

WCPP 11/4/9

Wes-Kaapse Provinsiale Parlement Western Cape Provincial Parliament IPalamente yePhondo IeNtshona Koloni

COMMITTEEE REPORT

Report of the Standing Committee on Health on its oversight visit to the Paarl Provincial Hospital on Friday 11 November 2022

The Standing Committee on Health having conducted an unannounced oversight visit to the Paarl Provincial Hospital on 11 November 2022, reports as follows:

The delegation

The delegation included the following Members:

Democratic Alliance Kaizer-Philander, WF (Chairperson) Fry, C

African National Congress Windvogel, R

Additional Members

Baku-Baku-Vos (ANC) Bans, A (ANC)

1. Background

The Standing Committee on Health conducted an unannounced oversight visit to the Paarl Provincial Hospital on Friday 11 November 2022. The visit was scheduled in the evening from 22h00 to 00h00 midnight. The purpose of the visit was to understand better, the reported challenges in the Emergency Centre (EC) at the Paarl Provincial Hospital.

The Committee resolved to visit the Paarl Provincial Hospital after receiving complaints about poor customer service at this Hospital. The complaints were predominantly about the Hospital's Emergency Centre in the evenings. The Committee visited the facility to assess the service pressure and the capacity of the Hospital. Members also visited the facility to determine the services offered and to conduct a walkabout of the Hospital's Emergency Centre.

2. Salient points that emanated from the visit to the Paarl Provincial Hospital

Sister Theron welcomed the Committee to the Emergency Centre at the Paarl Provincial Hospital. She informed the Committee that most patients are referred to the Paarl Hospital by clinics, local GPs, or the District Hospital. Referred patients will either go to the Outpatients Department if it is not an urgent medical problem or to the Emergency Centre (EC) if it is urgent. Some patients also get into the Hospital's Emergency Centre without referrals. The Emergency Centre uses a Triage System where patients arriving in the EC are assessed by a health worker who assigns a colour corresponding to the severity of the patient's condition. The Triage System is used to categorise or triage patients according to their medical needs. Using this method allows the allocation of appropriate resources to meet the patient's medical needs and ensures that patients receive the most appropriate type of care within the shortest time possible. Patients are never turned away, however, if their medical needs are not immediately life-threatening and they are not critically ill, they may need to wait longer, as the medical personnel on duty would normally prioritise the most urgent medical cases first.

The triage categories are red, which means a health worker attends to a patient immediately, orange means a health worker attends to a patient urgently, yellow means that a health worker attends to a patient as soon as possible and green means that the case is not urgent, and a health worker attends to a patient when they are available. By following the Triage System, patients receive the right

treatment at the right level of care, as it allows life-threatening injuries and conditions to be attended to first.

The Hospital informed the Committee that its busiest periods in the Emergency Centre are Saturdays, Sundays, the end of the month, and the 15th of every month. The Committee noted that there were two waiting rooms in the Emergency Centre of the Hospital. It was reported that patients go to the 2nd waiting room when they arrive at the Hospital's Emergency Centre and after they have been assessed, they get triaged and move back to the 1st waiting room next to the main entrance of the Emergency Centre.

During the visit, it was reported that in the EC there were ten nursing staff on duty that consist of three Registered Nurses; three Enrolled Nursing Assistants, four Staff Nurses. The hospital also has three Doctors, two Admin Clerks, and one Admin Clerk for the records, three Potters per shift, and 12 to 13 Security Officers on duty per shift.

It was reported that the patients flow in the Hospital's Emergency Centre was recently changed. During the visit, the security officers were stationed at the entrance of the 2nd waiting area. The Committee was informed that staff members are exposed to danger within the Emergency Centre. It was reported that patients and their family members are always rude to staff because they do not understand the Triage System. It was highlighted that in March 2022, a family member brought an injured member of his family to the EC, the family member demanded that his family member must be attended to immediately by medical staff, he broke doors and was violent towards staff members and Doctors. Sister Theron stated that security-related issues in the Hospital are reported to the senior management.

The Hospital reported that its queue marshals only work day shifts and there are no queue marshals during the night shifts. The security guards on duty in the evenings also assists in directing patients. It was reported that once children are triaged, they go to the pediatric waiting area, and babies under five years with an emergency are attended quickly.

The Hospital was using the Hector System for admissions and the programme was introduced recently. Staff members were trained in April 2022, and due to the shortage of staff, officials from the Hospital's Emergency Center could not attend training off-site, only on-duty training was provided. It was reported that the Hector System had challenges, especially at night. The system was slow and was causing delays in admissions.

The Committee conducted a walkabout of the facility and visited the overnight general ward in the Emergency Centre. The ward accommodates patients with surgical drainage, stab wounds, acute kidney injuries, assault patients, and patients for neurological observation that are waiting to be transferred to the Tygerberg Hospital. The overnight ward had 16 beds, however, only six patients were admitted to the ward during the visit due to the shortage of staff, and 10 beds were empty. It was reported that only one Nurse works the night shift in the general ward.

During the walkabout, patients who were waiting in the Emergency Centre waiting rooms approached Members and complained about poor service and long waiting hours. A pregnant lady reported that she was bleeding and arrived at 12h00 midday at the Hospital and by the time she approached the Committee it was 12h00 midnight, and she was still waiting to be assisted. Members requested Sister Theron to attend to the lady due to the seriousness of her case.

3. Challenges noted during the visit to the Emergency Centre in Paarl Provincial Hospital

- 3.1 Patient flow between the two waiting areas in the Emergency Centre was noted as a challenge.
- 3.2 The absence of queue marshals in the evenings was also noted as a major challenge as security guards had to do both security and queue marshal work.
- 3.3 Inadequate nursing staff and Doctors were noted as a major challenge in the Hospital.
- 3.4 The shortage of beds in the psychiatric wards was reported and noted as a challenge, as psychiatric female patients were admitted to the general ward with other patients. This poses a danger to other patients and staff.
- 3.5 The EC in Paarl Provincial Hospital has one Paramedic. When the Paramedic is on leave, the hospital is assisted by Paramedics from Cape Town or Stellenbosch.
- 3.6 Low staff morale was noted as a challenge.
- 3.7 Poor communication with patients was noted as a major challenge during the visit.
- 3.8 Delays in admission and the triage system were also noted as major challenges.

4. Resolution

Members raised questions, however, some of the questions were not fully answered by Sister Theron during the visit. The Committee resolved to schedule a follow-up visit to engage the management of the Hospital on the challenges that were reported and noted during the unannounced visit.

The Committee successfully concluded its visit.

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MS WF KAIZER-PHILANDER, MPP CHAIRPERSON: STANDING COMMITTEE ON HEALTH WESTERN CAPE PROVINCIAL PARLIAMENT