submitted to SARS in May 2024 and staff members were issued with IRP5's.

USAID and CDC requires a quarterly report HRID, this deadline has been consistently met during the 2024 financial year.

Training at KI is on-going with a focus on improving workplace deliverables. The Community Care workers partake in sessions weekly to improve on service delivery. Head office has also conducted soft skills programme in order to further improve outputs.



Information Technology



The new financial year started with CHANGE. With design and much deliberation, we evolved our corporate logo.



“

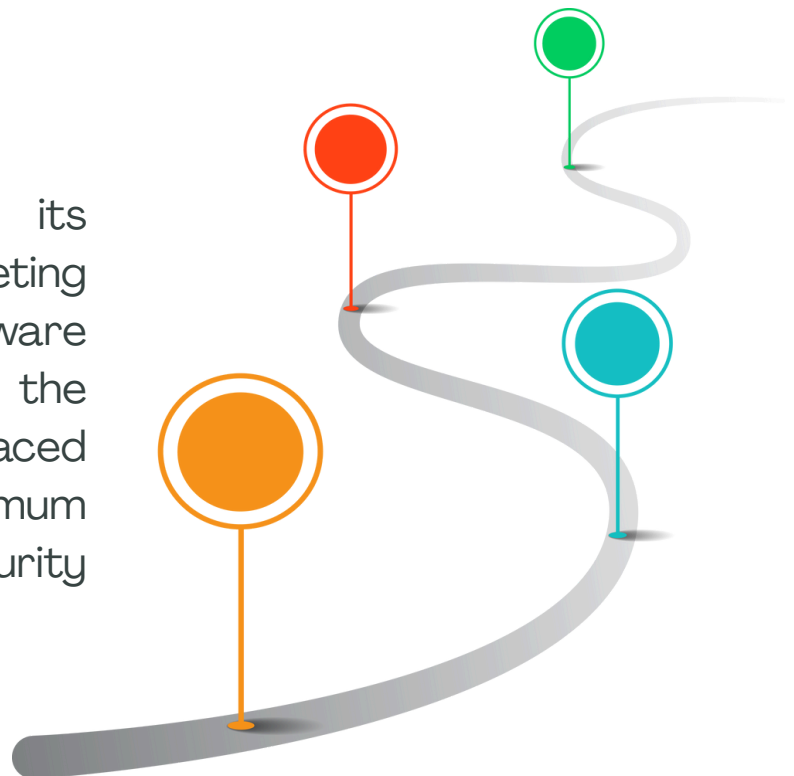
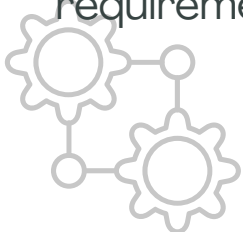
Our Circle of Life emblem is at the core of KI's ethos and we firmly believe in the passing on of the torch from the elders to the younger generation. Cradle to grave dignity in health for all.

We have chosen the splash of colour to reflect and celebrate our uniqueness and the collective vibrancy of our peoples Kheth'Impilo for all generations being central to our mission.

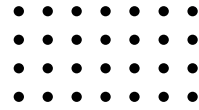
– Dr Ashraf Grimwood (CEO)

”

IT Support continued its roadmap journey, targeting threat vulnerable hardware equipment. Once identified, the laptop equipment was replaced with units meeting minimum hardware security requirements.



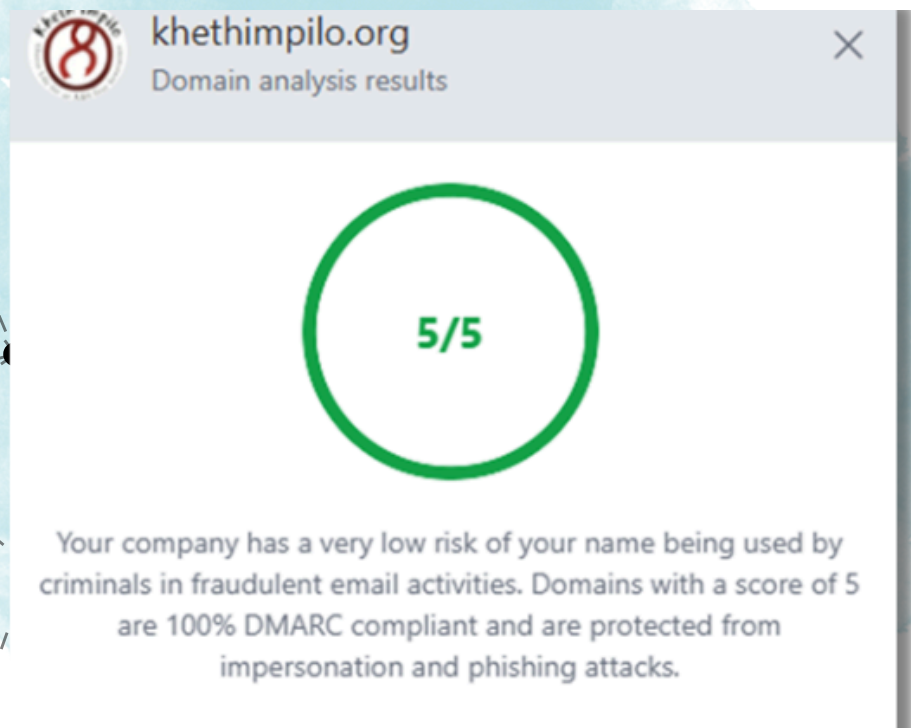
Information Technology



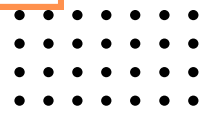
cont.

It has been well publicised and evident of the surge in cybercrimes, notably through the proliferation of ransomware assaults and persistent email phishing schemes. Sadly, government institutions have been targeted, including hospitals. Larger Corporates are not spared their wrath, despite the top security systems they have in place. Hackers have resorted to Spoofing potential businesses. In order to mitigate this threat, KI IT subscribed to an additional security layer service, ensuring legitimate email transfer protocols.

Analysis of infrastructure security implemented:



The growing threat of cyberattacks has intensified IT's efforts to raise end-user cyber awareness through scheduled global email briefings.



Information Technology

cont.

We were called upon to host a training workshop for the NACOSA Influencers. The purpose of the workshop was to show them:

- fundamental understanding of content creation
- how to effectively engage and communicate via various social media platforms.
- identify target audience and effectively interact
- a walkthrough of useful editing tools.



The ACC Programme requested mobile hardware devices, including data SIM packages. Before rollout, we requested a network site feasibility as to provide best effort network in the work areas. Phase 1 required the preliminary setup of 153 devices, including manual SOP and mobile device policies.



Year 2024 ending with a review of all IT related policies.