

CENKMED

ROTARY FAMILY HEALTH DAY REPORT 2017

Mass hearing testing, taken to the people

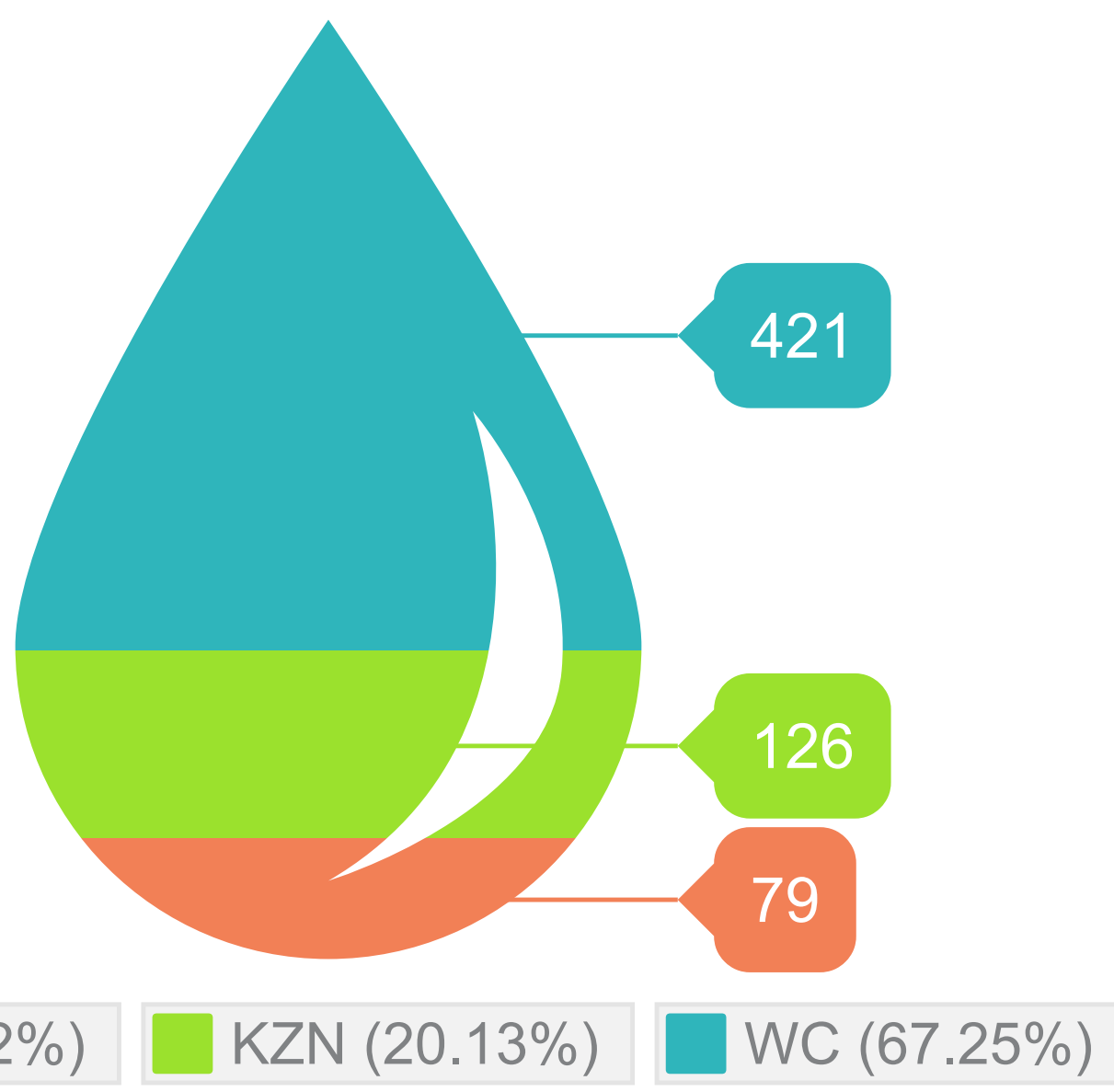


Sponsored by Gift of the Givers and Rotary Family Health day. We are grateful that so many people could be serviced in hearing healthcare.

Thank you for sharing our passion.

626 People Tested

over 3 days in 3 provinces.



People tested per province

Province Breakdown

Each province had its own unique setup, successes and challenges, though overall we were successful.

Mpumalanga, Thulumahashe Stadium

With low numbers visiting the testing stations due to arrangements for the day, which we were unaware of, we tested the least amount of people at this site, however due to partnering with the Starkey foundation this site had the highest percentage of people fully treated onsite making it a tremendous success.

Kwazulu Natal, Dawnridge Primary School

Regardless of the low turnout of patients and limitations on resources this site only performed threshold air conduction testing, this site still managed to test and accurately refer and treat many patients in the time allotted on site. Testing without full diagnostic had a clear effect on referral rate which strengthens our position on insisting on diagnostic testing at future events.

Western Cape, Matthew Goniwe Memorial High School

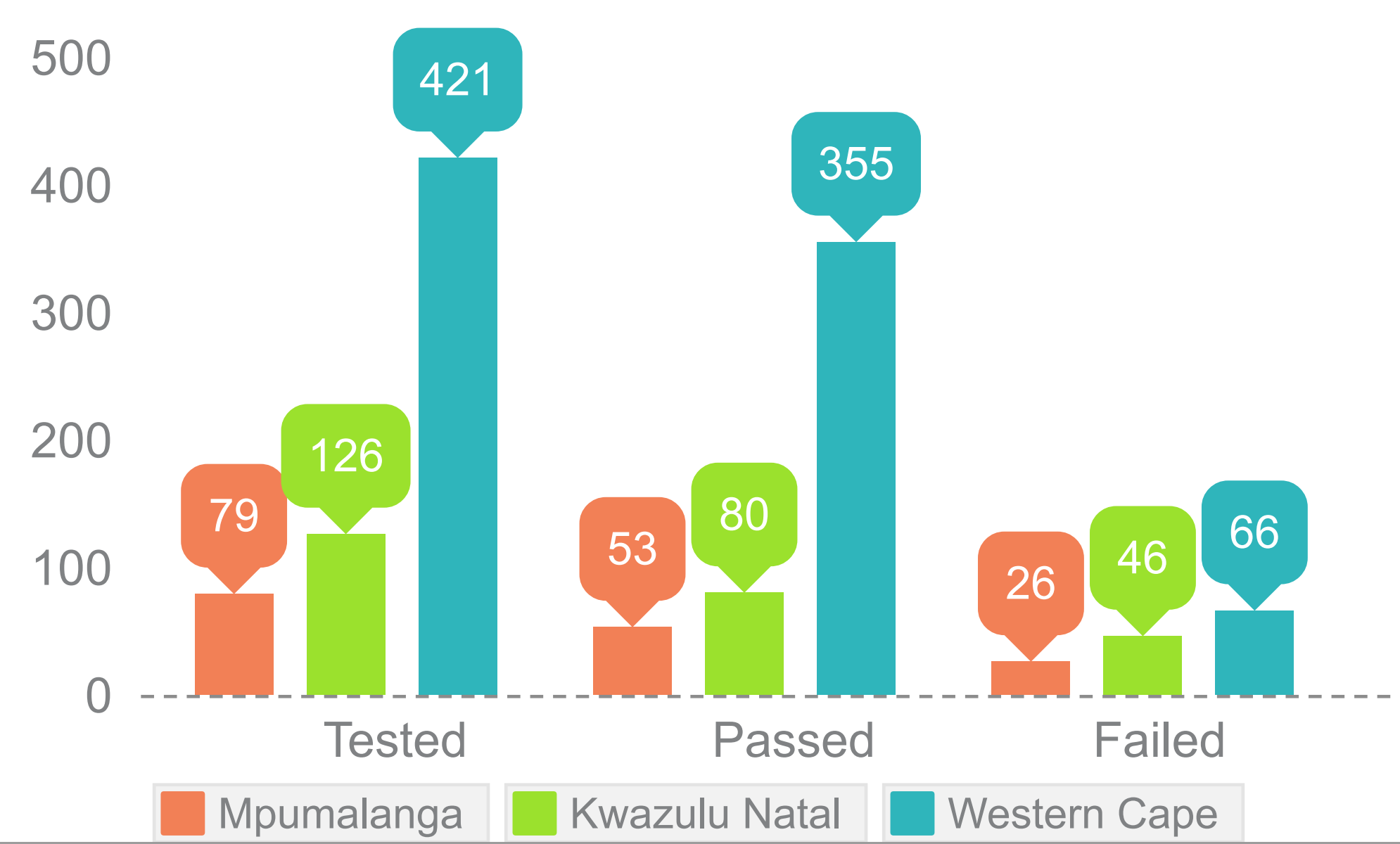
By far our most successful site, even with the limited time we were given to test in and the lack of professional resources this site showcased the true potential of this project and the impact it can have in a community. With only 8 audiometers and 3 Audiologist we fell only 300 tests short of the world record for hearing tests, which was achieved with 24 audiometers and approximately 30 audiologists.

Hearing Testing Overview of results

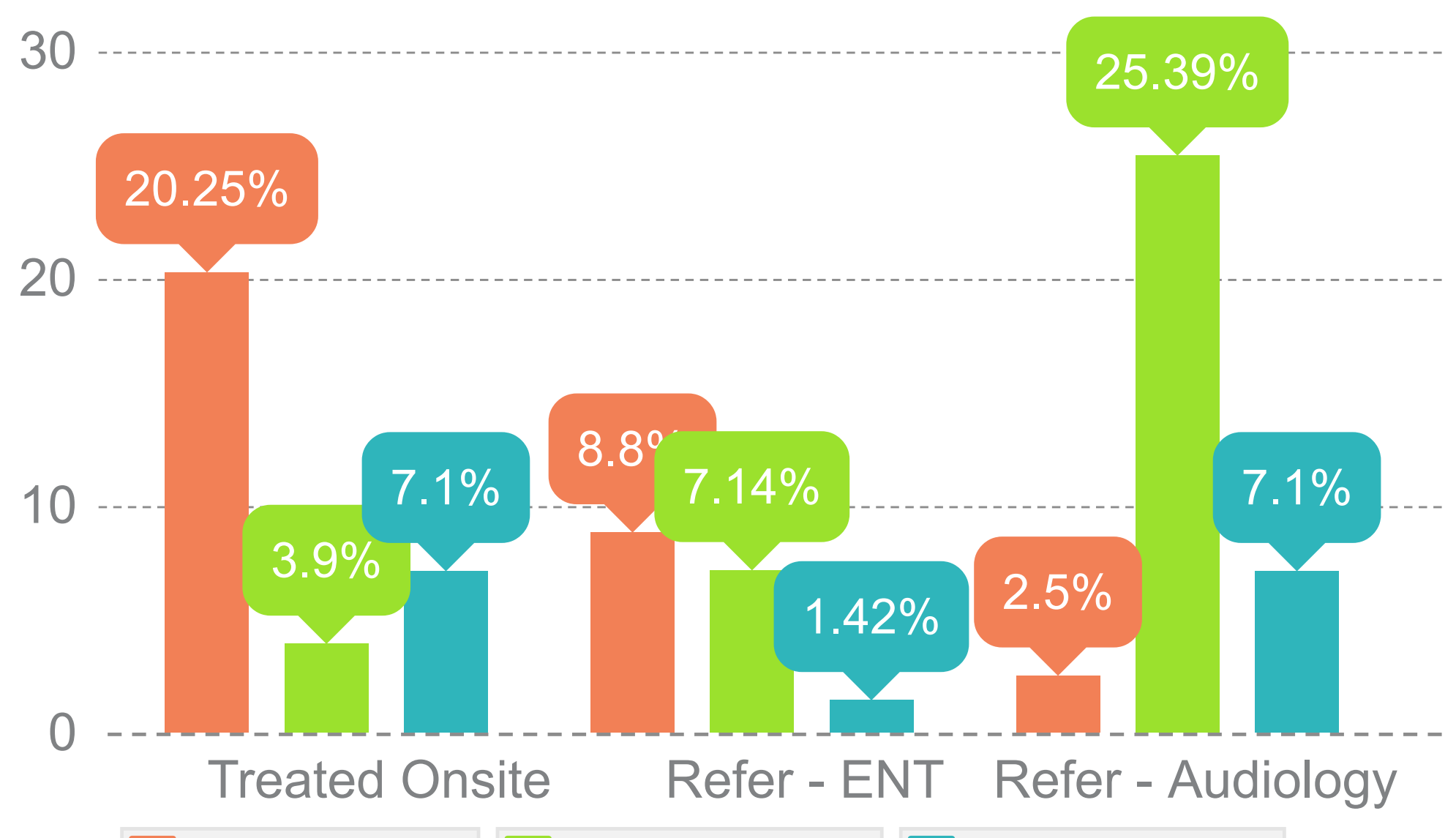
Although the high expectations of numbers were not achieved in testing due to a lack of attendance, time constraints and access to patients, we are happy to report that a significant amount of patients were seen, tested, treated and given referrals or recommendations.

We aimed to test, diagnose, treat and accurately refer all patients that came to do hearing tests, in this we succeeded in each of our locations. All the individuals that wanted testing at each event were accommodated.

Treatment on the day included some or all of the following; partial or full removal of wax and foreign bodies, prescriptions, hearing aid repairs and fittings.



Testing Results

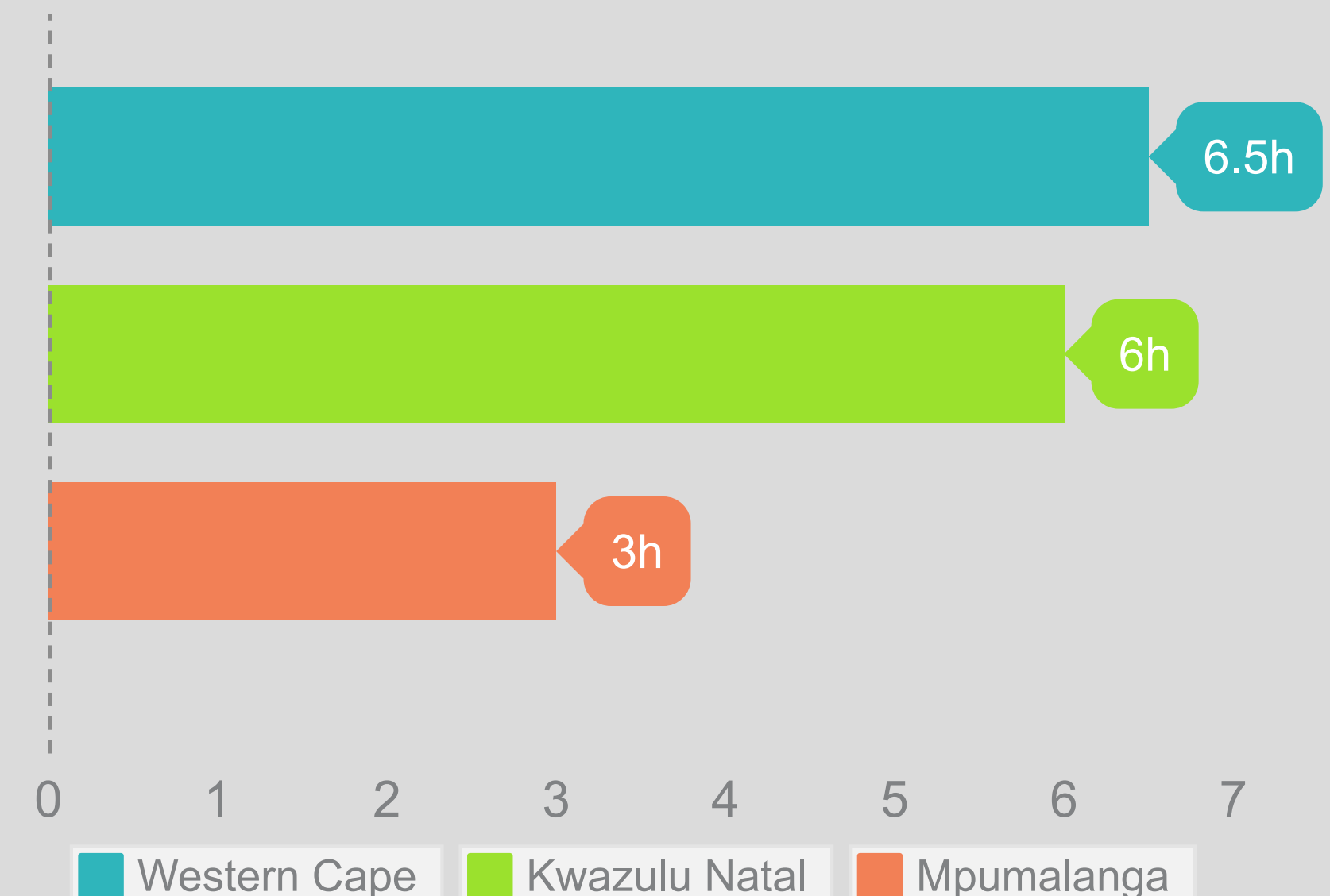


% Referral Statistics

Post testing analysis

A maximum redundancy of 30% was predicted, on the premises that each site would have between 6- 8 hours of testing time and approximately 400 - 600 patients available for testing. Unfortunately due to poor patient attendance, time and other unforeseen constraints we had not reached the amount of tests that we expected to do. Fortunately these constraints were external factors and does not speak to the applied procedure but more towards the unpredictable nature of the events.

Whilst 100% of people who signed up for hearing care were tested at each site, a major factor to the numbers that were tested was the allotment of time given to test at each site. We expected 7 - 8 hours of testing time though this was not reached, Mpumalanga was the most challenged in this aspect and thus in future time allotment will take more president in procurement and resource allocation.



Time allotted for testing

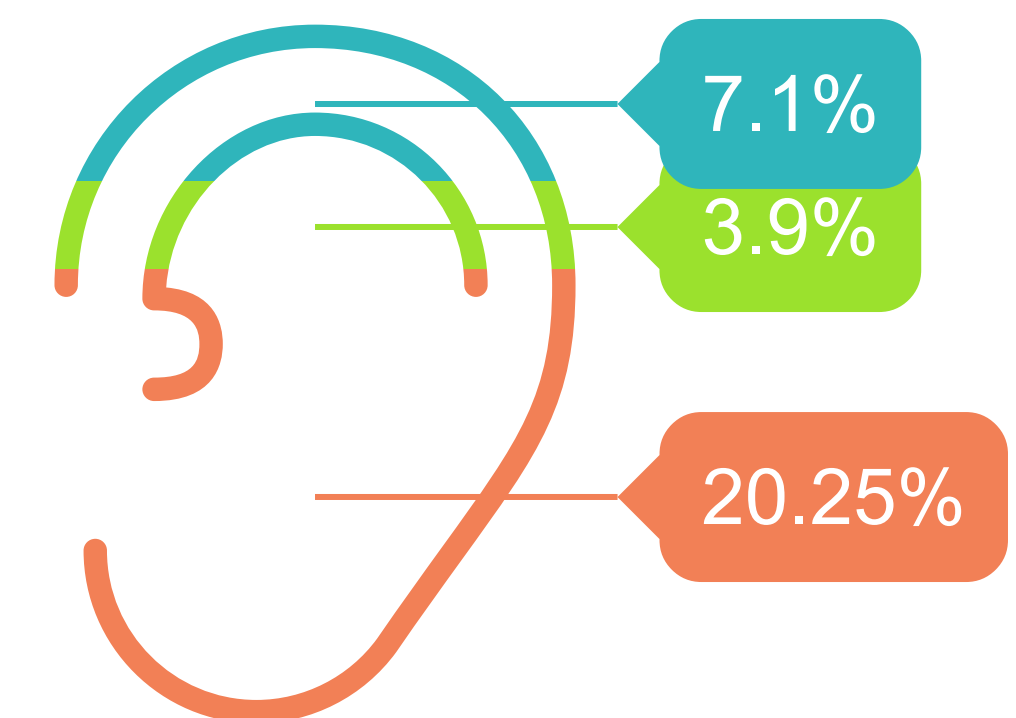
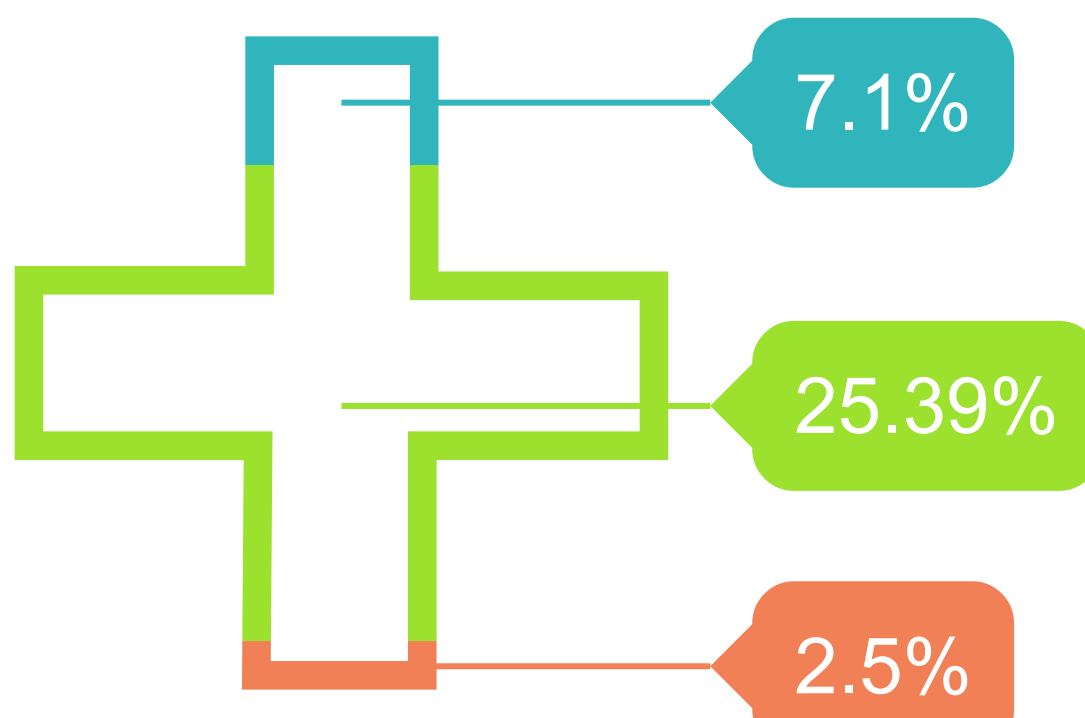
Summary

Firstly we do believe that this project had major successes and a definite learning curve, we thoroughly look forward to future partnerships with Gift of the Givers, as well as Rotary and the RFFA. The amount of people tested is certainly something to be proud of. We believe by using this information we will be able to reach more people in future.

Most significant statistics

Kwazulu Natal showed a very high referral rate of 25% due to using only pure tone thresholds compared to the other sites using full diagnostics testing.

Due to a partnership with the Starkey foundation in Mpumalanga, more people could be treated onsite, decreasing the need for follow up intervention.



Recommendations

Our main recommendation would be to analyse each projects costings individually instead of determining a per-head cost in order to manage expectation and budgetary constraints more easily. This will enable us to set a maximum of people that can be tested within a budget and not be concerned with headcount. More time to plan projects will also allow more trained personnel to be onsite, reducing the number of professionals needed onsite as well as improves the efficiency of the process. Securing resources or partnerships for onsite service delivery will serve as a key to a very successful campaign in future. Lastly with better planning and from what we learnt we will most assuredly spend more time in each site in order to give the maximum impact that we can next year.



If you have any queries or further insight regarding this report, please feel free to contact us.

Thank you!

CENKMED

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