Phepha Apha-eFHS

FHS Student Health and Safety Handbook

A comprehensive student resource of information, tips, and where to find help and support when you need it.
This Handbook will be available online and on mobile devices. The contents of this Handbook plus some additional detail are available on Vula.

For comments on this Handbook and suggestions as to how it could be improved and made more useful, please click here and send us your feedback online, or contact the Student Development and Support Team:

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The original version of this handbook was designed and drafted with valuable input from members of the Health Sciences Students Council: Mary Ensln, Kyla Wolmarans and James Laporta as well as from Professor Gary Maartens, Professor Marc Blockman, Dr Lerato Maiphetiho and Dr Steve Oliver.

Thank you also to the following colleagues for their suggestions and contributions to subsequent editions: Professor Marc Blockman, Sarah Crawford-Browne, Johannah Keikelame, Dr Des Michaels, James Irlam, Pauline Siame, Dr Rachel Weiss and Veronica Mitchell.

Project Management: Communications and Marketing Department, Faculty of Health Sciences.
Taking collective responsibility for FHS students’ health, safety and support

**HEALTH**
- Staying Healthy.
- Student Immunisation.
- What to do if exposed to blood and body fluids.
- PEP procedure flow chart.
- Immediate Care Areas.
- What to do to reduce the risk of TB.
- Clinical protocol for exposure to body fluids.
- Confidential FHS report forms.

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- A guide to keeping safe on and off campus.
- What to do if faced with a dangerous situation.
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- What to do if you are sexually assaulted or raped.
- FHS Student Development and Support.
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- FHS Student Wellness Service.
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Forward

As Health Science students you learn and work in hospitals, community health centres, clinics, schools, NGOs and areas where communities of people reside.

You will inevitably be exposed to situations that could affect your health and safety.

The Faculty of Health Sciences is committed to partnering with you to safeguard your health and safety.

Please follow the guidelines contained in this Handbook, refer as necessary to the ‘Don’t Panic Handbook’ (available electronically in the Vula FYE website if you have lost your copy), and remember to always use your discretion, listen to your intuition/gut feel and do what feels right for you.

In the event that something does go wrong, the FHS and UCT will provide support.

Please contact the following staff if you need support, guidance or help:

**Student Development and Support Team**

*Chair: Dr Ayanda Gcelu*
Division of Rheumatology, Department of Medicine and Final Year Convener for the MBChB Programme
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*Deputy Chair: Prof Marc Blockman*
Division of Clinical Pharmacology, Department of Medicine
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*Administrative Officer and Servicing Officer: Nonkosi Malala*
SDS Undergraduate Unit
Tel 021 406 6749 Email nonkosi.malala@uct.ac.za

*Administrative Assistant: Lyndsay Williams*
SDS Undergraduate Unit
Tel 021 406 6614 Email lyndsay.williams@uct.ac.za

**Primary Health Care Directorate**

*Health Teaching Platform Manager: Dehran Swart*
Address E47-70 Old Main Building, Groote Schuur Hospital
Tel 021 406 6439 Cell 082 422 2007 Email dehran.swart@uct.ac.za

**Transport**

Reece Brooks
Tel 021 406 6638 Cell 083 643 2328 Email reece.brooks@uct.ac.za
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Staying Healthy

Healthcare professionals and students have a high risk of exposure to infectious diseases. These risks can be reduced by:

- Frequent and appropriate hand washing; combined with the use of hand-alcohol solutions.
- Practising standard infection precautions.

Needlestick injuries and other occupational exposures can lead to infection with HIV, Hepatitis B and Hepatitis C. Avoid being infected by blood-borne and other pathogens by practising standard precautions and avoiding direct, unprotected exposure to human body fluids as much as possible.

Precautions

- Take care in handling, cleaning or disposing of sharp needles, or scalpels.
- Always dispose of ‘sharps’ safely. Discard all sharps in designated sharps containers immediately after use.
- Use protective barriers (gloves/goggles/waterproof aprons/waterproof footwear) when appropriate and possible.
- Immediately and thoroughly wash hands and other skin surfaces that are contaminated by blood or other body fluids.
- Routinely wash hands and use an alcohol liquid; before and after examining a patient or client.

Student Immunisation

Hepatitis B Immunisation

Immunisation reduces your chances of contracting many diseases. Keep your recommended immunisations up-to-date

Hepatitis B immunisation must be administered to all healthcare workers.

It is compulsory for all undergraduate students to have received a full course of Hepatitis B immunisation by the end of July of their first year of study. Students will not be permitted to register for the second year of study until they have submitted to the Faculty Office written proof that they have received a full course of such vaccination.

In early March each year, the administrator in the Undergraduate Student Development and Support (SDS) office sends a group email to all first year students informing them that they need to go for free Hepatitis B vaccinations if they have not done so yet, and that they must have had three vaccinations before the end of October. Students are told where they may go for hepatitis B vaccination. They are advised to submit documentary proof of such vaccinations to the administrator in the SDS office. The administrator sends regular reminders.

If the first three free mandatory vaccination shots are administered as recommended, the vaccination will provide cover well beyond the period as a student (for up to 30 years). This means the vast
majority of students in the Faculty of Health Sciences will not require a booster.

Should students be concerned about exposure because of doing mandatory work in a particularly high risk environment they should contact Student Development and Support office where they will be advised accordingly. Where following consultation with appropriate health experts, a booster is recommended, the booster will be covered.

For specific information regarding Hepatitis B immunisation, refer to Rule FGU3 in the Undergraduate Faculty Handbook under General Rules.

Other

Immunisations that are strongly recommended include annual influenza immunisation, meningococcal vaccine, hepatitis A (if non-immune) and chickenpox (if non-immune).

What to do
...if you are exposed to blood or other body fluids

Definitions

Unintentional Exposure

Unintentional Exposure includes:

- Needle-stick injuries.
- Injury with other sharp objects, e.g. scalpel blade, lancet, suture, needle, broken glass.
- Splash of blood or body fluids onto mucous membrane of eyes, mouth or nose.
- Exposure of non-intact skin to blood or body fluids.

Source Person

A person whose blood or potentially infectious material has come into contact with a student by splashing onto mucous membranes or onto broken skin or by unintentional accidental percutaneous injury. If the source person is unknown, the term “source person unknown” should be used.
**Potentially infectious material**

Potentially infectious material includes:

- Blood, any blood-stained fluid, tissue or material.
- Tissue fluids (any fluid from a body cavity, includes ascites, embryonic liquor, CSF, pleural or pericardial fluid and wound secretions, or sexual fluids and vaginal secretions, penile pre-ejaculate and semen).

**Immediate Care Area**

The area where the emergency management of the exposed student is carried out.

**HIV Post-exposure prophylaxis (PEP)**

Antiretroviral therapy given to the recipient of a percutaneous or mucocutaneous exposure with potentially infectious material that could lead to the transmission of HIV, Hepatitis B and Hepatitis C.

**Exposure to blood or body fluids**

In the event of an unintentional exposure to blood or body fluids at a clinical facility, the student concerned must report the matter immediately to the most senior person in the area. The incident must then be recorded and immediately reported telephonically to the Immediate Care Area.

The incident must also be reported to the UCT Faculty of Health Sciences Student Development and Support Services in the Undergraduate Administration Office.

During normal working hours, the GSH Occupational Health Clinic (OHC) will function as the immediate care area and after hours and on public holidays, the Trauma Unit (C14) will take over this function. When students are at other facilities (e.g. Secondary hospitals, Community Health Centres, MOUs), immediate care will usually take place at that facility and follow-up must be done at GSH OHC.
Procedure

Responsibility of the exposed student and person in charge:

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| • Encourage bleeding if possible. Do not suck or “milk” the wound.  
  • Wash the exposed site thoroughly with running water and soap, and rinse.  
  • Eye and mucocutaneous exposure: irrigate with water or normal saline.  
  • Inform person in charge.  
  • Person in charge will:  
    • Confirm that washing/irrigation was done.  
    • Inform Immediate Care Area telephonically.  
    • Send injured/exposed student with one specimen clotted blood from source person, labelled with the source person’s information, to the Immediate Care Area. | • Remove the punctured glove. Encourage bleeding if possible. Do not suck or “milk” the wound.  
• Wash the exposed site thoroughly with running water and soap, and rinse.  
• Re-glove.  
• Eye and mucocutaneous exposure: irrigate with water or normal saline.  
• Inform the person in charge of the Operating Theatre who will:  
  • Dispense ARV PEP.  
  • Inform Immediate Care Area telephonically.  
  • Send exposed student with one specimen clotted blood from source person, labelled with the source person’s information to Immediate Care Area, immediately after the operation. |

Table 1.1 Responsibility of the exposed student and person in charge.

Responsibility of the Doctor in charge of the source person

If the injured or exposed student is the doctor-in-charge of the source person, this task should fall to a colleague or more senior member of staff (i.e. the injured person should not have to explain and take blood from the source person).

After explaining the need for testing and obtaining informed consent from the source person, a blood specimen must be drawn into one yellow top tube.

If it is not possible for any reason to obtain consent for testing, treat the source person as HIV UNKNOWN.
The blood specimen labelled with the source person's full name, surname and folder number must be given to the injured or exposed student to take to the Immediate Care Area without delay.

**Responsibility of the Doctor in the Immediate Care Area**

The doctor must confirm that the wound was adequately cleaned with soap and water or that the mouth/eyes were irrigated with water/saline.

The GSH OHC/Trauma Unit C14 doctor will counsel the injured or exposed student. Following counselling, they will ensure that blood is drawn from the student and will confirm that the source person's blood is available. They will also check that the emergency ARV PEP has appropriately been offered to the student.

The GSH OHC doctor will confirm that the Patient Information Reconciliation (PIR) has been correctly completed. The blood specimens are then dealt with in terms of the Clinical Protocol for Exposure to blood or body fluids.

If the injury drew blood or is an obviously high risk inoculation or contamination of an open wound by blood or body fluids, then the following steps must be taken:

- Obtain the source person’s HIV serology test result. Refer to Figure 1, Page 8.
- If the source person is HIV negative, antiretroviral PEP is not indicated. Refer to Figure 1, Page 8.

- If the source person is HIV positive or remains HIV unknown, offer antiretroviral PEP to the recipient for 28 days uninterrupted. Refer to Figure 1, Page 8.
- The doctor prescribing ARV PEP must inform the student of known side effects of the drugs and counsel the student to report any side effects to the GSH OHC or Trauma Unit C14 (after hours).
- If the student was seen in the Trauma Unit, refer him/her to the GSH OHC on the next working day for further management along with the same folder used in Trauma Unit. Trauma Unit must ensure that when indicated, the student has an adequate supply of ARV PEP over weekends and public holidays.

**Responsibility of the Groote Schuur Hospital Occupational Health Clinic**

In the case of a known HIV infected source person or where the HIV status is unknown:

- Counsel the student as required.
- After obtaining consent, do a baseline HIV serology, Hepatitis B surface antibody titre, Hepatitis C antibody (if the source person is known to be HCV-infected or unknown/unable to test) and Creatinine, if the student needs ARV PEP for 28 days.
- Offer ARV PEP only if the student presents within 72 hours of exposure.
When the HIV status of the source person becomes known, continue with counselling and treatment according to clinical protocol. Refer to Figure 1 above.

If the source person is Hepatitis B surface antigen positive and the student has a Hepatitis B surface antibody titre less than 10 mIU/ml, then the student must be offered a Hepatitis B immunoglobulin injection and a booster Hepatitis B dose or full vaccination course, as required.

The GSH OHC will provide follow-up to manage side effects and to encourage completion of 28 days of PEP and to complete serological tests to determine whether transmission of HIV has occurred. ARV PEP commonly causes nausea and diarrhoea, so students should have access to metoclopramide and loperamide, if required, for the duration of the PEP treatment.

Figure 1. Post exposure prophylaxis procedure flow chart. Management and treatment of students unintentionally exposed to blood or body fluids.
Responsibilities of the Virology Laboratory at Groote Schuur Hospital

The Virology Laboratory will report the results, as soon as they are able, to:

• The requesting doctor in charge of the source person.
• The GSH OHC doctor attending to the student.

The Virology Laboratory will send a printed copy of the definitive results to the GSH OHC as soon as possible.

Responsibilities of the UCT Occupational Health Nurse

If the UCT OHN is notified at the time of the incident, the UCT OHN will report the exposure incident to the GSH OHC clinic as soon as possible and notify them that the student will be coming through for management and treatment.

Conduct the incident investigation.

Report statistics on incidents involving students at the Faculty of Health Sciences Health and Safety Committee quarterly meetings in a confidential manner.

Inform the Head of Department (HOD) of the outcome for each exposed person. This must be done in writing using the Department of Labour, WCL. 306 Annexure A document. The HOD must sign this document and return it to the UCT OHN, who will forward the forms to the Compensation Commissioner.

Immediate Care Areas

Groote Schuur Hospital Staff Health Clinic (J-floor OPD)
Hours: 07h00 - 16h00
Tel 021 404 5490 / 5486 Map

Groote Schuur Hospital Trauma Unit C14
Weekends and after hours
Tel 021 404 4112 / 4473 Map

Community Health Centres:
Doctor/Sister in charge

Mowbray Maternity Hospital
Occupational Health Nurse Practitioner
Tel 021 659 5586 Map
or Groote Schuur Hospital
MOUs: Doctor/Sister in charge

Red Cross Hospital
Occupational Health Nurse Practitioner or Casualty
Tel 021 658 5410 / 5605 Map

New Somerset Hospital
Occupational Health Nurse Practitioner or Casualty
Tel 021 402 6485 / 6410 Map

Victoria Hospital
Occupational Health Nurse Practitioner or Casualty
Tel 021 799 1141 Map

Additional important document to refer to:

Addendum A: Clinical protocol for exposure to body fluids: a guide for trauma unit doctors, nurses and undergraduate students

HIV/AIDS helpline
0800 01 23 22

Phepha Apha-eFHS
PFS Student Health and Safety Handbook
A comprehensive student resource of information, tips, and where to find help and support when you need it.
What to do
...to reduce the risk of TB

Reducing the risk of TB in undergraduate Health Science students

South Africa is at the centre of the HIV and tuberculosis (TB) pandemics. The lifetime risk of TB for individuals with latent TB infection (up to 60% of the South African population) in non-HIV-infected persons is approximately 10%, increasing to >10% per year in HIV-infected persons. Hence, the approach to reducing your risk of TB is intimately linked to knowing and acting upon your HIV status.

It is important to note there is a fee for TB testing and TB treatment is free. The TB testing cost is not covered by the UCT Benefit Scheme for Students (The Scheme), see Page 53.

Know your HIV status

All students at UCT should be offered counselling and testing for HIV infection. Any student who will have contact with patients or will work in a hospital, community health centre or clinic environment must have undergone counselling and education surrounding the issues of HIV testing.

Minimising risk of TB transmission in the workplace

Due to the massive burden of TB in South Africa, students working in a healthcare environment will be unable to avoid contact with TB patients at all times.

It is, however, impractical to wear protective masks continuously. The following measures will be enforced to reduce risk:

Education

All health sciences students will be specifically educated as to the risks of acquisition of TB and as to the preventive measures which should be taken to minimise such risks. Record of such education will be a prerequisite before any patient contact.

All health sciences students will be made aware of the common symptoms associated with TB – that is, cough, night sweats, loss of appetite and loss of weight.

Students should be encouraged to seek medical advice from UCT’s Student Wellness Service or any other health facility of their choice if these symptoms occur.

Risk avoidance

Students must if at all possible avoid contact with patients who are known to have multi-drug resistant (MDR) or extensively drug resistant (XDR) pulmonary TB.

Students must NOT enter an isolation cubicle accommodating a patient with MDR or XDR pulmonary TB or one accommodating a patient with extrapulmonary MDR or XDR TB, where pulmonary involvement has not been ruled out.

Students will not receive bedside teaching from medical staff using patients known to have MDR or XDR pulmonary TB.
Students whose immune systems are compromised

Students who are immunocompromised for whatever reason (HIV-infected, on long-term immunosuppressants such as corticosteroids or methotrexate, have cancer, are struggling with stress and poor nutrition, etc.) are encouraged to discuss their health with UCT’s Student Wellness Service or any other health facility of their choice. There is a vital role for isoniazid preventive therapy (IPT) for some of these students (e.g., those with a positive tuberculin skin test) and, for those who are HIV-infected, antiretroviral therapy may be indicated.

Risk reduction through personal protective wear: masks

In the following circumstances, students should be required to wear a protective mask:

- Any student diagnosed with TB is urged in the strongest possible terms to ensure that they know their HIV status in order to ensure optimal treatment.
- A student who is found to have TB is also strongly encouraged to confidentially advise the Student Development and Support Office of their TB status in order to enable the Faculty to help ensure that they receive whatever support and essential treatment and follow-up are needed.
- In the case of drug-sensitive pulmonary TB, a student should stay out of class and out of the work environment for two weeks after diagnosis and commencement of treatment. With pulmonary MDR-TB, while the final decision will be in the hands of the attending doctor, generally a return to class and work should be allowed once they have sputum converted (established to be culture-negative on two occasions from sputum taken one month apart).

Reporting

The Student Development and Support Office will maintain a confidential record of all students who have reported their diagnosis of TB in order to ensure such students are appropriately managed through their illness.

The Head of the Faculty’s Student Development and Support Portfolio will monitor infections on the basis of confidential student TB statistics made available to him/her monthly by the Student Development and Support Office. If there are sudden changes in incidence, they can initiate an investigation - including consultation with the Head of the Division of Infectious Diseases and HIV Medicine - with a view to preventing further infections.

Leave of Absence as a result of the side effects from TB treatment

An important note to students: If you suffer from side effects or feel unwell while taking TB medication, please make early contact with the Student Development and Support Committee (contact details on Page 12).

All staff should note that students must be allowed to take time off if they feel unwell. Illness caused by the side effects of treatment should be treated like any other illnesses, and if this is the case, students should consult a doctor.
If students are not able to get a satisfactory response (particularly regarding sick leave) they should contact the Student Development and Support Committee:

**Primary contact:**
- Nonkosi Malala  
  Tel 021 406 6749
- Prof Sipho Dlamini  
  Tel 021 404 3166
- Dr Ayanda Gcelu  
  Tel 021 406 2131
- Prof Marc Blockman  
  Tel 021 406 6496

Students should be allowed to work half days without needing to make up the clinical time. Alternatively, plans should be in place for them to make up the time on weekends or over holidays to ensure their DP requirements are met.

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**HIV and TB HCW Hotline App**

The HIV and TB Hotline App provides contact details, information and resources.

**MIC 021 406 6829 | HIV and TB HOTLINE 0800 21 25 06**

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**Leave of absence forms**
- **SLOA Form A.** Health and Rehabilitation Sciences undergraduate (years 1 - 6)
- **SLOA Form B.** MBChB undergraduate (years 1 - 3)
- **SLOA Form C.** MBChB undergraduate (years 4 - 6)

**Related policy documents**
- **Policy A:** TB policy for FHS undergraduate students
- **Policy C:** UCT Benefit Scheme for Students
SAFETY

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15 A guide to keeping safe on and off campus
17 What to do
17 ...if you are faced with a potentially dangerous situation
19 ...if you are involved in a vehicle collision, or are threatened, mugged or assaulted
20 ...if you lose your possessions or have them stolen
21 A guide to keeping safe online
23 Cyberbullying: Zero Tolerance
24 Transport: how to get about
This section covers useful guides and tips on keeping safe, on and off campus, in different situations, when using cyberspace and transport, and of course, important contact numbers to call when you feel unsafe.

## Upfront: essential contacts

### EMERGENCY CONTACTS

#### FACULTY OF HEALTH SCIENCES (FHS)

**Student Wellness Service**
- Tel 021 650 1017 / 1020

**FHS STAFF**
- Dehran Swart
  - Tel 021 406 6439
  - Cell 082 422 2007
  - dehran.swart@uct.ac.za

**Nonkosi Malala**
- Tel 021 406 6749
- nonkosi.malala@uct.ac.za

**FHS TRANSPORT**

- **Faculty Operations Manager**
  - Reece Brooks
    - Tel 021 406 6638
    - Cell 083 643 2328
    - reece.brooks@uct.ac.za

- **Transport Supervisor and Driver**
  - Leon Ziervogel
    - Cell 072 387 4843
    - leon.ziervogel@uct.ac.za

**Drivers**
- Faizel Jardine
  - Cell 073 331 9764
- Owen Lengisi
  - Cell 061 908 8062
- Andre Smith
  - Cell 078 180 3037
- Mark Vollenhoven
  - Cell 061 079 4556
- Ntuthuzelo Ngqaba
  - Cell 073 128 6726

**Night and Weekend transport**
- Cell 078 965 8408

### ON UCT CAMPUS

**Campus Protection Services (CPS) Security Desk**
- Tel 021 406 6690

**CPS 24-hour Hotline**
- Tel 021 650 2222 / 3

**UCT Safety, Health and Environment Manager**
- Michael Langley
  - Tel 021 650 3552
  - michael.langley@uct.ac.za

**UCT Student Carline**
- Tel 0800 24 25 26 or
- sms 31393

**Student Wellness Service**
- Tel 021 650 1017 / 1020

**Jammie Shuttle**
- Tel 021 650 5289
- jshuttle@uct.ac.za

### OFF CAMPUS

**Cape Town Emergency Hotline from a Telkom landline**
- Tel 107 from a cellphone
- Tel 021 480 7700

**MEDICAL**

**Ambulance**
- Tel 10177

**Groote Schuur Hospital (GSH)**
- Tel 021 404 9111

**GSH Psychiatric Emergency**
- Tel 021 404 2175

**POLICE**

**Flying Squad and for all Emergency Services from toll-free landline**
- Tel 10111

**Rondebosch Police Station**
- Tel 021 685 7345

**Mowbray Police Station**
- Tel 021 680 9580

**Woodstock Police Station**
- Tel 021 442 3117 / 21

**Cape Town Central Police Station**
- Tel 021 467 8000 / 1 / 2

**Report-a-Crime (SAPS Crime Stop)**
- Tel 086 000 111

**SEXUAL ASSAULT**

**Rape Crisis**
- Tel 021 447 9762

*Please also notify CPS*
- Tel 021 650 2222 / 3

**Sexual Assault Response Team**
- Cell 072 393 7824

**Stop Women Abuse**
- Tel 021 650 3873 / 2021

**Violence Helpline**
- Tel 0800 15 01 50

**REScue**

**Mountain Rescue**
- Tel 021 948 9900

**Sea Rescue**
- Tel 021 449 3500

**WELLNESS**

**LifeLine (24-hour counselling service)**
- Tel 021 461 1111 / 3

**Suicide Helpline**
- Tel 0800 56 75 67

**Triangle Project (for LGBT community)**
- Tel 021 712 6699

**Counselling**
- Cell 081 257 6693

**SADAG Suicide Crisis**
- Helpline 0800 24 25 26

**Depression and Anxiety**
- Helpline 0800 56 75 67
- sms 31393

**SADAG Mental Health**
- Helpline 0800 70 80 90
A guide to keeping safe on and off campus

Understand that keeping yourself safe is necessarily, first and foremost, your own responsibility. Recognise that, while there are ongoing efforts to minimise the risks to which you are exposed during your training, risks may occur. Critically important is how you deal with those risks.

Do not be passive and let things just happen to you. Be proactive and prepare yourself. Recognise it is within your power to manage most risks.

Keep yourself informed and rehearse your responses to risks you think you may face.

Add the telephone numbers you might need in an emergency to your cellphone.

Always be conscious of your surroundings. Follow your gut instinct. If something doesn’t ‘feel’ right, it probably isn’t. If you feel worried or anxious in any environment, ask someone who works or lives there for their views and any advice they might have for you.

A guide to keeping safe on campus, and when out and about
Theft is the most common crime on campus. Here’s how to protect yourself:

### Where you stay
- Check that your doors and windows are locked when you leave your room.
- Don’t hide keys in obvious places such as under the doormat.
- Don’t put your home address on your key ring.
- Make friends with your neighbours so that you can look out for each other.
- When you go home for holidays, be thoughtful about how you can store your valuables in your absence. Do not leave things unattended in residences or shared accommodation. If it is less safe to take your valuables home, consider asking for support.

### Out and about
- Upload a metered taxi app so that you always have access to safer transport in a jam.
- Have emergency numbers saved on your phone.
- Never carry too much cash on you.
- Never put your wallet in the back pocket of your pants.
- Walk in a group, especially at night.
- Keep your cellphone out of sight.

### On campus
- Never prop open access doors.
- Don’t leave your backpack or bag unattended in cafeterias and libraries.
- Keep a record of serial numbers of valuable items, such as your laptop.
- Use the Foot Route on campus where possible as this is close to emergency phones and surveillance cameras.
- Report suspicious behaviour to Campus Protection Services:
  
  [Tel 021 650 2222 / 3]

### In the event of sexual assault or rape
Contrary to popular belief, the majority of rapes occur between people who know each other. If you are sexually assaulted, get yourself to a safe place and immediately contact someone you trust, call Rape Crisis, or seek medical attention.

Rape is a crime and should ideally be reported to the police, it’s important for you to have follow-up medical attention so that you can get prophylactic treatment for HIV/AIDS if necessary and any other treatment.

### Who to call in the event of sexual assault

**Rape Crisis:**  Tel 021 447 9762
**Campus Protection Services:**  Tel 021 650 2222 / 3
If you are going back to campus on a UCT-provided bus, be at the pick-up point on time. If you are unable to get there on time, contact the driver and make a plan with her/him. If you do not have the driver’s cell number, contact the following:

Leon Ziervogel       Cell 072 387 4843
Reece Brooks       Tel 021 406 6638
Cell 083 643 2328

When undertaking research, health promotion projects or clinical work within residential areas, including home visits, go in pairs or groups accompanied by or be accompanied by a staff member, community health worker or other community member assigned to you by your supervisor.

Avoid deserted areas. Ensure that someone always knows where you are, where you are planning to go and how long you expect to be there.

Working after dark or at night should be confined to working in health facilities and, if really necessary, attendance of formally organised meetings – and then only if you know the area and feel comfortable.

If you are using your own car, always keep it locked – including when you’re in it.

Looking after your valuables

- Leave unnecessary valuables at home.
- Take a padlock with you so that where there are lockers available, make use of them.
- Take a laptop/tablet with you only if essential.
- Keep your cellphone out of sight. Money, ID documents, bank cards, keys, etc. are also safest in a ‘waist wallet’ or ‘money belt’.
- Valuables in a car or bus should not be visible from outside of the vehicle.
What to do

...if you are faced with a potentially dangerous situation

If you come upon a dangerous situation (e.g. gang warfare, taxi violence, or treating a victim of gang warfare), make an immediate assessment of the dangers involved and of your safety then decide whether you need to urgently leave. If you decide to leave, report this immediately to your supervisor at the placement site and explain why you decided as you did. We want you to look after yourself and keep yourself as safe as possible — please do!

If you are concerned, observe the mood and behaviour of the people who live there, ask someone who works or lives there for their views and any advice they might have for you. Ask people: “what do you think is happening, what do you think may happen now?”

Remember that you may be more vulnerable while traveling during an unstable community situation, and it may be safer to stay in the health facility. When driving in an unstable community be particularly aware of your surroundings at traffic lights and stop streets.

You have a right at any time to raise queries concerning reasonable safety and due precautions at any placement.

If you need to take any such queries further, contact Dehran Swart who is the overall Health and Safety Representative for off-campus teaching and learning sites:
- Tel 021 406 6439
- Cell 082 422 2007

Going through various scenarios in your mind, before something happens, prepares you to take swift action if you are in a threatening situation.

Always keep a list of emergency numbers with you.

CPS 24-hour hotline: 021 650 2222
#NoToCampusCrime
There are a number of potentially useful strategies when faced with a person who is threatening violence or is becoming violent.

Usually people threaten or become violent when they are feeling fear, frustrated, wish to manipulate or intimidate, are in pain, under the influence of substances, hungry, tired or have experienced some kind of loss. Thinking carefully about what the person is trying to communicate or achieve through their threats can be useful in guiding your response and protecting yourself. Always consider whether the person is under the influence of substances.

Remember first of all that you have the right either to refuse to see a patient who is violent, threatening or abusive or who is being accompanied by an abusive person, or to request the presence of another person if you feel unsafe or uncomfortable.

Do trust your intuition/gut feel if faced with a threatening person

Try and stay calm: at least give the impression of being calm, self-controlled and quietly confident without suggesting that you are unconcerned about their situation.

Usually an event would have triggered the anger. The context and people responding may escalate or calm the situation depending on their response. Try to establish as quickly as possible what the problem is and how you can help. Let the person know that their position is understood.

Identify areas where the person may be correct in their views, rather than pointing out where they are wrong.

Maintain appropriate eye contact, remembering that the more eye contact, the more the feeling between you will be reinforced e.g. if someone is very frustrated, eye-contact may make them more frustrated. Depending on the culture and situation, looking at them, but without eye contact may be helpful.

If the situation has turned violent or appears to be on the verge of turning violent, if possible, leave and get help. Once you have started moving away, keep going until you have reached safety then call for help.

Avoid provoking the person who is behaving violently or threatening to become violent – rather seek to pacify and reassure the person. Patients should never be patronised or spoken to in an authoritarian manner.

Keep talking, using as normal a tone of voice as possible. Use simple, clear and direct language. Speak in short sentences and use the volume of your voice to get the person’s attention. Sometimes speaking softly can be more useful in getting the person’s attention.

As far as possible, use non-verbal communication to calm the situation. Be aware of your body language and use it to convey concern and a sense of calm. Do not abuse, threaten or insult the patient.
Respect the patient’s personal space.
A person who is angry or frustrated may need more personal space. It is wise to ask permission of the person before getting closer or touching them.

If the attack on you is meant to establish the other person’s dominance then pretend (fake) submission and try diversionary tactics. Try anything that might redirect the assailant’s attention.

As soon as a risk of attack becomes apparent, check on escape routes or exits and, if possible, work your way towards them. Avoid getting into a corner. Keep as far away from a potential assailant as possible and try to put something (e.g. a desk) between yourself and him/her. Remove potential weapons out of the way if you can. If you cannot get away, it can be safer to be close to the patient, even touching him or her, rather than standing a few meters away.

If the assailant is armed, ask him/her purposely to put their weapon down. Try to take the initiative where this is possible, by saying to the assailant quietly but firmly what you would like him/her to do. If necessary, repeat your instructions slowly, in a quiet, respectful yet firm way. Whether this approach is advisable and likely to be effective or not will depend on the particular assailant, what he or she is trying to communicate and circumstances involved. Use your discretion which under these sorts of circumstances probably means following your gut feeling.

You cannot count on bystanders to help. You can, however, sometimes break ‘bystander apathy’ by directing a highly specific request for assistance at a particular person who is amongst the bystanders. The trick is to identify someone and give them precise instructions about what they should do.

Where two people are managing a violent patient, it is important that one takes the lead and the other supports. This reduces the confusion and makes the situation feel safer.

Thanks to Sarah Crawford-Browne for developing this section of the handbook. She drew inter alia on: Cherry, D., Upston, B. (1997) Managing violent and potentially violent situations. A guide for workers and organisations. Centre for Social Health: Centre for Primary Health Care Research and Development. Latrobe University. Australia. 2016 additions by Steven Lay from the Department of Psychiatry, Valkenberg Hospital.

What to do
...if you are involved in a vehicle collision, are threatened, mugged or assaulted

- Phone for help.
- If you or a fellow student are injured you may go to the Student Wellness Services but it is recommended that you go to a properly equipped trauma unit at either a state hospital or, if you choose to and are on medical aid, a private hospital.
- Report any incident involving a criminal act and/or a motor vehicle incident to the police as soon as possible.
- Report all incidents involving theft, assault or any other criminal act or accident to your course supervisor.

For guidance contact Nonkosi Malala
Tel 021 406 6749

Related policy document
- Policy B: Policy on student sexual and physical harassment by patients
- FHS report and follow-up forms for sexual and physical harassment by patient/s
  - Form A: Confidential FHS report form for student sexual and physical harassment by patient/s
  - Form B: FHS feedback/follow-up form for student sexual and physical harassment by patient/s
  - Form C: Incidence report form for unprofessional behaviour
What to do

...if you lose your possessions or have them stolen

Depending on where you think you might have lost the items, you can approach one or more of the following people or offices:

- The driver of the bus on which you travelled and/or person who gave you a lift.
- Leon Ziervogel, Transport Supervisor
  Cell 072 387 4843
- The security office and/or the Lost Property Office at the hospital or other institution where you were working.
- The security desk at the Faculty of Health’s front entrance (on the Anzio Road side) of the Barnard Fuller Building.
- Reece Brooks, Manager Faculty Operations in Bernard Fuller Building
  Tel 021 406 6638  Cell 083 643 2328
- Mark Williams, Venue Supervisor, New Learning Centre
  Tel 021 406 6811  Cell 063 026 3596
- Natasha Dourie, Teaching Venues Supervisor, School of Health and Rehabilitation Sciences: Support Services Unit, GSH
  Tel 021 406 6070  Cell 071 387 5815
- Xolile Jojozi, Teaching Venues Supervisor, GSH
  Tel 082 927 2412
- GSH Security Office, E3 Hospital Street
  Tel 021 404 3337/8 (internal: 72 x3337/3338)

If you have insured your own possessions with an ‘All Risks’ provision report your loss to the police before claiming from the insurers.

Make sure that you keep a note of the serial numbers of your cellphone and laptop/tablet. In the unfortunate event of these items being stolen or lost, you will need the serial numbers when you report the matter to the police as well as for insurance purposes.

When reporting any matter to the police, make sure you are given a case number. Again you will need this for insurance purposes and for any follow-up that might be required. Make a note of the name and phone number of the police officer who took your report.

Again, please be reminded that the University provides no insurance cover for personal possessions and accepts no liability for any personal items that may be lost or stolen whether you are involved in compulsory academic activity or at any other time.
A wise owl once said that it’s always better to be safe than sorry. So true, particularly regarding your online personal info. Keeping your info secure online requires you take a little extra time and care, but it’s worth the effort and peace of mind.

Follow the steps below to increase your online security:

**Protecting your password**
Sure, you’re not likely to openly share your password with people you don’t trust, but unfortunately you don’t have to go that far for it to be compromised. Keeping passwords to yourself is a smart first step.

Choose a password that isn’t easy for others to guess. Consider a mixture of upper case and lower case letters, numbers and characters.

**Keep your email from getting hacked**
In the age of Twitter, Facebook, Snapchat, Slack and text messages, among others, we also still use email to communicate. And as a consequence, emails still get hacked. If you get an email attachment from someone you know that you were not expecting, check with the sender to confirm it was sent on purpose. Clicking on a malicious attachment can install malware on your machine, like a worm or virus. Don’t click on attachments from untrustworthy sources or do a Google search to find out if it’s a scam or virus.

**Shopping online**
If you use your credit card to shop online, there is risk your info will be stolen and used to buy something without your consent. Here are a few things to keep in mind:

Only use your credit on websites with the prefix, “https”. The “s” in https indicates that the site in question is using a secure protocol to encrypt communications between you and the website. You’ll see this protocol used on online banking sites and shopping sites if you’re looking at sensitive information. If you don’t see “https”, the chances of your information being compromised increases.

**Me and my digital shadow**
Through your computer, mobile phone, and other digital devices, you leave behind hundreds of digital traces (also called data traces) every day: bits of information about you that are created, stored, and collected.
Better account protection

When most users log into their accounts, they enter their username and a password and they’re in. This is known as single-factor authorization and it is indeed secure, but there’s an even more secure way to log into important accounts.

Protecting your mobile device

Most of the tips outlined above can also be used on your cellphone, smartphone or tablet.

Staying secure

Look, there’s pretty much nothing you can do if someone wants to get your personal information and has the time and means. Sometimes it’s out of your hands; however, the tips outlined above are things you can control. Focusing on that is your best bet.

Source: cnet.com/how-to/cnet-security-how-to/

Digital identity: Me and My Shadow

Through your computer, mobile phone, and other digital devices, you leave behind hundreds of digital traces (also called data traces) every day: bits of information about you that are created, stored, and collected.

When your digital traces are put together to create stories about you or profiles of you, these become your digital shadows. These can give others insight into your life; and they can also be totally wrong. Either way, once they’re out there, they are almost impossible to control.

Me and My Shadow is a project that helps you explore and minimise your ‘digital shadows’: the information traces you leave behind when you use the internet and mobile phones.

Visit the website: https://myshadow.org

Online Banking Security tips

- Never tell anyone your ATM PIN, customer-selected PIN (CSP) or password.
- Never respond to unsolicited emails requesting personal information.
- Check your bank statements regularly to identify any errors or fraudulent transactions that might have been occurred without your knowledge.
- Use your bank’s security features to ensure you have a safe experience.
- Beware of identity theft: keep all your documentation/information safe.
- When in doubt, call your bank.

Major bank online security links

- Standard
- Capitec
- Nedbank
- Absa
- FNB

Cyber Safety Resources

- Internet Service Providers’ Association (ISPA)
- South African Banking Risk Information Centre (SABRIC)
Cyberbullying: Zero Tolerance

What is bullying?
Bullying is the use of force, threat, or coercion to abuse, intimidate, or aggressively dominate others. The behavior is often repeated and habitual.
Behaviors used to assert such domination can include verbal harassment or threat, physical assault or coercion, and such acts may be directed repeatedly towards particular targets.

What defines bullying?
Repetition
Bullying is repetitive, especially after the bullied person has asked for it to stop; thus, the bully is aware that s/he is causing the bullied person(s) physical/emotional discomfort. Additionally, bullying is often focused, repeatedly, on the same person, or groups of people.

Power
Bullying is done with the intent of hurting others. This can be physically, or emotionally. A bully is fully aware that they are hurting their targets, and do it anyway.

Intent
In general, a bully is in a position of social, or physical, power over the person(s) s/he is bullying.

What is cyberbullying?
Cyberbullying is a form of bullying or harassment using electronic means. It has become increasingly common, especially among young adults. Harmful bullying behavior can include posting rumors, threats, sexual remarks, a victims’ personal information, or pejorative labels (i.e., hate speech).

Bullying or harassment can be identified by repeated behavior and an intent to harm. Victims may have lower self-esteem, increased suicidal ideation, and a variety of emotional responses, including being scared, frustrated, angry, and depressed.

Resources and further reading
- Cyber Bullying: A complete resource guide
- Cyberbullying Research Center
Transport: how to get about

**Jammie Shuttle**

The Jammie Shuttle is a free service and is the simplest way for students and staff to get around on campus. The Jammie runs on weekdays, weekends and holidays, and includes a late-night service.

A unique shuttle service, called the Jammie Shuttle, is available free to all UCT students.

A fleet of 26 buses, including a special one for disabled passengers, operates between residences, all UCT campuses and some public bus, train and parking facilities in the local vicinity.

Jammie Shuttle buses operate according to a strictly controlled schedule. Each bus is fitted with a monitoring system that allows its location to be constantly checked.

The scheduled service is available on weekdays, weekends and holidays, during both term time and vacations. It also includes a late-night service. Timetables are posted on Jammie Shuttle notice boards.

The Jammie Shuttle is available only to the UCT community, so passengers are assured of safe, friendly, clean and comfortable transport at all times.

The buses are environmentally friendly and equipped for sight- and hearing-impaired students.

**Jammie Shuttle Route**

**Jammie Shuttle Timetables and Route Maps**

Visit UCT’s Student Services Transport page and download the Jammie Shuttle timetables for your route.

[www.students.uct.ac.za/students/services/transport-parking/jammie-shuttle/routes-timetables](http://www.students.uct.ac.za/students/services/transport-parking/jammie-shuttle/routes-timetables)
Transport at UCT starts with the Jammie Shuttle, but it doesn’t need to end there. There are a range of public and private transport options to help you get around campus and the city.

**Hop on, hop off**

The Jammie Shuttle is the easiest way to get from point A to B. It’s free for students (if you show your student card) and runs weekdays, weekends and holidays. It even includes a late-night service.

**Check out** [students.uct.ac.za/students/services/transport-parking/jammie-shuttle/routes-timetables](students.uct.ac.za/students/services/transport-parking/jammie-shuttle/routes-timetables)

Golden Arrow buses are easily accessible from the Jammie Shuttle stops in Claremont and Mowbray.

**Check out** [gabs.co.za](gabs.co.za) for route maps and timetables.

**MyCiT** integrates with the Jammie Shuttle at the Gardens station in Buitenkant Street. From there you can head into Vredehoek, Oranjezicht and the city centre. The rapid bus service also runs to Salt River, Woodstock, Table View, Century City, the West Coast, Khayelitsha, Mitchells Plain, and the Atlantic Seaboard all the way to Llandudno and Hout Bay.

**Check out** [mycity.org.za](mycity.org.za) for route maps, routes of the feeder services and timetables.

**Listen out for the gaartjie**

Minibus taxis pick up and drop off passengers along virtually every main route in the city. The Mowbray and Claremont Jammie Shuttle stops are a few steps away from minibus taxi hubs, and there are multiple stops near some UCT residences. Make sure you have the exact change ready for your trip. The gaartjie is Cape Town slang for the guy who calls out the route, opens the doors and collects the fares. Remember, don’t get into a taxi if it is empty, avoid taking taxis that are not on standard routes, avoid displaying valuables in the taxi.

**Share a cab**

Metered taxis (including Uber) are just a phone call or SMS away. You can save money by sharing a ride, and it’s the safer option if you’ve had a drink or two!

**Down the line**

Cape Town has a good rail service that fans out across the city. The Southern Line stops at Mowbray, Observatory, Rosebank and Rondebosch stations, both within walking distance of UCT’s lower, middle and upper campuses.

**Check out** [metrorail.co.za](metrorail.co.za) and Metrorail stations for routes and timetables.

**Car pool**

First-year students aren’t allowed to bring cars onto campus, but you can apply to park at Rhodes Memorial, which is just a short walk away. You can apply for a disc at the traffic administration offices on upper campus.

And do think about carpooling! You can access the P4 carpool parking lot on upper campus if three or more student or staff cards are swiped at the boom within 10 seconds of the first swipe. Just remember one of you must have a parking disc.

**Check out** [ridelink.findalift.co.za](ridelink.findalift.co.za) for carpool buddies.

**Two-wheeler**

The good news is that students are allowed to bring a motor bike or scooter onto campus as long as you buy a black parking disc from traffic administration.

**Jammie Bike** offers 21-speed robust bicycles, up for lease on an annual basis. Although cyclists may find the terrain a bit uphill, there are designated cycling routes all around campus.

**Skateboarding** is also big in Cape Town. So you can use your board to get to lectures, and then cruise downhill all the way home.

**Your own two feet** is easiest to get around UCT. If you’re on campus after dark, it’s best to walk in a group and to stick to the Foot Route – they have emergency points so that you can call Campus Protection Services (CPS):

Tel 021 650 2222 / 3 if you need help.
Jammie Bike

Jammie Bike is an initiative of the UCT’s Properties and Services Department in conjunction with the Green Campus initiative and is intended to encourage those who do not have access to bicycles to rent them for travel to campus.

UCT’s cycle infrastructure and cycle route maps, as well as the Jammie Bike Pilot Project, also form part of its Campus Access Management Plan, and aims to encourage non-motorised access to campus.

We have 200 21-speed robust bicycles, branded with the Jammie Bike logo, up for lease on an annual basis as part of a pilot project.

**Why Jammie Bike?**

Transport of UCT staff and students has been identified as a priority in terms of campus sustainability/greening and reducing UCT’s carbon footprint.

In order to promote a shift away from private car use, Properties and Services has been investing in the design and implementation of cycling infrastructure on Main Campus, comprising road markings, signage and bike parking racks and stations.

**Cycle routes**

The new cycle routes were chosen after intensive investigation of potential routes with by Properties and Services specialist consultants, and with the participation of student and staff cyclists. The City of Cape Town was also consulted to ensure integration of the UCT routes with the City’s proposed non-motorised transport (NMT) plans, and the UCT cycle network was approved by the City officials.

Visit the Jammie Bike website for more information: [www.students.uct.ac.za/students/services/transport-parking/jammie-bike](http://www.students.uct.ac.za/students/services/transport-parking/jammie-bike)
WHY CYCLE?

You’ll be happier
It’s free therapy for the blues.

You’ll look good
It’s a natural fat burner.

You’ll be a superhero
By burning fat and not fossil fuels, you will help save the planet.

But wait, there’s more…
Think no parking problems, no stress!

UCT is committed to supporting non-motorised transport to reduce traffic congestion, carbon emissions, local pollution and to promote a healthy lifestyle.

Cycle routes

University of Cape Town

Cycle Network

- **HOT Districts** as part of UCT Area South
- **Red**: Proposed Class 3 Cycle Route
- **Black**: Railways
- **Brown**: Pedestrian bridge
- **Green**: UCT Cycle Network
- **Green**: UCT Cycle Network
- **Green**: Proposed Bicycle parking
- **Green**: Proposed Bicycle crossing

Phepha Apha-eFHS
PFS Student Health and Safety Handbook
A comprehensive student resource of information, tips, and where to find help and support when you need it.
Internal UCT Structures
29 Office for Inclusivity and Change (OIC)
32 FHS Student Development and Support (SDS)
34 UCT Student Wellness Services (SWS)
36 FHS Student Wellness Services (FHS SWS)
39 UCT Ombud
39 Professional Standards Committee (PSC)

Clinical Training Platform
40 Site Co-ordinators
41 Site Facilitators
41 Community Health Centres (CHC)
The University has a zero tolerance policy to discrimination, sexual assault and harassment of any kind.

If you are sexually assaulted or experience sexual, racial or any other form of harassment and need information, advice, counselling or any form of support, you are encouraged to approach the UCT Office for Inclusivity and Change (OIC). Visit the website for more information: www.students.uct.ac.za/students/discrimination-harassment

The OIC provides institutional responses to transformation, sexual and gender-based violence, disability and cultural change. For your information, UCT’s policies on racism and racial harassment, sexual harassment, sexual offenses, sexual orientation, disability, HIV infection and AIDS, and mediation can be found here: www.uct.ac.za/main/about/policies

Overview

The Office for Inclusivity and Change (OIC) offers the following services in relation to sexual offences and discrimination:

- Office of first report for rape, sexual assault, sexual harassment, and all forms of discrimination and marginalisation.
- 24 hour emergency assistance for rape and sexual assault survivors.
- Advice and support in related procedures such as domestic violence, no contact application, court preparation and trials.
- Assistance and support in student tribunals and disciplinary hearings.
- Workshops and awareness campaigns.
- Mediation services upon request by staff and students.

Information, counselling and advice

If you need...

- More information about the services and support provided
- To talk to someone who will listen in confidence
- To be referred to a health care professional

... you can email Zaaida Vallie zaaida.vallie@uct.ac.za or give the office a call on Tel 021 650 1006.

OIC offers a completely confidential service.
The University is committed to working towards the creation of a discrimination free and inclusive environment, which encourages disabled students’ full, independent and effective participation in the mainstream of UCT life.

The Disability Service works together with students and staff to facilitate the removal of barriers facing disabled students and staff.

Examples of the Disability Service’s work include:

- Advocacy and advice on disability issues and educational learning disabilities.
- Support in transforming attitudinal barriers that may be encountered.
- Improving access to inaccessible venues and designated disabled parking.
- Making available lecture and study material in alternative format for people with sensory impairments.

Students with specific learning and psychosocial disabilities can also access support at the Disability Service.

Racial harassment

The University’s Policy on Racism and Racial Harassment and guidelines to deal with inter-personal and institutionalised racism. If you feel you have been subject to racism or racial harassment you are encouraged to Contact the OIC’s Sexual Assault, Discrimination and Harassment Office

Tel 021 650 3530

Confidentiality

The OIC offers completely confidential help and assistance and can advise you on the possible courses of action available.

Contact the OIC

During office hours

Tel 021 650 3530

After-hours via Campus Protection Services

Tel 021 650 2222

Speed dial 8519

7728519 (from any UCT extension) to Standby Service cellphone: Zaaida Vallie

Cell 072 393 7824

Email zaaida.vallie@uct.ac.za

Related policy document

Policy B: Policy on student sexual and physical harassment by patients
Rape and Sexual Assault

Rape is defined as “unlawful, intentional sexual intercourse without consent”. It is a crime and should be reported to SAPS.

Call the Discrimination and Harassment Office (DISCHO) Tel 021 650 3530 or Campus Protection Services (CPS) on Tel 021 650 2222/2223.

CPS officers are trained to deal with the situation; allow them to assist you.

You are also urged to report the matter to the Undergraduate Student Development and Support Office Tel 021 406 6749.

There is someone who can support you in dealing with this traumatic event.

In the case of rape and sexual assault, you can also be helped medically at Victoria Hospital Tel 021 7991235, situated in Wynberg where you will receive free anti-retroviral treatment.

24-hour Hotline 072 393 7824 www.sart.uct.ac.za

It vital you receive this treatment as soon as possible after the rape, preferably within 24 hours, but it can be as much as 72 hours after the event. The personnel at the hospital will give you counseling, advice and the necessary treatment.

Call a friend or relative for support. Internally, the University also has the powers to institute formal disciplinary action against student or staff respondents accused of sexual assault and rape. It is advisable not to shower or bath after you have been sexually assaulted or raped.

Call the Student Wellness Services for counseling Tel 021 6501017. There is always an advisor on duty that can be called out to ensure that all the critical procedures have been conducted and to offer advice.
FHS Student Development and Support (SDS)

The FHS Student Development and Support Office (SDS) is designed to help students fulfil their potential, providing guidance tailored to individual student needs.

Life at university can involve a multitude of decisions and uncertainties, whether financial, emotional or career, and we have many services to help.

Confidentiality

All discussions and correspondence are kept strictly confidential, and are not divulged to any other party outside of the Chair and Deputy Chair of the Student Development and Support Committee (SDSC) as well as the Administrative Officer who services the SDSC, with the following exceptions:

- When a student provides written consent.
- When a student’s life or safety or that of someone else is threatened.
- When information is required by a court of law.
- When information is required for consideration of student’s RAC appeal.
- When information is required for the purpose of case management and support for students within the SDSC.

FHS SDS Services

- **Individual non-academic support** for students with regard to: personal issues; health-related; family-related; bereavement; adjustment; and financial (living expenses).
- **Hepatitis B Vaccination.**
- **Needle stick injuries:** report to SDS Office.
- **TB Diagnoses:** report to SDS Office.
- **Process long leave of absence:** report to SDS Office.
- Administration of **sick notes and short leave of absence** for all years across all degrees.
- **Monitoring, support and follow-up** with students whose family members have passed away.
- First Year Students **Orientation Programme and the Servicing of the Orientation Programme Planning Committee.**
- Administration of the **Student in Distress Fund.**
- Liaising with **Student Housing and Residence Life** about accommodation.
- **Funding issues:**
  - Administration of Private Scholarships.
  - Provincial Bursaries, Students Financial Aid and Fees issues.
  - Grace period applications.
- **Mentorship Programme:**
  - First Year Students Mentor Programme and servicing of Mentor Programme Planning Committee.
  - Administration of SA-Cuban Trained Students mentorship.
  - Administration of Mentor programme for clinical students by clinicians.
- Faculty of Health Sciences **Student Council and Faculty Student Societies** (assistance and support as needed).
- **Degree verifications.**
- Administration of the **Test Board.**
- **Meetings:** most of the work on student development and support is done by the Student Development and Support Committee (SDSC).

How do you get help from the FHS Student Development and Support team?

The best way is to contact **Nonkosi Malala**, a member of the committee and administrator responsible for guiding you towards the sources of assistance you might need.

- **Tel 021 406 6749**
- **Email nonkosi.malala@uct.ac.za**

Alternatively, contact **Lyndsay Williams:**

- **Tel 021 406 6614**
- **Email lyndsay.williams@uct.ac.za**
Student Development and Support Team

**Chair**: Dr Ayanda Gcelu  
Division of Rheumatology, Department of Medicine and Final Year Convener for the MBChB Programme.  
Email: ayanda.gcelu@uct.ac.za

**Deputy Chair**: Prof Marc Blockman  
Division of Clinical Pharmacology, Department of Medicine.  
Email: marc.blockman@uct.ac.za

**Administrative Officer and Servicing Officer**:  
Nonkosi Malala  
SDS Undergraduate Unit.  
Email: nonkosi.malala@uct.ac.za

**Administrative Assistant**:  
Lyndsay Williams  
SDS Undergraduate Unit.  
Email: lyndsay.williams@uct.ac.za

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Dr Kishor Bugarith  
Department of Human Biology.  
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Email: tracey-lee.cloete@uct.ac.za

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Email: sk.dlamini@uct.ac.za

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Division of Physiotherapy in the School of Health and Rehabilitation Sciences. She is also responsible for Student Support in the Occupational Therapy Division, School of Health and Rehabilitation Sciences.  
Email: gillian.ferguson@uct.ac.za

Dr Andrew Hooper  
Department of Psychiatry and Mental Health.  
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Vivienne Norman  
Communication Sciences (CSD) in the Department of Health and Rehabilitation Sciences. She is also responsible for Student Support in CSD Division, School of Health and Rehabilitation Sciences.  
Email: vivienne.norman@uct.ac.za

Prof Mashiko Setshedi  
Department of Medicine.  
Email: mashiko.setshedi@uct.ac.za

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Do you know someone who is dealing with anxiety, depression or in emotional distress and needs support?

Call UCT Student Careline: 0800 24 25 26  
(free from Telkom lines), SMS (for a call-me-back) - 31393

UNIVERSITY OF CAPE TOWN  
[Logo]
The Student Wellness Service (SWS) provides a professional health and counselling service to students at a primary health care level. The service is dedicated to assisting students in making healthy lifestyle choices in relation to nutrition, alcohol, safer sex, relationships and stress management amongst others, in support of academic success.

SWS offers a comprehensive outpatient health service by both medical practitioners and nurses, who are dedicated to helping students to remain healthy, and to making sound life choices while pursuing their academic goals. Students are encouraged to seek assistance and guidance as early as possible.

SWS is involved with the prevention, early detection and treatment of all health and psychological conditions, as well as the promotion of a balanced and healthy lifestyle. SWS provides psychosocial support and interventions to students with personal, social, family and relationship challenges.

Student Wellness seeks to play a significant role in developing and empowering the whole student – promoting their ability to take control of their own living and learning through wellness, self-confidence, self-awareness, personal meaning and responsible citizenship.

Toll free numbers to call when you are in distress

- SADAG UCT Student Careline: ☎ 0800 24 25 26 free from a Telkom line or ✉ SMS 31393 for a call-me-back. This line offers 24/7 telephonic counselling, advice, referral facilities and general support to students facing any mental health challenges or contemplating suicide. The line is available to offer support and advice to anyone who is concerned about a student who might be in distress. The line is able to advise and refer callers to both internal UCT resources and external (NGO, public and private) mental health resources.

- Please make use of the SADAG UCT Student Careline if you are placed on a waiting list by reception at the SWS or if you require emotional support while waiting for an appointment. The SADAG website contains useful information about mental health issues as well as details of their national helplines.

Contact SWS

- Tel 021 650 1020
- Email faranaz.murat@uct.ac.za
- Website www.dsa.uct.ac.za/student-wellness/about-student-wellness

www.dsa.uct.ac.za/student-wellness/about-student-wellness
UCT Student Careline

24-hour TOLL-FREE Helpline
7 days a week
FREE telephonic counselling and referrals

0800 24 25 26
sms 32312

www.sadag.org

Mental Health Matters
The physical, emotional and mental health of our students is of great importance to us. We have been expanding our support services team and have more staff available to assist you in providing wellness support. There is no longer a long waiting list for those seeking help. We have also created a helpline for any kind of emergency assistance or someone to talk to. The helpline is open 24 hours a day, 7 days a week.

Venue: Room 1.43
on the side of Entrance 5, Ground Floor, Falmouth Building, Faculty of Health Sciences.
This room can be accessed through the entrance in the lane between Falmouth Building and the Health Economics Building. On your left hand as you go towards the turnstile/access for the bicycles in Falmouth area.

Please use your student card or knock.

Please contact Nonkosi Malala at the FHS Student Development and Support (SDS) Admin Office, Room N2.17 Wernher and Beit North Building or email Nonkosi at nonkosi.malala@uct.ac.za or call on 021 406 6749 to request an appointment form, in order to book an appointment. The service is available to all UG Health Sciences students. Confidentiality and privacy is guaranteed. Where possible (depending on availability) students will be seen at Student Wellness Service located at 28 Rhodes Avenue, Mowbray.

Please also consider making use of a dedicated hotline for UCT FHS students, not only medical students. Importantly, not dependent on medical aid: 0800 32 33 23 or SMS 31393 for a call-me-back. It offers 24/7 telephonic counselling, advice, referral facilities and general support to individuals facing any mental health challenges, or contemplating suicide. The line is also available to offer support and advice to anyone who is concerned about another person who might be in distress; and are able to advise and refer callers to both internal UCT resources and external (NGO, public and private) resources.

* Operated by the South African Depression and Anxiety Group (SADAG).

24/7 Telephone counselling service numbers for FHS students in distress

- SADAG UCT Student Careline: 0800 24 25 26 free from a Telkom line or SMS 31393 for a call-me-back. This line offers 24/7 telephonic counselling, advice, referral facilities and general support to students facing any mental health challenges or contemplating suicide. The line is available to offer support and advice to anyone who is concerned about a student who might be in distress. The line is able to advise and refer callers to both internal UCT resources and external (NGO, public and private) mental health resources.

- Please make use of the SADAG UCT Student Careline if you are placed on a waiting list by reception at the SWS or if you require emotional support while waiting for an appointment. The SADAG website contains useful information about mental health issues as well as details of their national helplines.

Contact UCT Student Wellness

Tel 021 650 1020
Email faranaz.murat@uct.ac.za
Website www.dsa.uct.ac.za/student-wellness/about-student-wellness

Contact FHS Student Wellness

Tel 021 406 6749
Email nonkosi.malala@uct.ac.za

FACULTY OF
HEALTH SCIENCES
www.health.uct.ac.za
FHS Student Wellness Service

24/7 TOLL-FREE hotline for FHS Students in distress
FREE telephonic counselling and referrals

call 0800 32 33 23
sms 31393 for a call-me-back

www.sadag.org
Mental Health Matters
Are you experiencing academic stress or feeling overwhelmed and struggling to cope due to painful life experiences?

Would you like support to improve your mental outlook and strengthen your resilience to life’s challenges?

The FHS Undergraduate Student Wellness Service offers weekly group counselling sessions every Saturday. These sessions are open to all UG programmes and levels of studies.

Please book attendance by previous Thursday for venue booking purposes. The attendance register will be taken at all sessions.

SATURDAYS
10h00 - 12h00
15 to 25 students a session
or closed support sessions for 8 to 9 students

FACILITATOR/SOCIAL WORKER:
Rethabile Leanya

BOOK A SESSION
To book a session, contact:
Nonkosi Malala
Tel 021 406 6749
Email nonkosi.malala@uct.ac.za

www.sadag.org
Mental Health Matters
UCT Ombud

The Office of the Ombud provides a safe and objective environment in which individuals can air their concerns, receive appropriate referrals, be advised of relevant policies and procedures, and discuss formal and informal options for addressing these concerns. The Office of the Ombud operates according to the principles listed below:

• **Independence.** The Ombud operates independently of UCT’s authority structures and reports to the Chair of Council, but has access to the university’s Senior Leadership Group (SLG) in order to convey perceived issues on campus.

• **Informality.** The Office of the Ombud supplements, but does not replace, the university’s existing resources for conflict resolution.

• **Impartiality.** The Office of the Ombud considers the rights and interests of all parties involved while endeavouring that fair process takes place.

• **Confidentiality.** The Office of the Ombud will not identify visitors without prior permission to do so. Permanent records are not kept. Reports are based on anonymous aggregate data.

Non-disclosure agreement

By talking to the Ombud, visitors and the Ombud agree that the Office of the Ombud will not disclose or keep records of individually identifiable information; the Ombud will not testify or participate in any formal proceeding; communications with the Ombud are privileged, and this privilege is held by the Office of the Ombud and cannot be waived by others. This agreement results in confidentiality and leads to the provision of a safe and neutral place for the discussion of any concern by any member of the UCT community.

Zetu Makamandela-Mguqulwa
Tel 021 650 4805
Email ombud@uct.ac.za

Administrative Assistant: Birgit Taylor
Tel 021 650 3665
Old Staff Cottages, 3 - 4 Lovers Walk, Lower Campus (opposite the School of Dance)
Website www.ombud.uct.ac.za

Professional Standards Committee (PSE)

If you experience or witness unprofessional behaviour and abuses of patient rights in health care facilities and communities, your options include the following:

• Discuss the incident with the person who, in your opinion, has behaved unprofessionally or abused a patient’s rights.

• Discuss the incident and an appropriate response with the course convener, a trusted staff member or a student colleague.

• Report the incident to the Chair of the Professional Standards Committee (Assoc Professor Kirsty Donald) using the Incident Report Form on the PSC Vula site.
  Tel 021 658 5322
  Email kirsty.donald@uct.ac.za

• Please note that the incident report must be made in good faith and may not be anonymous. Frivolous complaints are themselves violation on professional behaviour.

The PSC will maintain the confidentiality of the complaints. The identity of the complainant/s will be revealed to the alleged perpetrator only with the complainant’s prior consent.
Clinical Training Platform

Site Co-ordinators
Hospitals and Other Learning Sites

George Hospital Complex
Tel 044 802 4528 or 044 802 4529

George Hospital Complex, Knysna and Oudtshoorn Hospitals – Site Co-ordinator
Althea Solomons
Tel 021 650 5185
Cell 072 386 9281
Email althea.solomons@uct.ac.za

Impilo Student Residence in George
Tel 021 650 5185

Knysna Hospital
Tel 044 302 8400

Lentegeur Psychiatric Hospital, Mitchell’s Plain District Hospital, Mitchell’s Plain Community Health Clinic, Hanover Park CHC – Site Co-ordinator
Fatima Le Roux
Tel 406 6177 or 402 6234 (ext. 6234)
Cell 072 490 6844
Email fatima.leroux@uct.ac.za

Mowbray Maternity Hospital – Site Co-ordinator
Fatima Le Roux
Tel 406 6177 or 402 6234 (ext. 6234)
Cell 072 490 6844
Email fatima.leroux@uct.ac.za

New Somerset Hospital – Site Co-ordinator
Fatima Le Roux
Tel 021 4066177 / 4026234 (ext. 6234)
Cell 072 490 6844
Email fatima.leroux@uct.ac.za

Occupational Health Clinic (OHC) – Site Co-ordinator
Sister Mariamah Chetty
Tel 021 404 5490/87 Speed dial: 76855
Email mariamah.chetty@westerncape.gov.za

Oudtshoorn Hospital
Tel 044 203 7200

Saldanha Bay Sub-District – Site Co-ordinator
Sandra Adams
Cell 083 729 5008
Email sj.adams@uct.ac.za

SHAWCO Clinics – UCT Director
Gavin Joachims
Tel 021 406 6740
Email gavin.joachims@uct.ac.za

Victoria Hospital – Site Co-ordinator
Nichola Daniels
Tel 021 799 1164
Cell 084 674 6745
Email nichola.daniels@uct.ac.za

Vredenburg Hospital – Site Co-ordinator
Sandra Adams
Tel 021 715 1945
Cell 083 729 5008
Email sj.adaw@uct.ac.za

When in doubt
Contact Dehran Swart, Health Teaching Platform Manager, Primary Health Care Directorate
Tel 021 406 6439
Cell 082 422 2007
Email dehran.swart@uct.ac.za
Do you stay in a UCT residence?
Do you know that there is a night time nurse service available from 19h00 to 07h00?

Call the UCT night time nurse service – 1271 (from a res landline), 073 201 8111 or 072 190 5090

Community Health Centres (CHC)

- **Guguletu CHC**
  - Tel 021 637 1280

- **Hanover Park CHC**
  - Tel 021 692 1240

- **Khayelitsha (Site B) CHC**
  - Tel 021 360 5200

- **Mitchell’s Plain CHC**
  - Tel 021 392 5161

- **Retreat CHC**
  - Tel 021 713 9800

- **Vanguard CHC**
  - Tel 021 694 5540

Vanguard Student Learning Centre Facility Manager
Sister Sharm Naidoo
- Tel 021 695 3849
- Cell 072 603 0887
- Email sharm.naidoo@uct.ac.za

Site Facilitators

- **Heideveld Clinic**
  - Lydia Davids
  - Cell 084 811 3476
  - Email lydia.davids@uct.ac.za

- **Khayelitsha and Town II Clinic**
  - Tsuki Xapa
  - Cell 082 713 0297
  - Email tsuki.xapa@uct.ac.za

- **Mitchells Plain and Eastridge Clinic**
  - Christolene Beuzac
  - Cell 072 668 3974
  - Email christolene.beuzac@uct.ac.za

- **Retreat and Grassy Park Clinic**
  - Fiona Jordaan
  - Cell 076 853 7122
  - Email fiona.jordaan@uct.ac.za

- **Vanguard and Langa Clinic**
  - Patricia Ncamile
  - Cell 064 626 8776
  - Email patricia.ncamile@uct.ac.za
Documents for Downloading

Addendum A. Clinical protocol for exposure to body fluids: a guide for trauma unit doctors, nurses and undergraduate students

FHS forms

Form A. Confidential FHS report form for student sexual and physical harassment by patient/s
Form B. FHS feedback/follow-up form for student sexual and physical harassment by patient/s
Form C. Incidence report form for unprofessional behaviour

FHS Leave of Absence (LOA)

Guidelines
FHS SLOA application forms
SLOA Form A. Health and Rehabilitation Sciences undergraduate (years 1 - 4)
SLOA Form B. MBChB undergraduate (years 1 - 3)
SLOA Form C. MBChB undergraduate (years 4 - 6)

Policy

Policy A. TB policy for FHS students
Policy B. Policy on student sexual and physical harassment by patients
Policy C. UCT Benefit Scheme for Students (The Scheme)
1. Laboratory investigations

1.1 Investigations for the source patient

<table>
<thead>
<tr>
<th>Investigation requested</th>
<th>Investigation ticked on NHLS form</th>
</tr>
</thead>
<tbody>
<tr>
<td>RAPID HIV (after-hours/weekends/public holidays)</td>
<td>• Indicate under clinical: needle stick injury source patient and note as urgent.</td>
</tr>
<tr>
<td></td>
<td>• Indicate under other tests: RAPID HIV.</td>
</tr>
<tr>
<td>HIV Antibody/P24 Antigen * (ELISA) (done next working day)</td>
<td>HIV testing: HIV Serology</td>
</tr>
<tr>
<td>Hepatitis B Surface Antigen</td>
<td>Hepatitis Serology: Clinical Hepatitis B</td>
</tr>
<tr>
<td>Hepatitis C Antibody</td>
<td>Hepatitis Serology: Clinical Hepatitis C</td>
</tr>
</tbody>
</table>

Table 1.1 Investigations for the source patient (X1 yellow top)

1.2 Investigations for the health care worker

<table>
<thead>
<tr>
<th>Test</th>
<th>Investigation ticked on NHLS form</th>
</tr>
</thead>
<tbody>
<tr>
<td>HIV Antibody/P24 Antigen * (ELISA)</td>
<td>HIV testing: HIV Serology</td>
</tr>
<tr>
<td>Hepatitis B Surface Antigen</td>
<td>Hepatitis Serology: Clinical Hepatitis B</td>
</tr>
<tr>
<td>Hepatitis C Antibody (only if source patient is Hepatitis C positive or unknown)</td>
<td>Hepatitis Serology: Clinical Hepatitis C</td>
</tr>
</tbody>
</table>

Table 1.2 Investigations for the health care worker (X2 yellow top)

**IMPORTANT MESSAGE**

**DO NOT** wait for the laboratory results to commence PEP as per Western Cape DOH Circular H77/2014.

**DO NOT** withhold or stop PEP based on negative RAPID HIV test result only.

If the source patient has a negative RAPID HIV Test

- It is advisable to await the confirmatory HIV combo test (ELISA) result before deciding to stop PEP.
- **The treating clinician must inform the HCW if it is suspected that the source patient may pose a risk** (e.g. if there is a possibility of sero-conversion illness) if the HCW decides to stop PEP.
2. Treatment regimen

2.1 In the absence of any contraindications

<table>
<thead>
<tr>
<th>Type of exposure</th>
<th>Treatment options</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mucocutaneous exposure</td>
<td>Option 1: Truvada 1 tablet OD + Raltegravir 400mg BD</td>
</tr>
<tr>
<td>Pecutaneous exposure</td>
<td>Option 2: Truvada 1 tablet OD + Atazanavir/Ritonavir 300mg/100mg OD</td>
</tr>
</tbody>
</table>

Table 2.1 Treatment in the absence of any contraindications

**IMPORTANT MESSAGE**

Tenofovir (TDF) 300mg + Emtricitabine (FTC) 200mg

The above medication must be available in Trauma Unit (supplied pre-packed from GSH E10 pharmacy – 28 day supply per patient).

2.2 In the presence of any contraindications

**Other ARV PEP options ****MUST be discussed with an ID Specialist**

<table>
<thead>
<tr>
<th>2 – Drug (NRTI ***)</th>
<th>Plus</th>
<th>3 RD Drug **</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tenofovir (TDF) 300mg + Lamivudine (3TC) 300mg OD po</td>
<td>Plus</td>
<td>Raltegravir 400mg po BD or Atazanavir 300mg once daily orally + Ritonavir 100mg once daily orally</td>
</tr>
<tr>
<td>Stavudine (D4T) 30mg + Lamivudine (3TC) 150mg BD po</td>
<td>Plus</td>
<td>Atazanavir 300mg once daily orally + Ritonavir 100mg once daily orally</td>
</tr>
<tr>
<td>Zidovudine (AZT) 300mg + Lamivudine (3TC) 150mg BD po</td>
<td>Plus</td>
<td>Atazanavir 300mg once daily orally + Ritonavir 100mg once daily orally</td>
</tr>
<tr>
<td>Tenofovir (TDF) 300mg + Emtricitabine (FTC) 200mg OD po</td>
<td>Plus</td>
<td>Raltegravir *400mg po BD or Aluvia (400mg/100mg) po BD</td>
</tr>
</tbody>
</table>

Table 2.2 Treatment in the presence of any contraindications

**IMPORTANT MESSAGE**

* **Never recommend**: Nevirapine due to risk of, among other, hepatotoxicity.

**Avoid**: Abacavir due to risk of hypersensitivity reactions.

*** If the source patient is known HIV positive and failing PI- based ARV treatment, then consult the ID Specialist on call to discuss an appropriate PEP regimen.

3. Counselling health care workers

Counselling of the health care worker must be rendered. Specific counselling regarding use of condoms during the period of follow-up is important due to the potential risk of transmission in the event of seroconversion.

4. Health care workers and students reporting procedure

The health care worker must report any side effects of PEP to the Groote Schuur Hospital (GSH) Occupational Health Clinic (OHC) Trauma Unit (after hours). Refer the health care worker to the GSH OHC, J Floor, OPD Clinic (during working hours).

Tel 021 404 5490 / 5486
For all students’ medical treatment counselling and follow-up tests

If no counselling is received at the hospital where the injury occurred and not enough (only 3 days) medication supply – send the student to GSH OHC, J Floor, Out-patients Building. **Important note:** A folder must be opened at E Floor Main Reception OPD, before proceeding to the OHC.

For students unintentionally exposed to blood or body fluids there is insurance cover provided by an accredited insurance provider. This is for students registered for the following degrees:

- Physiotherapy
- MBChB
- BSc Occupational Therapy
- BSc Speech Therapy
- BSc Audiology
- Nursing
- PhD students

Please also contact Nonkosi Malala at the Faculty’s Student Development and Support office on **Tel 021 406 6749.** Nonkosi will ensure you have access to whatever treatment and support you need. You can take this step at any point in the process but make sure that you do not skip it altogether!

**Addendum A: Clinical protocol for exposure to body fluids: a guide for trauma unit doctors, nurses and undergraduate students**

**FHS forms**

Form A. Confidential FHS report form for student sexual and physical harassment by patient/s

**Form A:** Confidential FHS report form for student sexual and physical harassment by patient/s

Form B. FHS feedback/follow-up form for student sexual and physical harassment by patient/s

**Form B:** FHS feedback/follow-up form for student sexual and physical harassment by patient/s

Form C. Incidence report form for unprofessional behaviour

**Form C:** Incidence report form for unprofessional behaviour

**Leave of Absence as a result of side effects from post exposure to prophylaxis treatment**

**An important note to students:** If you suffer from side effects or feel unwell while taking the PEP medication, please make early contact with the GSH staff clinic.

All staff should note that students must be allowed to take time off if they feel unwell. Illness caused by the side effects of treatment should be treated like all other illnesses, and if this is the case, students should consult a doctor. If students are not able to get a satisfactory response (particularly regarding sick leave) they should contact the Student Development and Support Committee:

**Primary contact:**
Nonkosi Malala **Tel 021 406 6749**
Prof Sipho Dlamini **Tel 021 404 3166**
Dr Ayanda Gcelu **Tel 021 406 2131**
Prof Marc Blockman **Tel 021 406 6496**

Students should be allowed to work half days without needing to make up the clinical time. Alternatively, plans should be in place for them to make up the time on weekends or over holidays to ensure their DP requirements are met.
FHS Leave of Absence (LOA) Guidelines

1. Long Leave of Absence (LLOA)

1.1 The University uses the term "long leave of absence" (LLOA) to indicate leave for longer periods, usually to the end of the semester or the end of the year. Leave granted for shorter periods (see pg 46) are specific to the Faculty and not formally processed as LOA on PeopleSoft.

1.2 A student may not ordinarily be granted leave of absence if the student has already attended roughly two-thirds of the course. Exceptions are possible on receipt by the Faculty Manager of a sound motivation accompanied by evidence such as a medical report. The Faculty Manager (FM) may in extraordinary cases, after discussion with the Dean or Deputy Dean, grant late LLOA.

1.3 LLOA is granted on these grounds:

• Medical reasons;
• Maternity leave; and
• Compassionate reasons.

LLOA granted for medical reasons

Medical (mental health reasons)

To apply for LLOA:

• The student must obtain a LLOA application form from the Undergraduate Student Development and Support Office (SDS).
• The student must return the completed application form with a supporting document from the student’s treating healthcare professional.
• LLOA is approved by the Faculty Manager, on recommendation of the student’s treating healthcare professional.
• The letter granting the LLOA will specify the condition/s for return, e.g. that proof be submitted of sufficient recovery to the Fit for Study Panel via the Servicing Officer.
• Only the Faculty Manager may approve LLOA in terms of UCT policy.
• The date on which the student submits the application for LLOA, together with the required supporting documents, will be the date from which LLOA will be affected, if approved. Retrospective LLOA to an earlier period in the same year is granted only in exceptional circumstances, and is never granted to the previous year, since UCT may be deemed to be claiming subsidy to which it is not entitled.

• Once the LLOA application process has been concluded, the Student Development and Support Administrator will inform the student in writing, the relevant course convenors, course administrators, Fees office, Housing, Undergraduate Funding Office / Financial Aid Office (where relevant) and the Undergraduate Academic Administration (UG) Office about the LLOA.
• Students granted LLOA for medical (mental health) reasons must apply to return via the UCT Fit for Study Panel. Before the student’s return, the student’s treating healthcare professional/s must submit a confidential report/s (on a prescribed template) to the Panel and make a recommendation if the student is fit to return.
• Students who are permitted to return may be given probationary conditions for such return.
• The outcome of the assessment will be communicated by the Fit for Study Panel directly with the student.
• Should the Fit for Study Panel decide the student is not ready to return, the student will be required to take extended LLOA in consultation with the Faculty’s Student Development and Support Office, where extended LLOA will be processed.
• The student will then once again have to apply via the Fit for Study Panel to return at the end of the extended LLOA period.
• Students who are not permitted to return may request a review of the Fit for Study Panel’s decision. Such requests may be sent to the Office of the Vice Chancellor via the Director, Vice-Chancellor’s Office using the generic email address: vc@uct.ac.za
• The outcome of the review will be communicated by the Fit for Study Panel directly with the student.
Medical (any medical condition other than mental health reasons)

To apply for LLOA:

- The student must obtain an LLOA application form from the Undergraduate Student Development and Support (SDS) Office.
- The student must return the completed application form with a supporting document from the treating healthcare professional.
- LLOA is approved by the Faculty Manager, on recommendation of the treating healthcare professional.
- The letter granting the LLOA will specify the condition/s for return, e.g. that proof be submitted of sufficient recovery to the Undergraduate Student Development and Support Office via the Servicing Officer for SDS Committee.
- Once the LLOA application process has been concluded, the Student Development and Support Administrator will inform the relevant course convenors, course administrators, Fees office, Housing, Undergraduate Funding Office / Financial Aid Office (where relevant) and the Undergraduate Academic Administration Office about the LLOA.
- Only the Faculty Manager may approve LLOA in terms of UCT policy.
- Students on medical (any medical condition other than mental health) leave do not need to apply to the Fit for Study Panel to return.

LLOA granted for maternity and compassionate reasons

LLOA granted for maternity reasons

To apply for LLOA:

- The student must obtain a LLOA application form from the Undergraduate Student Development and Support (SDS) Office.
- The student must return the completed application form with a supporting document (including confirmation of due date of the baby from the doctor providing the student with professional care during the pregnancy.
- LOA is approved by the Faculty Manager, on recommendation by the treating healthcare professional.
- The letter granting the LOA will specify the condition/s for return, e.g. the student’s confirmation to return at the end of the LOA.
- Once the LOA application process has been concluded, the Student Development and Support Administrator will inform the relevant course convenors, course administrators, Fees office, Housing, Undergraduate Funding Office / Financial Aid Office (where relevant) and the Undergraduate Academic Administration Office about the LOA.
- Only the Faculty Manager may approve LOA in terms of UCT policy.
- Students on maternity leave do not need to apply to the Fit for Study Panel to return.

LLOA granted for compassionate reasons

To apply for LLOA:

- The student must obtain an LLOA application form from the Undergraduate Student Development and Support (SDS) Office.
- The student must return the completed application form with a supporting document from the treating healthcare professional (if relevant).
- The letter granting the LLOA will specify the condition/s for return, e.g. the student’s confirmation to return at the end of the LLOA.
- Once the LLOA application process has been concluded, the Student Development and Support Administrator will inform the relevant course convenors, course administrators, Fees office, Housing, Undergraduate Funding Office / Financial Aid Office (where relevant) and the Undergraduate Academic Administration Office about the LLOA.
- Only the Faculty Manager may approve LLOA in terms of UCT policy.
- Students on compassionate leave do not need to apply to the Fit for Study Panel to return.

1.4 Students have no access to University facilities while on LLOA. This includes residence accommodation.

1.5 Should LLOA be granted before the due date for course withdrawals (see Fees handbook) the courses will be removed from the student’s record. Should the LLOA be granted after the due date for course withdrawals, the PeopleSoft system automatically enters an INC (incomplete) or AB (absent) on the student’s academic record.
1.6 Ordinarily, leave of absence has no impact on fee liability. This means students are liable for fees or eligible for rebates depending on the date the LLOA was granted (see Fees Handbook for rebate due dates). In exceptional circumstances, where the Dean believes there are compelling compassionate reasons for granting a fee rebate greater than is set out in the Fees rule 2.7 of the Fees Handbook, the Dean may recommend to the Director of Finance that a Technical Fee Waiver be implemented. The motivation should be accompanied by substantive supporting documents. This applies only to tuition fees.

1.7 The rule of fee liability applies also to students on NSFAS funding, and the fact that a student receives NSFAS funding do not constitute grounds for seeking a technical fee waiver. NSFAS funding is not automatically extended to cover LLOA. The Financial Aid Appeals Committee will however consider applications for additional funding in cases where NSFAS students are granted LLOA. The strength of the student’s academic record may be a determining factor.

2. (Short) Leave of Absence (SLOA)

2.1 SLOA (usually for period not exceeding one week) may be granted for medical, compassionate or other approved reasons on application to the course conveners.

2.2 There are two categories of SLOA:
• Cases where missed work can be made up, by arrangement between the convener and the student; and
• Cases where missed work cannot be made up, and when the student will be required to repeat the course.

2.3 The student is required to obtain approval from the course convener/s during whose courses the absence will take place. The student must obtain an application form from the administrator in the relevant academic department from which the student wish to obtain leave and with supporting documentary evidence.

2.4 The student must then submit the completed SLOA form with the supporting documents to the administrator in the relevant department from which the student wish to obtain leave. The administrator will obtain approval from the Year Convener or Phase Convener (where relevant) to ensure a consistent approach. The administrator will inform the student of the outcome in an email. The relevant administrator will send copies of all signed-off SLOA forms to the Student Development and Support Administrator in the Faculty Office, who will track all SLOA decisions for the record.

2.5 In the case of a very short absence, such as a portion of a day, or any other exceptional circumstances of brief duration, an explanatory letter by the student may be accepted as supporting document.

UCT FHS Leave of Absence policy guidelines

FHS SLOA application forms

SLOA Form A. Health and Rehabilitation Sciences undergraduate (years 1 - 4)

SLOA Form B. MBChB undergraduate (years 1 - 3)

SLOA Form C. MBChB undergraduate (years 4 - 6)
Policy
Policy A. TB policy for FHS students

Reducing the risk of tuberculosis (TB) in undergraduate Health Sciences students

South Africa is at the centre of the HIV and TB pandemics. The lifetime risk of TB for individuals with latent TB infection (up to 60% of the South African population) in non-HIV-infected persons is approximately 10%, increasing to >10% per year in HIV-infected persons. Hence, the approach to reducing your risk of TB is intimately linked to knowing and acting upon your HIV status.

It is important to note there is a fee for TB testing and TB treatment is free. The TB testing cost is not covered by the UCT Benefit Scheme for Students (The Scheme), see page 51.

Know your HIV status

All students at the UCT should be offered counselling and testing for HIV infection. Any student who will have contact with patients or will work in a hospital, community health centre or clinic environment must have undergone counselling and education surrounding the issues of HIV testing.

Minimising risk of TB transmission in the workplace

Due to the massive burden of TB in South Africa, students working in a healthcare environment will be unable to avoid contact with TB patients at all times.

It is, however, impractical to wear protective masks continuously. The following measures will be enforced to reduce risk:

Education

All health sciences students will be specifically educated as to the risks of acquisition of TB and as to the preventive measures which should be taken to minimise such risks. Record of such education will be a prerequisite before any patient contact.

All health sciences students will be made aware of the common symptoms associated with TB – that is, cough, night sweats, loss of appetite and loss of weight.

Students should be encouraged to seek medical advice from UCT’s Student Wellness Service or any other health facility of their choice if these symptoms occur.

Risk avoidance

Students must if at all possible avoid contact with patients who are known to have multi-drug resistant (MDR) or extensively drug resistant (XDR) pulmonary TB.

Students must NOT enter an isolation cubicle accommodating a patient with MDR or XDR pulmonary TB or one accommodating a patient with extrapulmonary MDR or XDR TB, where pulmonary involvement has not been ruled out.

Students will not receive bedside teaching from medical staff using patients known to have MDR or XDR pulmonary TB.

Students whose immune systems are compromised

Students who are immunocompromised for whatever reason (HIV-infected, on long-term immunosuppressants such as corticosteroids or methotrexate, have cancer, are struggling with stress and poor nutrition, etc.) are encouraged to discuss their health with UCT’s Student Wellness Service or any other health facility of their choice. There is a vital role for isoniazid preventive therapy (IPT) for some of these students (e.g., those with a positive tuberculin skin test) and, for those who are HIV-infected, antiretroviral therapy may be indicated.
Risk reduction through personal protective wear: masks

In the following circumstances, students should be required to wear a protective mask:

- Any student diagnosed with TB is urged in the strongest possible terms to ensure that they know their HIV status in order to ensure optimal treatment.
- A student who is found to have TB is also strongly encouraged to confidentially advise the Student Development and Support Office of their TB status in order to enable the Faculty to help ensure that they receive whatever support and essential treatment and follow-up are needed.
- In the case of drug-sensitive pulmonary TB, a student should stay out of class and out of the work environment for two weeks after diagnosis and commencement of treatment. With pulmonary MDR-TB, while the final decision will be in the hands of the attending doctor, generally a return to class and work should be allowed once they have sputum converted (established to be culture-negative on two occasions from sputum taken one month apart).

Reporting

The Student Development and Support Office will maintain a confidential record of all students who have reported their diagnosis of TB in order to ensure such students are appropriately managed through their illness.

The Head of the Faculty’s Student Development and Support Portfolio will monitor infections on the basis of confidential student TB statistics made available to him/her monthly by the Student Development and Support Office. If there are sudden changes in incidence, they can initiate an investigation – including consultation with the Head of the Division of Infectious Diseases and HIV Medicine – with a view to preventing further infections.

Leave of Absence as a result of side effects from TB treatment

An important note to students: If you suffer from side effects or feel unwell while taking TB medication, please make early contact with the Student Development and Support Committee (contact details below).

All staff should note that students must be allowed to take time off if they feel unwell. Illness caused by the side effects of treatment should be treated like all other illnesses, and if this is the case, students should consult a doctor. If students are not able to get a satisfactory response (particularly regarding sick leave) they should contact the Student Development and Support Committee:

Primary contact:
- Nonkosi Malala  Tel 021 406 6749
- Prof Sipho Dlamini  Tel 021 404 3166
- Dr Ayanda Gcelu  Tel 021 406 2131
- Prof Marc Blockman  Tel 021 406 6496

Students should be allowed to work half days without needing to make up the clinical time. Alternatively, plans should be in place for them to make up the time on weekends or over holidays to ensure their DP requirements are met.

Policy A: TB policy for FHS undergraduate students
Policy
Policy B. Policy on student sexual and physical harassment by patients

Preamble

The University of Cape Town (UCT) is committed to providing an institutional environment where all students may pursue their studies, careers, duties and activities free from any form of harassment. While this policy focuses on physical and sexual harassment, any form of harassment of students will not be tolerated.

The focus of this policy is on the prevention and management of sexual and physical harassment incidents in the Faculty of Health Sciences (FHS) and should be understood in the context of other University policies and statements, including:

- UCT Policy on Sexual Harassment;
- UCT Sexual Offences Policy;
- Policy of Race and Racism;
- Constitutional protections against discrimination based on gender, religion, etc.;
- The Health Professions Act;
- The National Patents’ Rights Charter which requires patients to respect the rights of fellow patients and health care providers and to utilise the health care system properly and not to abuse it; and
- Protection from Harassment Act, No. 17 of 2011.

The FHS at UCT is committed to ensuring that students are safe during their training at all clinical teaching sites. The FHS wants to ensure that in cases where students suffer any form of abuse from patients, measures are taken to fully address the issue and protect other students from such behaviours.

This policy therefore aims to encourage the reporting of such incidents so that there is opportunity for the FHS to provide a comprehensive complainant-centred response.

Furthermore, information obtained from the reports will be used anonymously to record the statistics of such incidents and to regulate procedures for addressing violations of this policy. The Department of Health (DoH), as the custodian of the patients involved, will be notified of such incidents. The DoH will be asked to invoke its policy on harassment.

Definitions

Sexual harassment: is unwelcome conduct of a sexual nature that violates the rights of a person. In determining whether conduct constitutes sexual harassment the following factors are to be taken into account:

- Whether the harassment is on the grounds of sex and/or gender (regardless of the sexual orientation of either the complainant or the alleged perpetrator);
- The impact of the sexual conduct on the complainant;
- Whether the sexual conduct was unwelcome; and
- The nature and extent of the sexual conduct.

Unwelcome sexual conduct: includes behaviour that is perceived by the complainant as demeaning, compromising, embarrassing, threatening and/or offensive:

- The assessment of what is unwelcome should be informed by context, including culture and language; and
- Previous consensual participation in sexual conduct does not mean that the conduct continues to be welcome.
Sexual harassment: may include unwelcome verbal conduct which may include innuendos, suggestions or hints of a sexually explicit nature, sexual advances, sexual threats, comments with sexual overtones, sex-related jokes or insults, graphic comments about a person’s body, inappropriate enquiries about a person’s sex life, whistling of a sexual nature.

Sexual assault: means an unlawful and intentional act of sexual contact with another person without that person’s consent.

Rape: means an unlawful and intentional act of sexual penetration with another person without that person’s consent.

Sexual penetration: means an act which causes penetration to any extent by the penis or an object used by the alleged perpetrator into the anus, mouth or vagina of the victim.

Student: means a registered student of the University or a person who has agreed to be bound by the rules and policies of the university relating to students.

Most Senior Professional (MSP): means the registrar/consultant or nurse in-charge of the ward or health institution where the incident occurred.

Alleged perpetrating patient: means a patient in any of the health institutions comprising the clinical teaching sites of the FHS, UCT, whether in/out-patient, alleged to have committed an offence of physical or sexual abuse/harassment to the student.

Injury: includes any form of physical, sexual, emotional or psychological harm or injury.

The University: means the University of Cape Town (UCT).

The Faculty: means the Faculty of Health Sciences (FHS).

The Western Cape DoH: means the Western Cape Department of Health.

The SDSC: means the Student Development and Support Committee.

The SAPS: means the South African Police Service.

SADAG UCT Student Careline

© 0800 24 25 26 free from a Telkom line or © sms 31393 for a call-me-back.

This line offers 24/7 telephonic counselling, advice, referral facilities and general support to students facing any mental health challenges or contemplating suicide. The line is available to offer support and advice to anyone who is concerned about a student who might be in distress. The line is able to advise and refer callers to both internal UCT resources and external (NGO, public and private) mental health resources.

The SADAG address is 28 Rhodes Avenue, Mowbray (close to the Forest Hill Jammie Shuttle stop).

To book appointments, contact our receptionists at the following telephone numbers:

© Tel 021 650 1020 (Medical)
© Tel 021 650 1017 (Psychological counselling)

Hours: Monday to Friday from 08h30 to 16h30

Please make use of the SADAG UCT Student Careline if you are placed on a waiting list by reception at the Student Wellness Service or if you require emotional support while waiting for an appointment.

The SADAG website contains useful information about mental health issues and details of their national helplines: © www.sadag.org

© Policy B: Policy on student sexual and physical harassment by patients
Policy
Policy C. UCT Benefit Scheme for Students (The Scheme)

The University operates a scheme, which aims to supplement registered students’ private medical aid or insurance schemes, in the event of UCT-related unintentional injury.

Provision is made for students who have applied and are granted a grace period to settle their outstanding fees.

The Scheme also provides funeral benefits.

Maximum benefits

Funeral Expenses: R10 000.

Medical Expenses: R8 000 or R25 000 (where the student is involved in an official field trip for academic purposes) - in both instances the first R100 of any claim is borne by the claimant.

Physiotherapy Expenses (at the UCT Sports Injuries Centre): R700.

The Scheme is effective from 48 hours prior to the start of term and expires 48 hours after the close of term.

The Scheme includes any sporting, cultural or academic activity under the auspices of the University outside this period e.g. the Scheme covers a student who is required to participate in a sports tour (provided the student is a member of a specific club); attend a conference; or undertake academic work during the vacation in connection with their academic course, such as fieldwork or an engineering workshop practice. Winter sports, mountaineering (with the use of ropes), hang-gliding and motor-cycling are included (but exclude racing) provided the student is a member of that UCT club.

Important notes

• The Scheme is not a medical aid scheme or an insurance policy, but is designed as a contingency measure against unanticipated medical expenses arising out of personal injury resulting from UCT-related unintentional injury.
• The Scheme offers an added benefit for funeral expenses.
• Students are expected to have adequate private medical aid or insurance cover. The Scheme should not be used instead of a medical savings account, or where a student has elected not to cover day-to-day medical costs.
• The Scheme is not adequate, on its own, in many cases. Students are encouraged to seek advice at UCT’s Sports Injuries Centre or Student Wellness Services in order to control costs.
• Students are liable for all expenses incurred even though the university administers the process for students to claim for those medical expenses which fall within the rules of The Scheme. Students may face litigation by medical practitioners e.g. hospitals, doctors if they fail to pay for all expenses incurred.
• Students in residence should provide their own insurance of all personal possessions. The University does not accept liability for any personal items that may be stolen or damaged.
UCT Benefit Scheme for Students
(The Scheme)

The University operates The Scheme, which aims to supplement students’ private medical aid or insurance schemes in the event of UCT-related unintentional injury also provides assistance with funeral, medical and physiotherapy expenses.

**Maximum benefits**

- **Funeral expenses** R10 000.
- **Medical expenses** R8000 or R25 000 where the student is involved in an official field trip for academic purposes (in both instances the first R100 of any claim is borne by the claimant)
- **Physiotherapy expenses** at the UCT Sports Injuries Centre: R700

**Enquiries / Claims**

Medical Administrator
UCT Student Wellness Service
Rhodes Avenue
Mowbray
7700
Tel 021 650 1020 / 1019
Exclusions from The Scheme

The following exclusions apply, and events consequent upon:

- Unregistered students.
- War, invasions, and act of foreign enemy.
- Engaging in active military service.
- Suicide.
- Needles exposure to danger (except in an attempt to save life).
- Air travel other than as a passenger.
- Underground mining, tunnelling or related activities.
- Contributed to or caused by a pre-existing physical defect or infirmity.
- As a result of the influence of alcohol, drugs or narcotics upon the student (unless administered by a member of the medical profession).
- Criminal acts.
- While on any maritime rig, platform or similar structure unless on UCT business.
- Infection with HIV or AIDS or ARC or any related condition.
- Pregnancy or childbirth.
- Racing of any kind (other than on foot or under sail), professional sports, parachuting, sky-diving, or mountaineering that requires the use of ropes or guides, and hang-gliding unless the student belongs to a specific club.
- Physiotherapy costs, unless following an accident and prescribed by a qualified medical practitioner.

Unintentional injuries: Treatment costs are covered by UCT only if treatment is received from government hospitals. Should a student choose to use their medical aid or a private hospital for their treatment, they will be liable for the payment of those costs. The Faculty will not reimburse.

Additional rules

1. Notification of injury and intention to claim must be submitted within seven days of the injury being sustained, i.e. a Scheme Claim Form is to be correctly completed at either the UCT Sports Injuries Centre (UCT Sports Centre) or UCT’s Student Wellness Service (Rhodes Avenue, Mowbray). Should this be impossible, the Medical Administrator must be informed by telephone: Tel 021 650 1020 / 1019

2. Receipted invoices must be submitted to: Medical Administrator, Student Wellness Services, 28 Rhodes Avenue, Mowbray, 7700.

3. Claims must be lodged within one month of the injury date, unless the attending doctor certifies that continuing treatment is necessary, and is a result of the original accident.

4. Only sporting activities which fall under the auspices of the university are covered by the Scheme.

5. A student, playing for a non-university club, a provincial or national team is not covered. SATISU representative teams function under the auspices of South African universities and UCT participants are therefore covered by the Scheme.

6. Students are covered during their electives and while on duty with organisations such as SHAWCO.

Enquiries / Claims

Medical Administrator
UCT Student Wellness Services
Rhodes Avenue
Mowbray
7700
Tel 021 650 1020 / 1019

Policy C: UCT Benefit Scheme for Students
References and Further Reading

**Cyber Safety Resources**

- Internet Service Providers’ Association (ISPA)
- South African Banking Risk Information Centre (SABRIC)

**Major bank online security links**

- Standard
- Capitec
- Nedbank
- Absa
- FNB

**Cyber Bullying**

- Cyber Bullying: A complete resource guide
- Cyberbullying Research Center

**Social media**

Has this Handbook been useful? Any suggestions for improvement?

For comments on this Handbook and suggestions as to how it could be improved and made more useful, please click here and send us your feedback online, or contact:

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