

ANNUAL REPORT

2013



Driving the well-being of the industry.



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BACKGROUND

Trucking *Wellness*, an initiative of the National Bargaining Council for the Road Freight and Logistics Industry (NBCRFLI), is a primary healthcare delivery programme dedicated to the wellness of those employed in the road freight and logistics (RFL) industry. The programme is a sterling example of a successful and sustainable public-private partnership in that it is funded by the NBCRFLI together with various business partners who share the Council's vision of fighting the prevalence of HIV/AIDS in the RFL industry. The South African Department of Health provides some of the relevant medication.

The Programme was initially launched in 1999 by the NBCRFLI to create HIV&AIDS and STI awareness amongst long distance truck drivers and commercial sex workers. Over the years, it has evolved into a sustainable model of primary healthcare delivery to key populations through a blend of 5 mobile Wellness Centres and 22 fixed Wellness Centres situated on all major trucking routes. Aimed predominantly at truck drivers and women at risk, the 22 roadside Wellness Centres operate mostly at night while the 5 mobile Wellness Centres bring health screen tests to workplaces during working hours. The Wellness Centres offer HIV and AIDS awareness and education, STI diagnosing and treatment, primary healthcare, condom distribution, voluntary HIV testing with referrals to appropriate treatment service providers for secondary care and ARTs. All these services are offered free of charge. The Wellness Centres are staffed by highly skilled registered nurses and counsellors that provide much needed medical and emotional support.

The ultimate aim of the Programme is to shift the focus from mere prevention to integrated wellness with health seeking behaviour resulting in healthy lifestyles.

To date, *Trucking Wellness* has provided healthcare education to almost 620 000 long distance truck drivers, sex workers and community members. Over 254 000 patients were consulted and have received treatment and care with over 16 million condoms distributed to these key population groups over the past 14 years. In 2013 alone, 59 242 people received health education while 33 877 people received treatment and care at the roadside Wellness Centres. 16 663 patients accessed HIV testing through the roadside Wellness Centres as well as the mobile testing centres during the year.

Trucking Wellness enjoys the support of the four industry unions, as well as the Road Freight Association (RFA) and the National Employers' Association of South Africa (NEASA). It is managed by the Corridor Empowerment Project (CEP), on behalf of the industry, and has continued to experience year-on-year success since its inception. Through the Programme, many lives continue to be saved and improved.



22
NATIONAL
ROADSIDE
WELLNESS
CENTERS
TO
CHOOSE
FROM



WELLNESS CENTRE OPENING TIMES

CLINIC	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
Alrode North	07h00 - 16h00	-	-	07h00 - 16h00	07h00 - 14h00
Alrode South	-	-	07h00 - 15h30	-	-
Beaufort West (N1)	16h00 - 22h00	18h00 - 24h00	18h00 - 24h00	16h00 - 22h00	10h00 - 16h00
Colesberg (N1)	16h30 - 22h30	16h30 - 22h30	16h30 - 22h30	16h30 - 22h30	16h30 - 22h30
East London (N2)	18h00 - 24h00	18h00 - 24h00	18h00 - 24h00	18h00 - 24h00	17h00 - 22h00
Epping (N1)	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00
Hanover (N1)	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00
Harrismith (N3)	16h00 - 22h00	16h00 - 22h00	16h00 - 22h00	16h00 - 22h00	16h00 - 22h00
Kokstad (N2)	10h00 - 16h00	16h00 - 22h00	16h00 - 22h00	16h00 - 22h00	10h00 - 16h00
Komatipoort (N4)	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00
Marianhill (N3)	16h00 - 22h00	16h00 - 22h00	16h00 - 22h00	16h00 - 22h00	16h00 - 22h00
Moorivier (N3)	18h00 - 24h00	18h00 - 24h00	18h00 - 24h00	18h00 - 24h00	17h00 - 23h00
Mthatha (N2)	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00
Musina (N1)	09h00 - 16h00	09h00 - 16h00	09h00 - 16h00	09h00 - 16h00	09h00 - 16h00
Port Elizabeth (N2)	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00
Roodekop	08h00 - 15h00	08h00 - 15h00	08h00 - 15h00	08h00 - 15h00	08h00 - 15h00
Tugela (N3)	19h00 - 01h00 (Sun)	19h00 - 01h00 (Mon)	19h00 - 01h00 (Tues)	19h00 - 01h00 (Wed)	16h00 - 22h00 (Thurs)
Ventersburg (N1)	17h00 - 23h00	13h00 - 19h00	13h00 - 19h00	17h00 - 23h00	13h00 - 19h00
Villiers (N3)	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00
Wadeville	-	07h00 - 15h30	-	-	-
Warden (N3)	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00	17h00 - 23h00
Zeerust (N4)	18h00 - 24h00	18h00 - 24h00	18h00 - 24h00	18h00 - 24h00	18h00 - 24h00



MESSAGE FROM THE NBCRFLI

■ **Tersia Ströh**
Acting National
Secretary of the
NBCRFLI

As the National Bargaining Council for the Road Freight and Logistics Industry (NBCRFLI), we are proud of the continued contribution that the *Trucking Wellness* Programme has made to the fight against the plight of HIV/AIDS in South Africa. For over 15 years, the Programme has made a remarkable difference in the lives of individuals within the road freight and logistics industry through education and treatment initiatives.

Numerous studies have shown that long distance truck drivers are amongst the major contributors to the spread of HIV/AIDS in Sub-Saharan Africa. This is often driven by the vulnerability of truck drivers who seek comfort from sex workers while transporting essential goods along major transportation routes over long periods of time. On the other end of the scale, sex workers are often led into prostitution as a result of extreme poverty which often encourages high risk behaviour such as unprotected sex which escalates the spread of HIV/AIDS within the industry.

Since 1999, the *Trucking Wellness* Programme has worked in collaboration with industry partners, local government and various health departments to deliver high quality HIV/AIDS management services to long-distance truck drivers, commercial sex workers and those at risk, such as driver spouses and partners.

The 22 *Trucking Wellness* Centres have a strong presence at numerous truck stops across major routes in South Africa, including its borders. These centres are supported by 5 Mobile Wellness Centres that focus on the well-being of trucking support staff and reach beyond just the truck driver into the work place. This initiative also potentially extends beyond the trucking industry by spreading the message of wellness and information about HIV and AIDS into allied industries.

During 2013, more than 33 000 truck drivers and women at risk were examined at the Wellness Centres and more than 1.3 million condoms were distributed.

Since its inception, *Trucking Wellness* has evolved into providing a holistic approach to health and wellness. The highly trained nurses and counsellors are always on hand to provide a range of free primary health care services to clinic visitors, including TB and malaria awareness, education, screening and referrals for treatment and care as well as

screening tests for blood pressure, blood sugar, cholesterol and body mass index. Other services include education, training and testing for HIV/AIDS and sexually transmitted infections (STIs) as well as condom distribution, anti-retroviral (ARV) treatment, counselling and emotional support.

Apart from the success of our **Trucking Wellness** Programme, the National Bargaining Council for the Road Freight and Logistics Industry, who can boast a national footprint of 18 offices country wide, also celebrated many other accomplishments in 2013.

One of the achievements I am particularly proud of is the launch of our first ever employee publication, *Ziwaphi on the Road*, a newspaper designed specifically to meet the information needs of our employee members. We have received an overwhelming response to the newspaper since its launch.

In addition to the launch of *Ziwaphi*, we revamped *Tseleng* – our employer publication – to meet the information needs of our employer members. *Tseleng* has evolved into a thought provoking, bi-annual e-magazine that covers all aspects of the road freight and logistics industry, including international transport trends.

At the NBCRFLI we recognize the important role that the human resource and payroll personnel play in helping employers comply with the Collective Agreements. They also assist us in communicating Council-related information to employee members. In an effort to make their jobs easier, we began distributing a monthly electronic newsletter (called NCRFLI News) to highlight specific Council-related issues and decisions that impact directly on them.

The launch of our mobile application was another first for us as an organisation. The app allows our members to access council-related news at any time, from just about anywhere.

The health and well-being of our employee members continues to be of importance to us; during 2013 we introduced exciting new changes to the Wellness Fund Health Plan benefits. The Plan now entitles principal members, together with one spouse, to a range of improved benefits, such as emergency medical treatment in a private hospital.

Another highlight for us was the prestigious accreditation we received from the Commission for Conciliation, Mediation and Arbitration (CCMA) Body in June 2013. With the accreditation, we are able to conduct conciliations and arbitrations, including pre-dismissal arbitrations, from 1 June 2013 to 29 February 2016. This decision was taken following the high quality of dispute resolution services we have provided over the years.

After the establishment of our business online service, when it became mandatory for all employers to submit all returns online in July 2012, we saw the need to develop a free training programme to guide our members on how to use the online service. The free programme has helped to ensure that employers are able to confidently navigate and utilise the online system effectively.

The value of our website, www.nhcrfli.org.za, also continued to grow with the addition of important and relevant information to the site. This

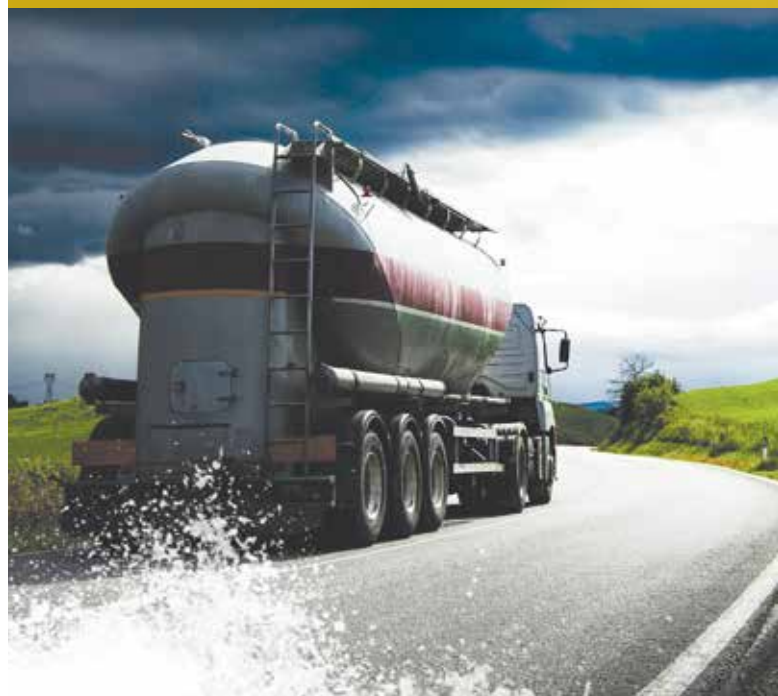
included specific service area contact telephone numbers, our online service query function, a starter pack of information for new members, an in-depth explanation of Compliance Administration (which is one of our service offerings), as well as making all the latest newsletters available on our website.

Going into the year ahead, we pledge to continue supporting the **Trucking Wellness** Programme as it seeks to increase its efforts in combating the spread of HIV/AIDS and other diseases within the road freight and logistics industry. I strongly believe that the Programme will continue to touch lives and encourage wellness within the road freight and logistics industry. We also look forward to introducing further value-adds that will continue to improve our service offerings to our members.



Tersia Ströh

“During 2013, more than 33 000 truck drivers and women at risk were examined at the Wellness Centres and more than 1.3 million condoms were distributed.”



PARTNERS

A sincere thanks goes to all our partners who help to make this Programme the success that it is:





*“Over the years, it has evolved into
a sustainable model of primary
healthcare delivery...”*



ACTIVITIES

WORKING WELLNESS COMMITTEE (WWC)

A Working Wellness Committee (WWC) was formed in April 2012 as part of the focus on quality improvement in the healthcare services offered through *Trucking Wellness*. The purpose of the Wellness Working Committee is to assist *Trucking Wellness*'s top management through information and guidance in clinical management that will enhance or improve the *Trucking Wellness* Programme.

The Working Wellness Committee functions on the basis of the following values:

- The WWC values clinical input from all clinical practitioners in South Africa.
- The WWC has passion for communities within South Africa.
- The WWC is working towards continued improvement of skill and service through sharing and learning.
- The WWC will identify and share best practices.

The WWC meets on a quarterly basis, with the National Nursing Service Manager as the Chair of the Committee. The Committee consists of Registered Nurses representing five or more provinces in the country, the National Nursing Service Manager and an outside clinical consultant.

The first focus of the WWC was to standardise the healthcare services delivered in each of the 22 Roadside Wellness Centres. This was achieved through identifying 'PALSA Plus' as the clinical service delivery methodology to be used by the Registered Nurses. PALSA Plus is also applied in Government Primary Care Clinics where Registered Nurses function without the direct input of a medical practitioner. The group decided that all the Registered Nurses will use the current Primary Care Handbook of 2008 as the foundation for their clinical practice, but that PALSA Plus must be the document and methodology used within the Wellness Centres. It was also decided that Standard Operating Procedures (SOPs) are crucial for quality service delivery. With the PALSA Plus covering most of the working procedures to be followed in the clinical practice of HIV/AIDS, TB, ASTHMA/COPD and STIs, the group identified and developed 10 SOPs that are most needed and relevant.

The group further agreed that the following clinical interventions must always form part of the clinical practice of the Registered Nurses in the Wellness Centres:

- Vital signs (respiration, heart rate/ pulse, temperature and blood pressure).
- HCT offering (offer and motivate patient to be tested for HIV).
- TB screening (4 TB screening questions).

The above mentioned not only standardises the primary healthcare services delivered in the roadside Wellness Centres, but also helps to ensure primary care delivery of the highest standard.

In order to ensure adequate and appropriate knowledge and skill of the Registered Nurses in the Roadside Wellness Centres, *Trucking Wellness* management needs to facilitate continuous in-service education based on the needs of the Registered Nurses and patients. The WWC developed clinical codes for the diagnoses most used. These codes were built into the data management system and support the clinical practice methodology as per PALSA Plus. Analyses of this data allows for accurate planning and later peer review of patient consultations, which will ultimately lead to only the highest standard of primary health care delivered through *Trucking Wellness*.

The WWC further drafted a list of items required for the legal and optimum functioning of the Wellness Centres, including a list of qualifications and experiences they propose must be a requirement for all Wellness Centre Registered Nurses and Coordinators when employed.

The establishment of the Working Wellness Committee has not only improved the quality of care delivered through *Trucking Wellness*, but has also improved the buy-in from the Registered Nurses as they now have a channel through which they are able to raise their clinical concerns and provide valuable input.

SA AIDS CONFERENCE 2013

The 6th SA AIDS Conference took place at the International Convention Centre in Durban from 18 – 21 June 2013. It brought together clinicians, academics, civil society, government and the South African community at large to discuss last year's conference theme: "Building on Successes: Integrating Systems". This entailed examining how to close the gaps where they exist and ensuring that the existing systems run optimally.

In line with this theme, *Trucking Wellness* and its successes were showcased at the Conference through two poster displays. The first poster explained *Trucking Wellness*' Data Management System while the second poster focused on *Trucking Wellness* as a successful model for integrating responses in the transport sector.

Trucking Wellness
Driving the well-being of the industry.

NBCRF
Your Road Freight Partner.

TRUCKING WELLNESS AS A SUCCESSFUL MODEL FOR INTEGRATING RESPONSES IN THE TRANSPORT SECTOR

WHAT IS TRUCKING WELLNESS?
Primary healthcare delivery programme dedicated to the wellness of those employed in the Road Freight and Logistics Industry funded by industry through the NB-CFCE, business & individuals from South Africa, European Foundations, corporate and international funders. The South African Department of Health provides all the relevant medication.

BACKGROUND
Corridor Employment Project has developed a sustainable model of primary health care delivery to key populations through Trucking Wellness. Aimed at truck drivers and women at risk, Trucking Wellness' 22 roadside Wellness Centres along all national roads at truck stops offer primary care, health screening, HIV testing, TB screening, health screen tests to workplaces during working hours. The Wellness Centres offer HIV and AIDS awareness and education, TB diagnosis and treatment, primary health care, condom distribution, voluntary HIV testing with referrals to appropriate treatment service providers for workplace care and ART. All these services are offered free of charge. The Wellness Centres are staffed by highly skilled registered nurses and community care workers who provide much needed support both medically and emotionally. This programme shifts the focus from mere prevention to integrated wellness with health seeking behaviour leading to healthy lifestyles for all.

To date Trucking Wellness has provided healthcare education to 500 403 long distance truck drivers, sex workers and commercial travellers, 218 360 patients were contacted and have received treatment and care with almost 15 million condoms distributed to these key population groups over the past 12 years. In 2012, some 57 520 people received health education and 33 435 received treatment and care at the roadside Wellness Centres. 18 470 patients accessed HIV testing through the roadside Wellness Centres as well as the mobile testing centres during the year.

During 2012 Corridor Employment Project was approached by various organizations to partner with Trucking Wellness in specific funded projects in HIV and TB prevention, treatment and care. Trucking Wellness was a perfect partner as the fact that it is a well-managed programme with a well-developed national infrastructure and highly skilled healthcare workers. These attributes provided the opportunity for the various partners to utilize the programme in order to secure funding and manage implementation for additional projects that are most cost effective and wide spread in the existing framework of Trucking Wellness.

METHODS
In 2012 Trucking Wellness partnered with the following organisations:

- Central Medical Research Board in order to ensure the driver testing to family testing in the Eastern Cape
- University Research Co to deliver a comprehensive national TB screening, testing, diagnosis and referral service
- SABON to increase HIV testing in Bona Zulu Hotel funded by the Global Fund
- SACFOP and Corridor HIV Management to provide long distance truck drivers access to free medical male circumcision funded by CDC at the 22 roadside Wellness Centres nationally.

RESULTS
The following outcomes have been achieved through these partnerships:

- Alignment with and support to government healthcare delivery strategy and services
- Provide vehicle for other organizations to secure funding and implementation for other projects
- Reduced cost for project delivery
- Integrated and accessible healthcare services - HIV and TB to key populations
- Improved and more comprehensive healthcare services delivered to target audience
- Increase number of patients
- Optimal use of facilities and resources
- Up-skill healthcare workers
- Capacity building in project management
- Employ local volunteers leading to poverty alleviation in local communities
- Increased data collection and trends analysis
- Increased profiling of Trucking Wellness in transport and health sectors (business, government and civil society)
- Improve sustainability of the programme.

CONCLUSION
Healthcare services for specific key population in South Africa remain scarce and fragmented. The 2012 Corridor Strategic Plan (COP Key Population Guidelines) states that "The prevention of new HIV infections and the treatment of those already infected in high risk groups is a key element of the national Strategic plan on HIV, STI and TB. One of the most effective means of controlling the HIV epidemic in South Africa is through the implementation of targeted interventions amongst people most vulnerable to HIV known as Key Populations. These guidelines should be integrated into general care and as part of Primary Health Care".

Trucking Wellness is a well-structured and managed NGO that provides an ideal base for specific projects to set out to the transport industry with special focus on long distance truck drivers and sex workers in South Africa. There are multiple advantages in these partnerships formed with other organizations to secure funding for and implement specific projects to these key populations most at risk of HIV and TB.

As a role player CEP is already supporting and is ideally positioned to complement and expand the government's services with capacity infrastructure and technical skills. These results reflect the success of an appropriate approach by CEP in the delivery of healthcare to key populations that is comprehensive and integrated.

cep
SWEDEN

POSTER 1: TRUCKING WELLNESS' DATA MANAGEMENT SYSTEM

During the first ten years of the *Trucking Wellness* Programme, all clinical results and consultations were manually recorded and stored. This not only provided multiple logistical challenges, but also caused a clinical challenge in that no patient record sharing could occur between the registered nurses at the 22 different roadside Wellness Centres. This fact hampered continuous care delivery to the long distance truck drivers utilising the healthcare services tailored around their healthcare needs.

In 2011, the CEP identified a clinical data management system called SysCare which provides real time clinical data management through biometrics. The system was developed for and is currently being used in certain Government Primary Healthcare Clinics. In 2011 it was rolled out to the 22 *Trucking Wellness* roadside Wellness Centres.

The implementation of the system has had multiple advantages for all stakeholders in the programme:

- Real time data uploads.
- Improved data management.
- Increased data analysing and trends identifying possibilities.
- Improved reporting to shareholders.
- Minimal paper records to store.
- Improved patient confidentiality.
- Reduced patient identity fraud.
- Reduced time for nursing record keeping.
- Reduced patient waiting time.
- Improved stock management.
- Improved care delivery due to continuous care delivery.
- Reduced management time.
- Reduced operational costs.
- Alignment with and support to government healthcare delivery strategy and services.
- Optimal use of resources.
- Improved healthcare services delivered to target audience.
- Up-skill healthcare workers.
- Increased ability to close the gap with the HIV management services.
- Improve sustainability of the programme.
- Capacity building in project management.

The implementation of the new system has however not been without challenges. Therefore using the system optimally was the focus of 2013, as utilisation of the system by the Registered Nurses proved to be more difficult than anticipated. More training and change management was required. There was also a drive to integrate the patient records at the HIV management service provider in order to bridge the gap and integrate the services completely. This has allowed the *Trucking Wellness* Registered Nurses to use every face-to-face contact with an HIV infected driver optimally.





UP-SCALING OF HEALTHCARE DELIVERY SERVICES THROUGH THE IMPLEMENTATION OF AN ELECTRONIC DATA MANAGEMENT SYSTEM IN TRUCKING WELLNESS

WHAT IS TRUCKING WELLNESS?
A primary healthcare delivery programme dedicated to the wellness of those engaged in the Road Freight and Logistics industry funded by industry through the NBCRFLL, business i.e. Mercedes-Benz South Africa, Imperial and Sun. The Department of Health provides all the relevant medication.

BACKGROUND
Trucking Wellness provides HIV prevention, health screening and primary care services to long distance truck drivers, business in the transport sector, sex workers and community members on the national roads.

Trucking Wellness operates in all 9 provinces with healthcare services developed and delivered to one specific target audience. The 22 roadside Wellness Centres and 15 mobile Health Screening Centres provides access to healthcare services at roadside and at times most suitable to the target audience.

To date Trucking Wellness has provided healthcare education to 560 000 long distance truck drivers, sex workers and community members. 210 360 patients were contacted and have received treatment and care with limited 15 million condoms distributed to these key population groups over the past 15 years.

In 2012 alone 27 150 people received health education and 23 628 received treatment and care at the roadside Wellness Centres. 16 470 patients accessed HIV testing through the roadside Wellness Centres as well as the mobile testing centre during the year.

All the above mentioned results and consultations were manually recorded and stored. This provided multiple logistical challenges, but most of all it provided a clinical challenge in that there was no patient records sharing between the registered centres at the 22 different roadside Wellness Centres. This had hampered continuous care delivery to the long distance truck drivers utilising the healthcare services delivered around their healthcare needs.

METHODS
In 2011 CEP identified a clinical data management system, SyCare that will be able to provide real time clinical data management through biometrics. The system was developed for and is currently being used in certain Government Primary Healthcare Clinics.

The system implementation process followed at the roadside Wellness Centres:

- Identify most appropriate system
- Customise system
- System roll-out
- Hardware testing
- Reporting requirements and development
- Monitoring and evaluation

The system implementation in the mobile health screening centres:

- Brief on system requirements
- System development
- Testing
- Demo
- Training
- Employer training
- Reports development
- Monitoring and evaluation.

The system offers 24 hour technical support to all the users.

RESULTS
The following outcomes have been achieved through the implementation of the real time biometric data management system:

- Real time electronic data management system
- Real time data analysis and trends identifying possibilities
- Improved data management
- Improved reporting to shareholders
- Improved patient records to date
- Improved patient confidentiality
- Reduced patient identity fraud
- Reduced time for printing record keeping
- Reduced patient waiting time
- Improved stock management
- Improved care delivery due to continuous care delivery
- Reduced management time
- Reduced operational costs
- Alignment with and support to government healthcare delivery strategy and services
- Optimal use of resources
- Improved healthcare services delivered to target audience
- Empowered healthcare workers
- Increased ability to close the gap with the HIV management services
- Improve sustainability of the programme
- Capacity building in project management.

CONCLUSION
While NCRFL have restricted financial resources and improved technology often is not a priority in funding. It is also an expensive investment. The Swedish International Development Cooperation through the Embassy of Sweden South Africa had the foresight to fund the ground breaking initiative in funding the development and implementation of a real time biometric clinical data management system in the 22 Trucking Wellness roadside Wellness Centres and data management system for the 15 mobile health screening centres.

The implementation of the system has multiple advantages for all stakeholders in the programme. It has however not been without any challenges. Using the system optimally will be the focus of 2013 as utilization of the system by the Registered Nurses proved to be more difficult than anticipated. More training and change management is required. There is also a drive to integrate the patient records at the HIV management service provider in order to bridge the gap and integrate the services completely. This will allow the Trucking Wellness Registered Nurses to use every face-to-face contact with an HIV infected driver optimally.

These results reflect the success of an appropriate approach by Corridor Engagement Project to specific target audiences e.g. long distance male truck drivers.




POSTER 2: TRUCKING WELLNESS AS A SUCCESSFUL MODEL FOR INTEGRATING RESPONSES WITHIN THE TRANSPORT SECTOR

During 2012, *Trucking Wellness* was approached by various organisations to partner with it in specific funded projects in HIV and TB prevention, treatment and care. *Trucking Wellness* was a perfect partner due the fact that it is a well-managed programme with a well-developed national infrastructure and highly skilled healthcare workers to reach long distance truck drivers and sex workers in South Africa. These attributes provided an ideal opportunity for the various partners to utilise the programme in order to secure funding and manage implementation for additional projects that are cost effective and wide spread in the existing framework of *Trucking Wellness*.

In 2012 *Trucking Wellness* partnered with the following organisations:

- Catholic Medical Mission Board in order to extend the driver testing to family testing in the Eastern Cape.
- University Research Co to deliver a comprehensive national TB screening, testing, diagnosing and referral service.
- South African Business Coalition on HIV/AIDS (SABCOHA) to increase HIV testing in KwaZulu-Natal funded by the Global Fund.
- Southern African Clothing and Textile Workers Union (SACTWU) and CareWorks HIV Management to provide long distance truck drivers with access to free medical male circumcisions funded by Centre for Disease Control and Prevention (CDC) at the 22 roadside Wellness Centres nationally.

The following outcomes have been achieved through these partnerships:

- Alignment with and support to government healthcare delivery strategy and services.
- Provision of a vehicle for other organisations to secure funding and implementation for other projects.
- Reduced cost for project delivery.
- Integrated and accessible healthcare service – HIV and TB to key populations.
- Improved and more comprehensive healthcare services delivered to target audience.
- Increased number of patients.
- Optimal use of facilities and resources.
- Up-skill of healthcare workers.
- Capacity building in project management.
- Employment of more healthcare workers.
- Employment of local volunteers leading to poverty alleviation in local communities.
- Increased data collection and trends analysis.
- Increased profiling of *Trucking Wellness* in transport and health sectors (business, government and civil society).
- Improved sustainability of the Programme.



■
East London

Kokstad
■

WORLD AIDS DAY

Each of the 22 roadside Wellness Centres planned and implemented their own World Aids Day interventions. These were based on the needs of the target audiences and drew from the available resources within the surrounding communities. Interventions mainly focussed on HIV information sessions and HIV Counselling and Testing (HCT). NBCRFLI and *Trucking Wellness* branded t-shirts were handed out to people who participated in the HCT.



Moorivier
■



■
Warden



“...training topics included Gender Based Violence, Medical Male Circumcision as well as Commercial Sex Workers Legislation and Treatment.”

TRAINING

TRUCKING WELLNESS ANNUAL WORKSHOP 2013

The annual *Trucking Wellness* Workshop was held at Willowpark Conference Centre in Gauteng from 6 to 10 May 2013 for all the registered nurses and clinic coordinators working at the *Trucking Wellness* Roadside Centres around the country. The main purpose of the workshop was to equip staff on topical and relevant issues affecting the Centres, thereby enabling them to provide the highest quality of care to drivers and community members.

Some of the main training topics included Gender Based Violence, Medical Male Circumcision as well as Commercial Sex Workers Legislation and Treatment. All the training was underpinned by a clear message that only the highest standards and adherence to all policies and procedures will be accepted.

HUMAN TRAFFICKING WORKSHOP

All *Trucking Wellness* employees attended the Human Trafficking Workshop from 8 to 10 November 2013 at the Good Shepherd Retreat Centre in Hartheespoort Dam. The aim of the training workshop was to help fight the spread of human trafficking by equipping the workshop attendees to actively spread awareness about this practice within the communities in which they work. Some of the key topics covered during the training included the definition of human trafficking, the *modus operandi* used by traffickers, how to identify a victim of trafficking as well as how to assist such a victim.

NEW STAFF

1. SR. SIFISO KHUMALO – TUGELA
2. SR. BAATWENG PATRICIA OSUPILE – ZEERUST
3. GORDON SIBUSISO NGUBENI – KOKSTAD

PALSA Plus TRAINING

The Knowledge Translation Unit (KTU) trains professional nurses working in primary health care to apply the PALSA Plus guidelines in the diagnosis and management of patients with respiratory disease including TB, HIV/AIDS and STIs. The KTU assisted the CEP to hold a workshop from 29 to 30 January 2013 at Willow Park in Gauteng for 23 of the *Trucking Wellness* staff who provide care for patients at the Roadside Clinics. The purpose of the training was to familiarise participants with the PALSA Plus guidelines and to equip them to offer standardized quality of care across their facilities. The training was facilitated by two KTU trainers using adult education principles and interactive, small group learning methods. The following topics were covered, using the PALSA Plus guideline and case scenarios:

- Chronic respiratory disease.
- HIV diagnosis and routine care.
- Skin Rash ART initiation in non-pregnant woman.
- ART and the pregnant client.
- Integrating TB & Routine HIV care.
- ART and/or TB side Effects.
- STIs.

The training was well received by the participants, all of whom enjoyed the style and interaction of the training methodology. They referred to it as 'flexible, fun, informative and enlightening'. They also indicated that they felt comfortable to use the PALSA Plus guideline following the two day training workshop.

STATISTICS

ROADSIDE WELLNESS CENTRE HIV COUNSELLING AND TESTING

2013	TOTAL	HIV +	HIV -	INDETERMINATE
January	582	31	499	1
February	631	41	590	0
March	767	48	719	0
April	774	62	710	2
May	552	45	507	0
June	565	56	509	0
July	763	63	699	1
August	597	48	549	0
September	733	64	667	2
October	822	64	752	6
November	885	68	805	12
December	494	36	454	4
TOTAL	8165	626	7460	28

MOBILE WELLNESS CENTRE HIV COUNSELLING AND TESTING

2013	SITES VISITED	TOTAL TESTED HIV	TOTAL HIV -	TOTAL HIV +	HEALTH SCREENING - HIV	HEALTH SCREENING + HIV
January	35	942	894	48	183	1135
February	37	1146	1085	61	299	1451
March	15	612	569	43	165	777
April	10	530	492	38	147	677
May	25	607	556	51	186	845
June	17	641	566	75	236	877
July	28	803	751	52	201	1004
August	25	512	471	41	164	674
September	27	636	599	37	174	810
October	15	514	457	57	301	815
November	19	843	798	45	248	1094
December	25	712	654	58	185	897
TOTAL	278	8498	7892	606	2489	11056

ROADSIDE WELLNESS CENTRE PRIMARY HEALTHCARE

2013	TRAINING	MALE PATIENTS	FEMALE PATIENTS	STI	CONDOMS DISTRIBUTED
January	4361	1918	425	190	110424
February	4504	2400	322	221	98135
March	5116	2226	409	233	89259
April	5714	2549	425	346	123104
May	4240	2135	337	212	79564
June	3903	2204	309	190	98856
July	6535	3208	424	285	145113
August	5218	2803	381	259	151799
September	5246	2851	444	250	122504
October	5671	3580	442	417	157794
November	5863	3142	574	347	149642
December	2871	147	222	125	73321
TOTAL	59 242	29 163	4 714	3 075	1 399 515

NETWORK ACHIEVEMENT SINCE INCEPTION – DECEMBER 2013

LOCATION	YEAR LAUNCHED	AWARENESS EDUCATION: TRUCK DRIVERS & WOMEN AT RISK	PATIENTS: TRUCK DRIVERS & WOMEN AT RISK	NO OF STI TREATMENTS: TRUCK DRIVERS & WOMEN AT RISK
Beaufort West (N1)	2000	93467	11020	6281
Harrismith (N3)	2001	43164	21166	4309
Beit Bridge Border Post (N1)	2001	92632	27113	9434
Ventersburg (N1)	2002	35941	15509	5686
Tugela (N3)	2002	48280	32587	15854
Port Elizabeth (N2)	2002	45247	20638	6157
Hanover (N1)	2003	43199	12784	2646
Mooriver (N3)	2004	42593	14927	2668
Komatipoort (N4)	2003	41804	27266	8669
Zeerust (N4)	2005	30549	9410	895
East London (N2)	2005	17160	9095	891
Kokstad (N2)	2006	17490	7516	2389
Marrianhill (N3)	2008	13247	7340	462
Colesburg (N1)	2009	3982	4716	536
Mthatha (N2)	2009	15881	4739	434
Villiers (N3)	2010	23998	7586	957
Gauteng	2010	263	9639	1115
Cape Town	2010	1529	2399	260
Warden	2011	4856	4324	472
Roodekop	2011	4363	4843	641
TOTAL		619645	254617	70756

Condom Distribution: 161 284 50 million (estimated)





FINANCIALS

DIRECTORS' RESPONSIBILITIES AND APPROVAL

The directors are required by the Companies Act 71 of 2008, to maintain adequate accounting records and are responsible for the content and integrity of the audited annual financial statements and related financial information included in this report. It is their responsibility to ensure that the audited annual financial statements fairly present the state of affairs of the company as at the end of the financial year and the results of its operations and cash flows for the period then ended, in conformity with the International Financial Reporting Standard for Small and Medium-sized Entities. The external auditors are engaged to express an independent opinion on the audited annual financial statements.

The audited annual financial statements are prepared in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities and are based upon appropriate accounting policies consistently applied and supported by reasonable and prudent judgements and estimates.

The directors acknowledge that they are ultimately responsible for the system of internal financial control established by the company and place considerable importance on maintaining a strong control environment. To enable the directors to meet these responsibilities, the board sets standards for internal control aimed at reducing the risk of error or loss in a cost effective manner. The standards include the proper delegation of responsibilities within a clearly defined framework, effective accounting procedures and adequate segregation of duties to ensure an acceptable level of risk. These controls are monitored throughout the company and all employees are required to maintain the highest ethical standards in ensuring the company's business is conducted in a manner that in all reasonable circumstances is above reproach. The focus of risk management in the company is on identifying, assessing, managing and monitoring all known forms of risk across the company. While operating risk cannot be fully eliminated, the company endeavours to minimise it by ensuring that appropriate infrastructure, controls, systems and ethical behaviour are applied and managed within predetermined procedures and constraints.

The directors are of the opinion, based on the information and explanations given by management, that the system of internal control provides reasonable assurance that the financial records may be relied on for the preparation of the audited annual financial statements.

However, any system of internal financial control can provide only reasonable, and not absolute, assurance against material misstatement or loss.

The directors have reviewed the company's cash flow forecast for the year to 31 December 2014 and, in the light of this review and the current financial position, they are satisfied that the company has or has access to adequate resources to continue in operational existence for the foreseeable future.

The external auditors are responsible for independently reviewing and reporting on the company's audited annual financial statements. The audited annual financial statements have been examined by the company's external auditors and their report is presented on pages 3 to 4.

The audited annual financial statements and related financial information, as set out on pages 6 to 19, which have been prepared on the going concern basis, were approved by the board on 13 March 2014 and were signed on its behalf by:

Tertius Wessels

Nelson Themba Mthombeni

Ryan Clinton Goosen

Michelle Steyn

TO THE MEMBERS OF
CORRIDOR EMPOWERMENT PROJECT NPC

Report on the Financial Statements

We have audited the audited annual financial statements of Corridor Empowerment Project NPC, as set out on pages 7 to 17, which comprise the statement of financial position as at 31 December 2013, and the statement of comprehensive income, statement of changes in equity and statement of cash flows for the year then ended, and the notes, comprising a summary of significant accounting policies and other explanatory information.

Directors' Responsibility for the Audited Annual Financial Statements

The company's directors are responsible for the preparation and fair presentation of these audited annual financial statements in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities, and requirements of the Companies Act 71 of 2008, and for such internal control as the directors determine is necessary to enable the preparation of audited annual financial statements that are free from material misstatements, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on these audited annual financial statements based on our audit. We conducted our audit in accordance with International Standards on Auditing. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance whether the audited annual financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the audited annual financial statements. The procedures selected depend on the auditors' judgement, including the assessment of the risks of material misstatement of the audited annual financial statements, whether due to fraud or error. In making those risk assessments the auditor considers internal control relevant to the entity's preparation and fair presentation of the audited annual financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management,

INDEPENDENT AUDITORS' REPORT

as well as evaluating the overall presentation of the audited annual financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the audited annual financial statements present fairly, in all material respects, the financial position of Corridor Empowerment Project NPC as at 31 December 2013, and its financial performance and its cash flows for the year then ended in accordance with the International Financial Reporting Standard for Small and Medium-sized Entities, and the requirements of the Companies Act 71 of 2008.

Other matter

Without qualifying our opinion, we draw attention to the fact that supplementary information set out on pages 18 to 19 does not form part of the audited annual financial statements and is presented as additional information. We have not audited this information and accordingly do not express an opinion thereon.

Other reports required by the Companies Act

As part of our audit of the audited annual financial statements for the year ended 31 December 2013, we have read the Directors' Report for the purpose of identifying whether there are material inconsistencies between these reports and the audited annual financial statements. This report is the responsibility of the respective preparer. Based on reading this report we have not identified material inconsistencies between this report and the audited annual financial statements. However, we have not audited this report and accordingly do not express an opinion on this report.

Moore Stephens FRRS Incorporated
Chartered Accountants (S.A.)
Registered Auditors

30 January 2013

Moore Stephens House
6 Lakeside Place
Kleinfontein Lake
Benoni
1501

Per: Anton Ferreira

STATEMENT OF FINANCIAL POSITION

FIGURES IN RANDS	2013	2012
ASSETS		
Non-Current Assets		
Property, plant and equipment	205 633	441 967
Current Assets		
Trade and other receivables	725 235	1 140 149
Cash and cash equivalents	2 072 235	1 872 844
	2 797 470	3 012 993
Total Assets	3 003 103	3 454 960
EQUITY AND LIABILITIES		
Equity		
Retained income	864 483	1 344 371
LIABILITIES		
Current Liabilities		
Trade and other payables	2 091 320	2 066 600
Provisions	47 300	43 989
	2 138 620	2 110 589
Total Equity and Liabilities	3 003 103	3 454 960

STATEMENT OF PROFIT AND LOSS AND OTHER COMPREHENSIVE INCOME

FIGURES IN RANDS	2013	2012
Income received from donors	13 849 462	19 986 105
Cost of awareness services	(3 458 662)	(3 251 035)
Gross profit	10 390 800	16 735 070
Other income	171 390	-
Operating expenses	(11 210 916)	(14 813 805)
Operating profit (loss)	(648 726)	1 921 265
Investment revenue	168 838	152 108
Finance costs	-	(732 825)
Profit (loss) for the year	(479 888)	1 340 548
Other comprehensive income	-	-
Total comprehensive income (loss) for the year	(479 888)	1 340 548





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