



ZITHULELE HOSPITAL

Province of the Eastern Cape • Iphondo leMpuma-Koloni
Department of Health • Isebe leZempilo

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A GUIDE TO ACCESSING OUT-PATIENT CARE AT ZITHULELE HOSPITAL

EMERGENCY CARE

Zithulele provides 24/7 emergency care. A doctor is on site at all times and all units are staffed by nurses.

- In the case of an emergency, come to the OPD building.
- If you or your relative are actively fitting / bleeding profusely / unconscious or not breathing, proceed straight to the red room area and alert a nurse.
- If you do not meet the above criteria, please start at the clerks at the front desk. They will take your details and ask you for payment, depending on your income category. Children under the age of 6 and pregnant women qualify for free care, unless your medical aid covers you, in which case we would like to claim from your medical aid. You will then get a stamp.
- Tell the clerks that you have an emergency. During normal weekday working hours it is usual for most people with an emergency to have come via their clinics, but this does not always apply. Please be prepared for this question.
- After the clerks, you will be directed to a nurse who will take your vital signs. This sometimes seems unnecessary, depending on your presenting complaint, but helps us pick up things that are easy to miss in a less structured system.
- After vitals, a nurse will take a history – asking you some specific questions about what is wrong. The history, combined with the vital signs helps us allocate a score, called your triage score. You will be given a colour of red, orange, yellow or green. This helps us see people in order of urgency rather than on a first come first served basis. This is global best practice. It may mean that people who arrive after you are seen before you. If you are the more urgent category you will appreciate this!
- Our target waiting times by category are:
 - Red: See immediately
 - Orange: See within ten minutes
 - Yellow: See within one hour
 - Green: See within four hours.
- In reality, we see about 60% of patients within the target times and about 75% within an hour of the target time. We are least likely to meet the target time for orange patients because it is extremely demanding, and we do not have sufficient “surge capacity” in our staffing.
- Your triage page, with the colour on it will be placed in the console on the clerk’s desk in the passage. Your name will be called when it is your turn.

NON-EMERGENCY REFERRALS

- If it is your first time at Zithulele Hospital for a particular problem, you will be processed through the same system as the Emergency patients. This is because we are unable, at this time, to offer a pre-booked service (many reasons, feel free to ask why) and don't have any control over the pathway or quality of referrals.
- If you have been seen previously at Zithulele and are returning for review of the same problem, you will start at the clerks, have vitals taken and then proceed to the "Buya" (return) queue. This queue is seen on a first come, first served basis. Our goal is to finish this queue by lunch time, but it depends on how many people arrive. It only operates Monday to Thursday.

MATERNITY CASES

- If you are pregnant and think you are in labour you should proceed directly to the maternity ward where the midwives will assist you.
- If you are not in labour, you will be seen, as per the processes above. Pregnant patients receive a higher triage score by virtue of being pregnant, but will still need to wait in the casualty or "buya" queue.

FILLING SCRIPTS FROM ELSEWHERE

- If you have a valid script from another state facility (clinic or another hospital) who were unable to supply you the medicine, we will try to help. You will need to get a stamp from the clerks so we can record your visit.
- If you are lucky enough to be friends with a doctor employed at Zithulele, who saw you in their own time, you can fill your script at the pharmacy, but you need to pay the out-patient fee at the clerks first. (If you are one of these lucky people, please only ask to see your doctor-friend on their own time. To see them during working hours is effectively circumventing the system, which is unfair to our other patients. The doctors have been made aware of this, but it does create awkwardness so it's important for everyone to be aware.)
- If your script is from a doctor in private, you will need to be seen by one of our doctors (following the usual procedure outlined above) before we can issue your medicine. This is for safety and legal reasons.

PATIENTS WHO ARE EMPLOYED AND RETURNING TO WORK

- If you are employed and are planning to return to work TODAY please make this known to the nurse at the triage station (after your blood pressure and other vitals gets taken).
- The nurse will then discuss your situation with a doctor.
- If it is thought likely that we can help you quickly and get you back to work, then we will try to do that. We recognise the need to keep your employer happy by minimising your time away from work.
- We will need to explain to the patients already waiting why you are jumping the queue. You need to assist this process by acknowledging their sacrifice and being respectful and courteous.
- However, if your condition requires blood tests and results etc and it is thought unlikely you will be able to return to work today you will not be allowed to jump the queue. (It is your need to return to work that day and not your status as an employed person which determines the urgency with which you will be helped.)
- *If you are expecting a sick note for the whole day, this means you are NOT going back to work today. There is then no reason for you to jump in front of others in the queue. If you request to be seen first it means you will NOT get a sick note for anything other than the actual time you have spent at the hospital and it will be endorsed, indicating you are planning to go back to work.*

Please contact me should you have any questions.

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