



**Western Cape  
Government**

Health

# **DIGITAL PRESS CONFERENCE**

Health Response Update

Dr K Cloete

10 December 2020

# Overview

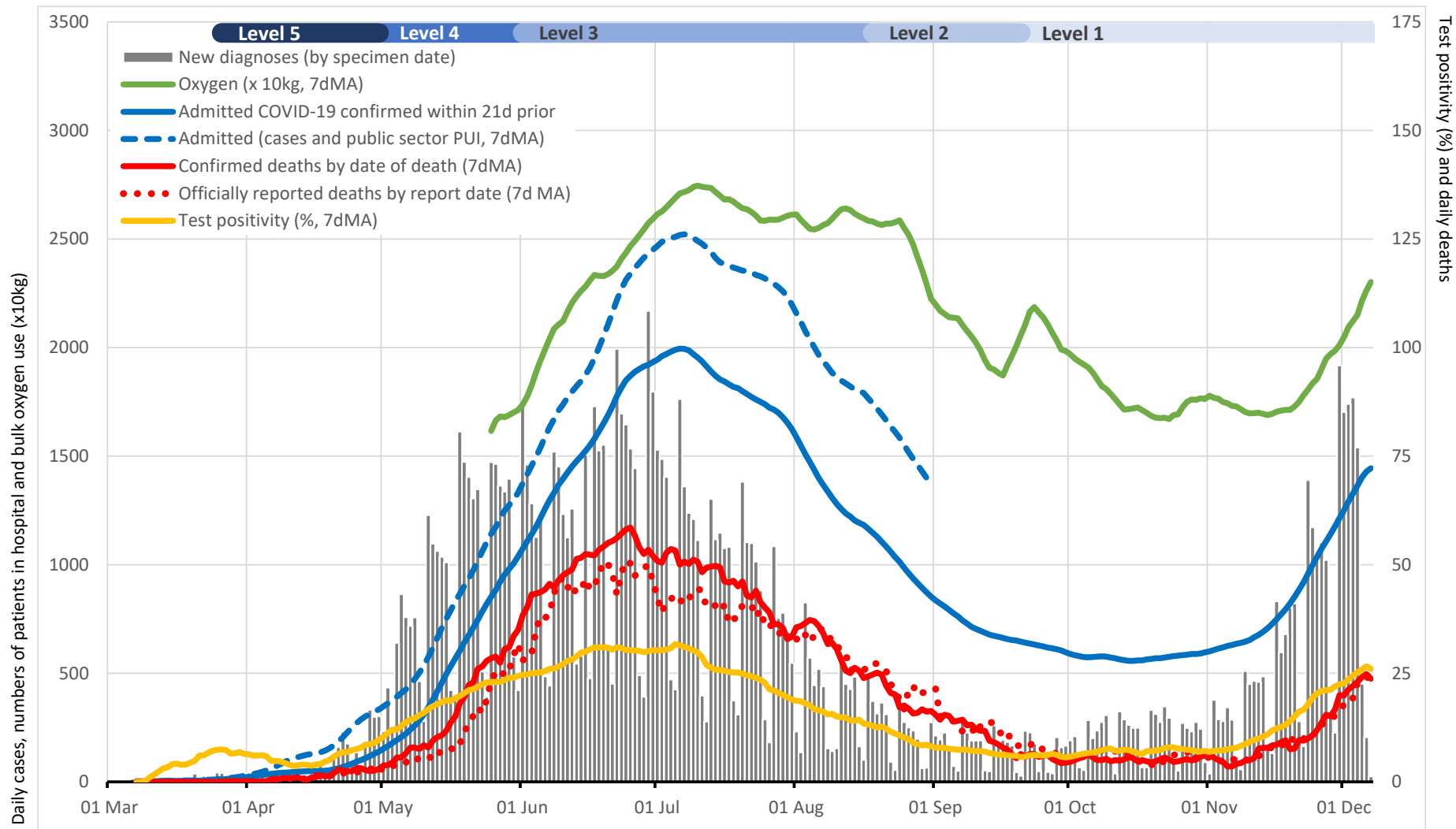
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1. Surveillance Update – Provincial trends
2. Surveillance & Response Update – District trends
3. Update on the Health System Recovery and 5-point COVID Resurgence Strategy
4. What we know about COVID-19 spread – key messages
5. Conclusions

# Surveillance Update – Provincial trends

# Integrated testing, case, hospitalisation and mortality trends

(by event dates, until 7 December 2020)





## Provincial Resurgence Overview

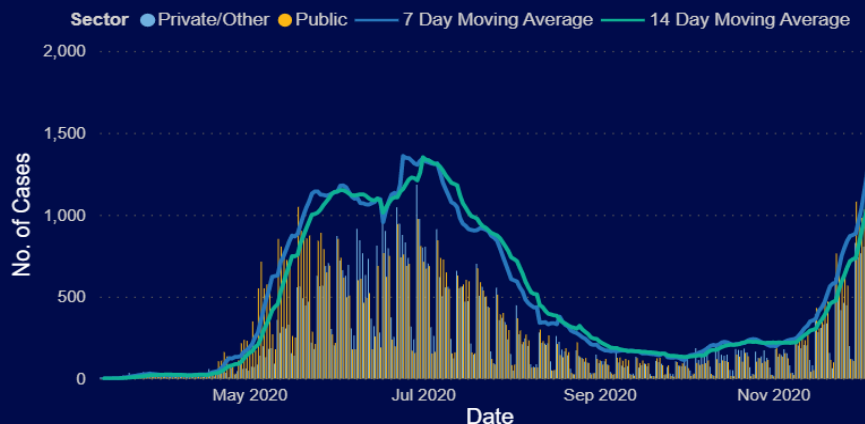
Health Impact Assessment  
WC Department of Health  
Last Updated:  
Wednesday, 9 December 2020



Select District, Subdistrict:

- ☐ Cape Winelands
- ☐ Central Karoo
- ☐ City of Cape Town
  - ☐ Eastern
  - ☐ Khayelitsha
  - ☐ Klipfontein
  - ☐ Mitchells Plain
  - ☐ Northern
  - ☐ Southern
  - ☐ Tygerberg
  - ☐ Western
- ☐ Garden Route
- ☐ Overberg
- ☐ West Coast

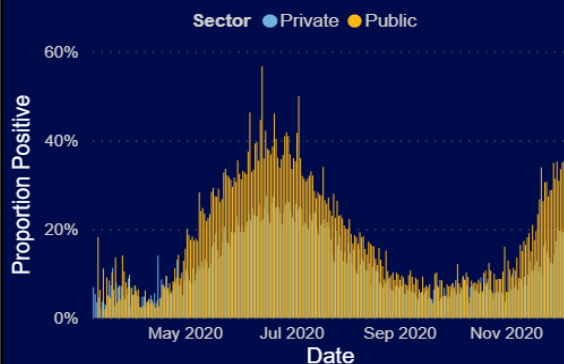
No. of Cases, 7 Day Moving Average and 14 Day Moving Average by Date and Sector



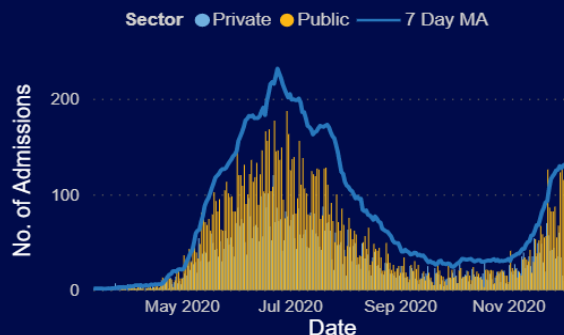
3/10/2020

12/9/2020

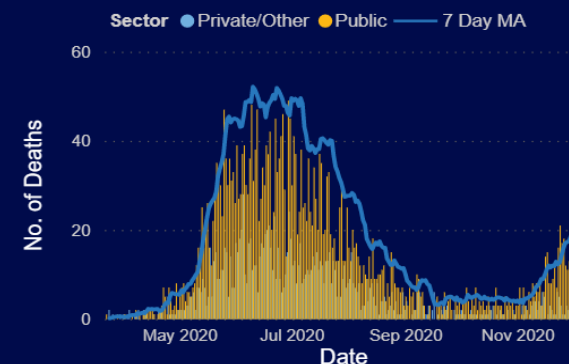
Proportion Positive by Date and Sector



No. of Admissions and 7 Day MA by Date and Sector



No. of Deaths and 7 Day MA by Date and Sector



## Provincial Overview

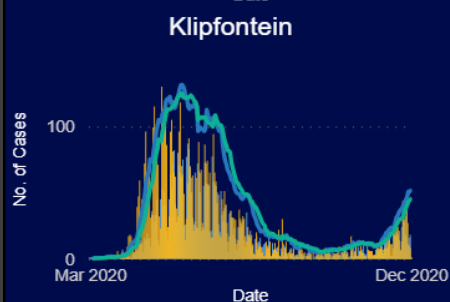
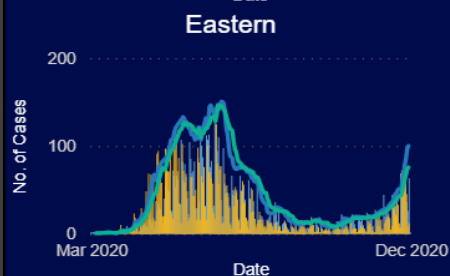
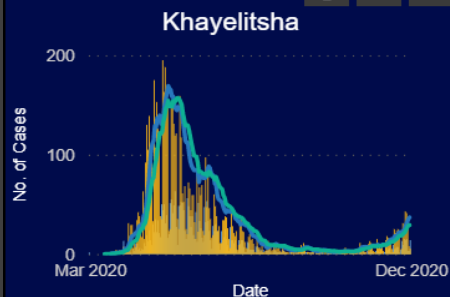
- The Province as a whole continues to see a marked increase in cases taking us to levels previously seen in June, when we were close to our peak. Hospitalisations have increased sharply since mid- November.
- The % proportion positive continues to rise, and is now above 30%, rapidly heading towards our previous peak of just over 40%.
- The key message is that cases, hospitalisations and proportion positive are rapidly headed toward levels seen at the peak of the outbreak. We must also be mindful that this time, we do not have the protection of a lockdown or an alcohol ban.



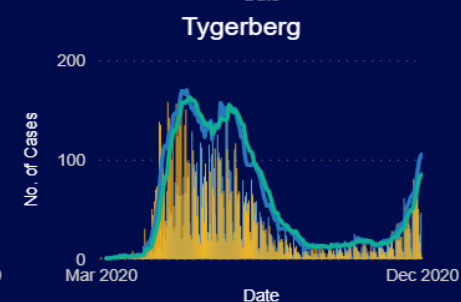
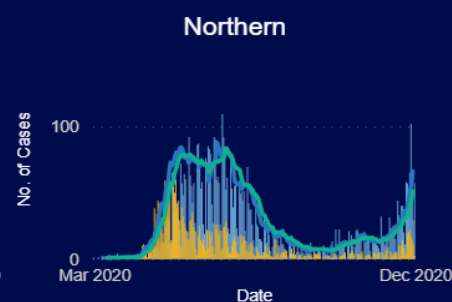
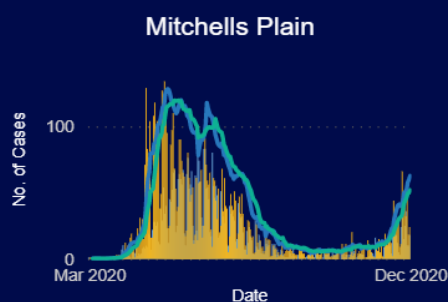
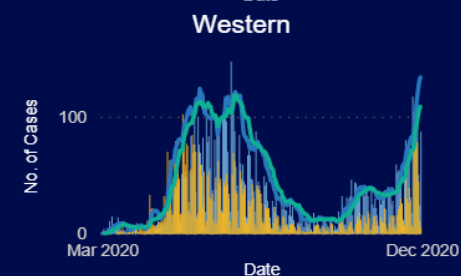
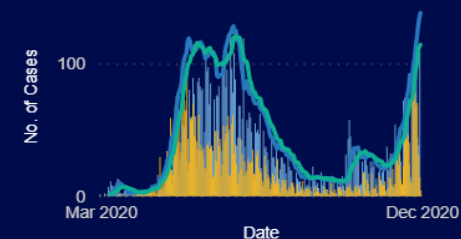
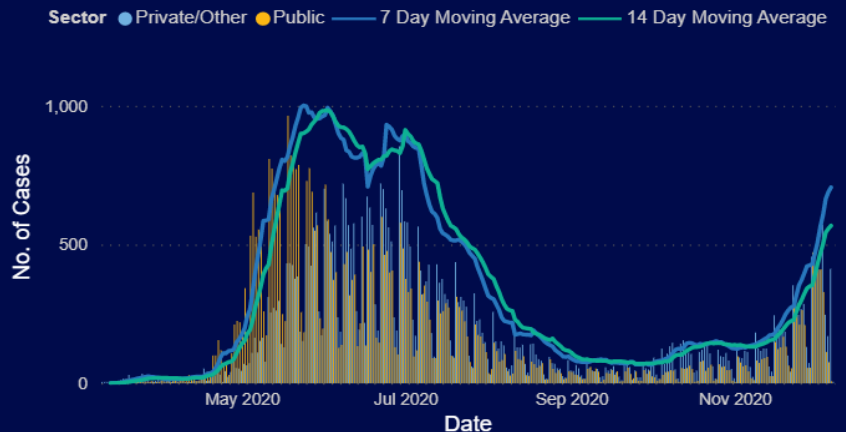
3/10/2020 12/9/2020

## Metro Resurgence Overview

Health Impact Assessment  
WC Department of Health  
Last Updated:  
Wednesday, 9 December 2020  
Southern



### Metro Overview: No. of Cases with 7 and 14 Day MA by Date and by sector



## Metro Overview

- The Metro as a whole has shown a sharp increase in cases and is on an upward trend.
- The patterns differ between subdistricts, but all areas show an increase in cases.
- The Southern and Western sub-districts show a stark and rapid increase in cases, with the 7 day moving average line exceeding the first peak for both sub-districts.

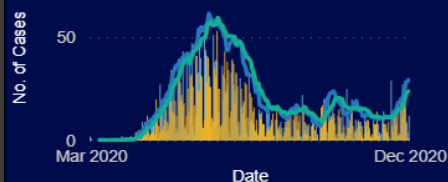


3/10/2020 12/9/2020

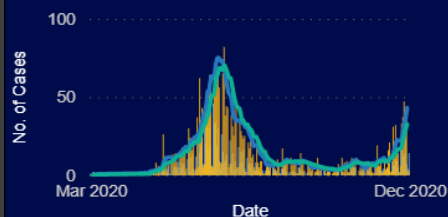
## Rural Resurgence Overview

Health Impact Assessment  
WC Department of Health  
Last Updated:  
Wednesday, 9 December ...

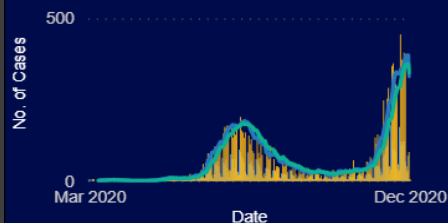
### West Coast



### Overberg

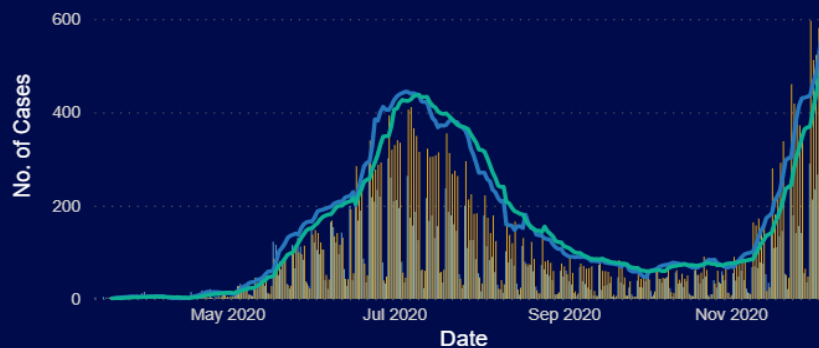


### Garden Route

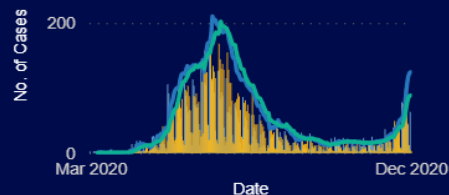


### Rural Overview: No. of Cases with 7 and 14 Day MA by Date and by sector

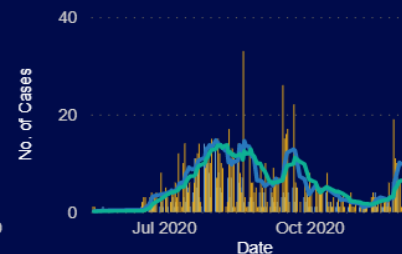
Sector ● Private/Other ● Public — 7 Day Moving Average — 14 Day Moving Average



### Cape Winelands

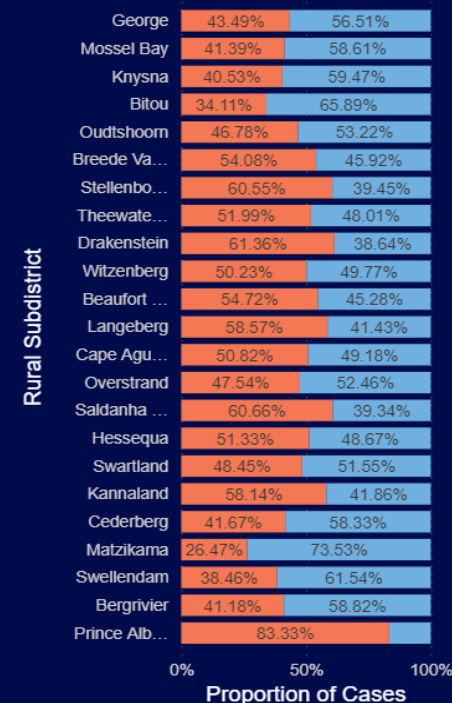


### Central Karoo



### Proportion of Cases by Subdistrict for last 7 days vs 7-14 days ago

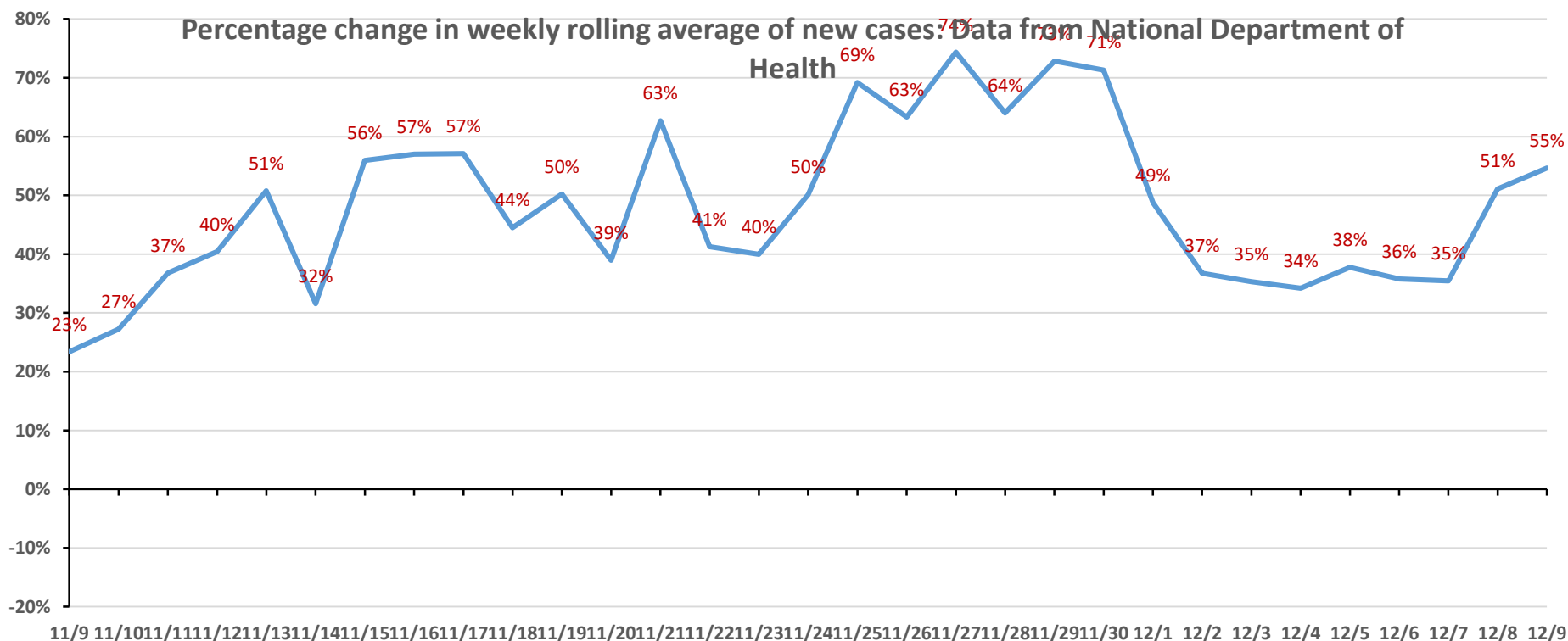
● <7 days ago ● 7-14 days ago



## Rural Overview

- Rural has exceeded its first peak.
- The Garden Route has also exceeded its first peak, but there are early signs that cases are stabilising.
- All other Rural districts are on an upward trend.

# Growth in cases based on NDoH reported case numbers



WC daily report- 2 December 2020: New COVID-19 cases in the last 7 days= 7 518

WC daily report- 9 December 2020: New COVID-19 cases in the last 7 days= 11 533

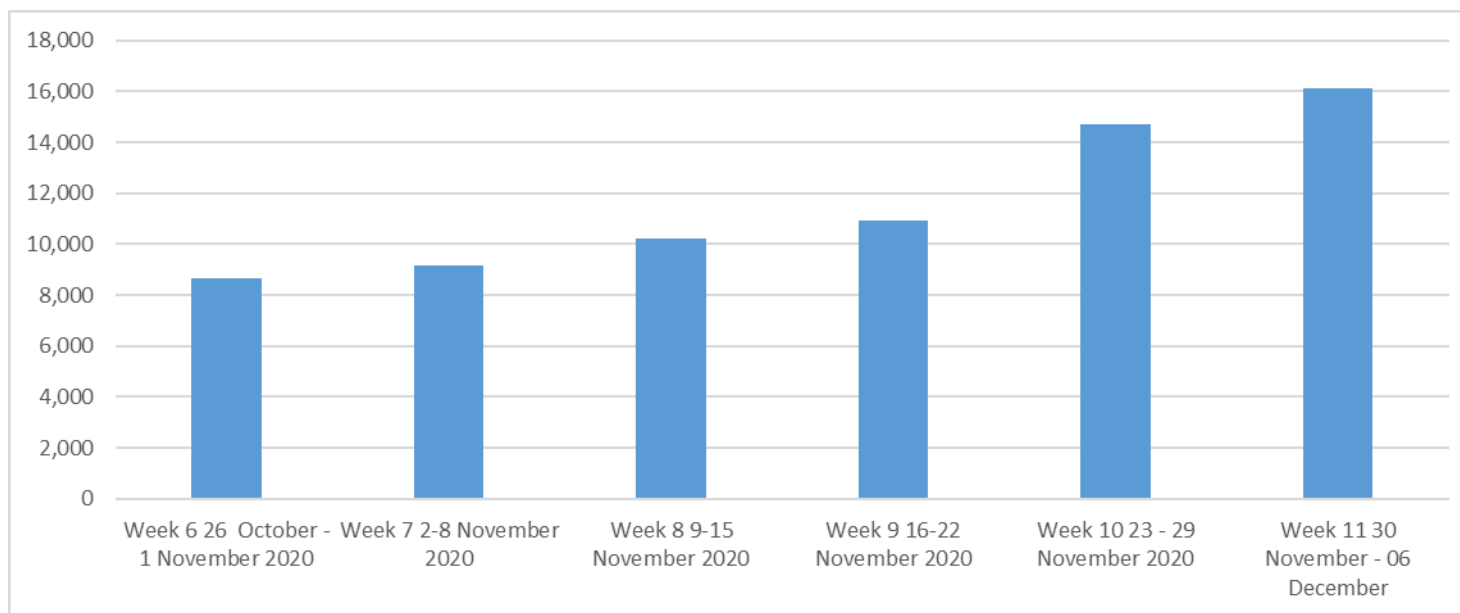
**Percentage change = 53.4%**

- Using NDOH data , we see that the percentage change in the weekly average of new cases is **55%**
- If we look at the Western Cape Data from the daily report, the percentage change in the weekly average of new cases is 53.4%
- The increase is no longer driven by the Garden Route as was the case previously. These case numbers are being driven by the Metro with contributions from all Rural districts.

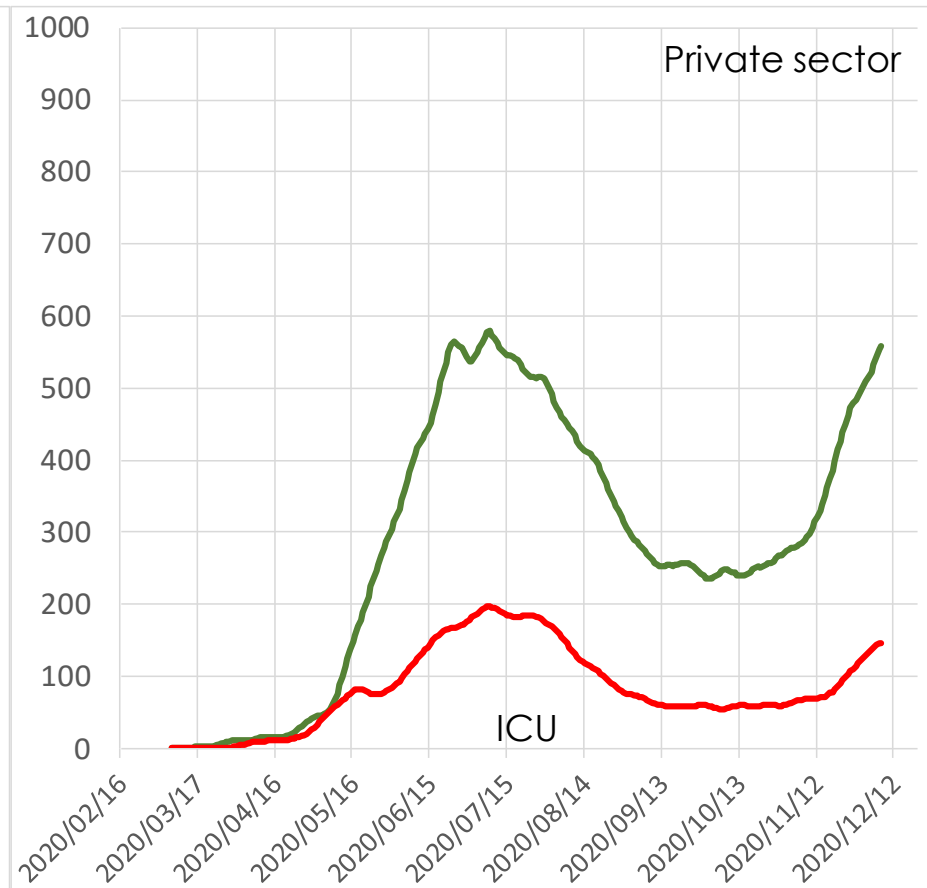
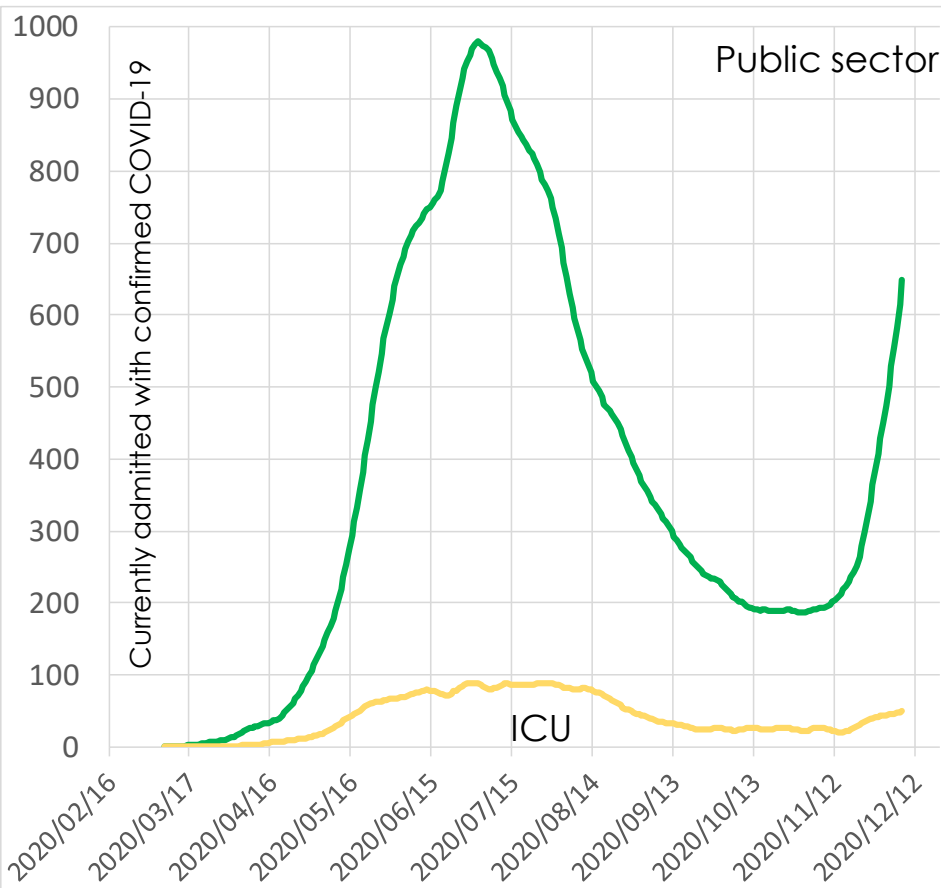


# Total Number of Tests Done

TOTAL NUMBER OF TESTS DONE	
Week	Total
Week 6 26 October - 1 November 2020	8,674
Week 7 2-8 November 2020	9,167
Week 8 9-15 November 2020	10,229
Week 9 16-22 November 2020	10,909
Week 10 23 - 29 November 2020	14,706
Week 11 30 November - 06 December	16,131
<b>TOTAL</b>	<b>69,816</b>

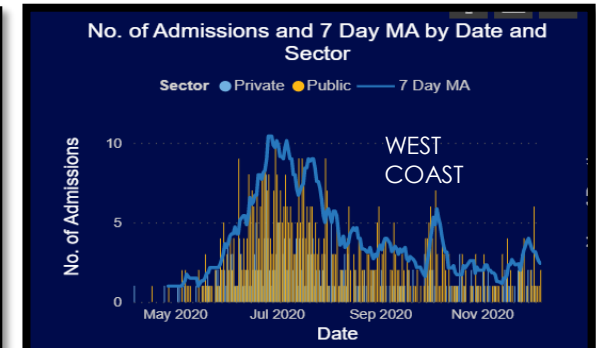
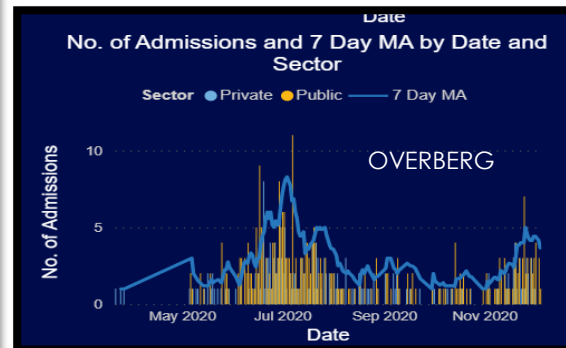
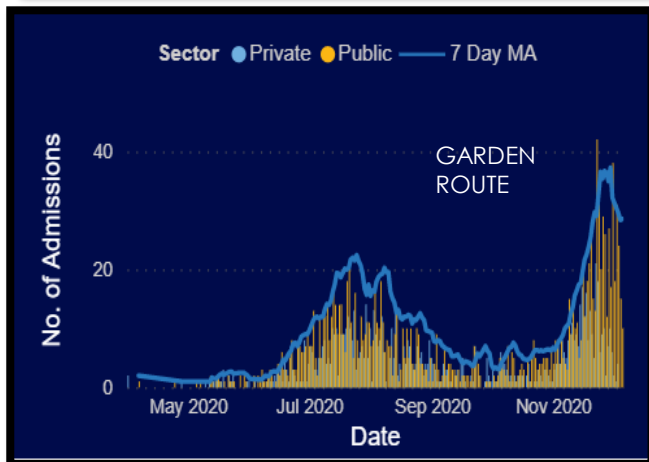
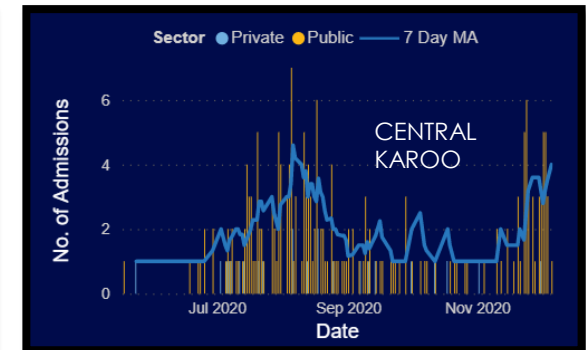
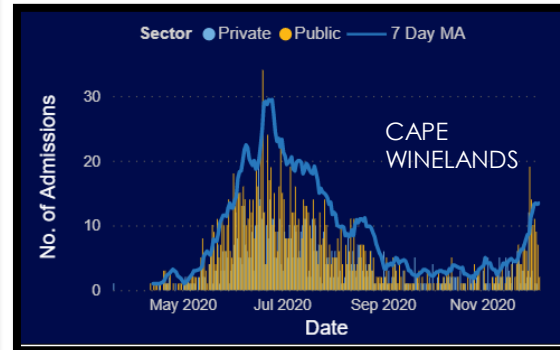
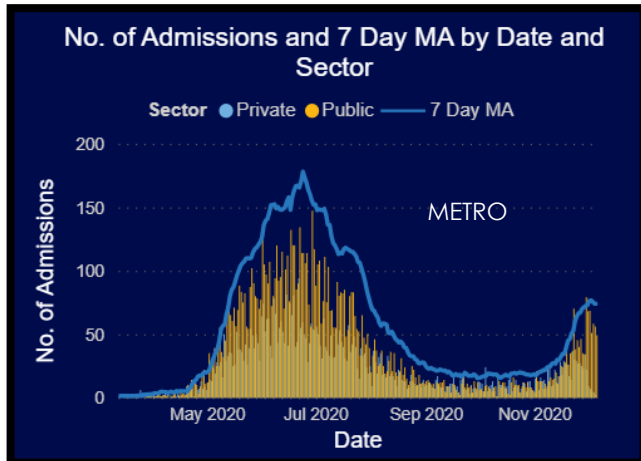


# Hospitalisation

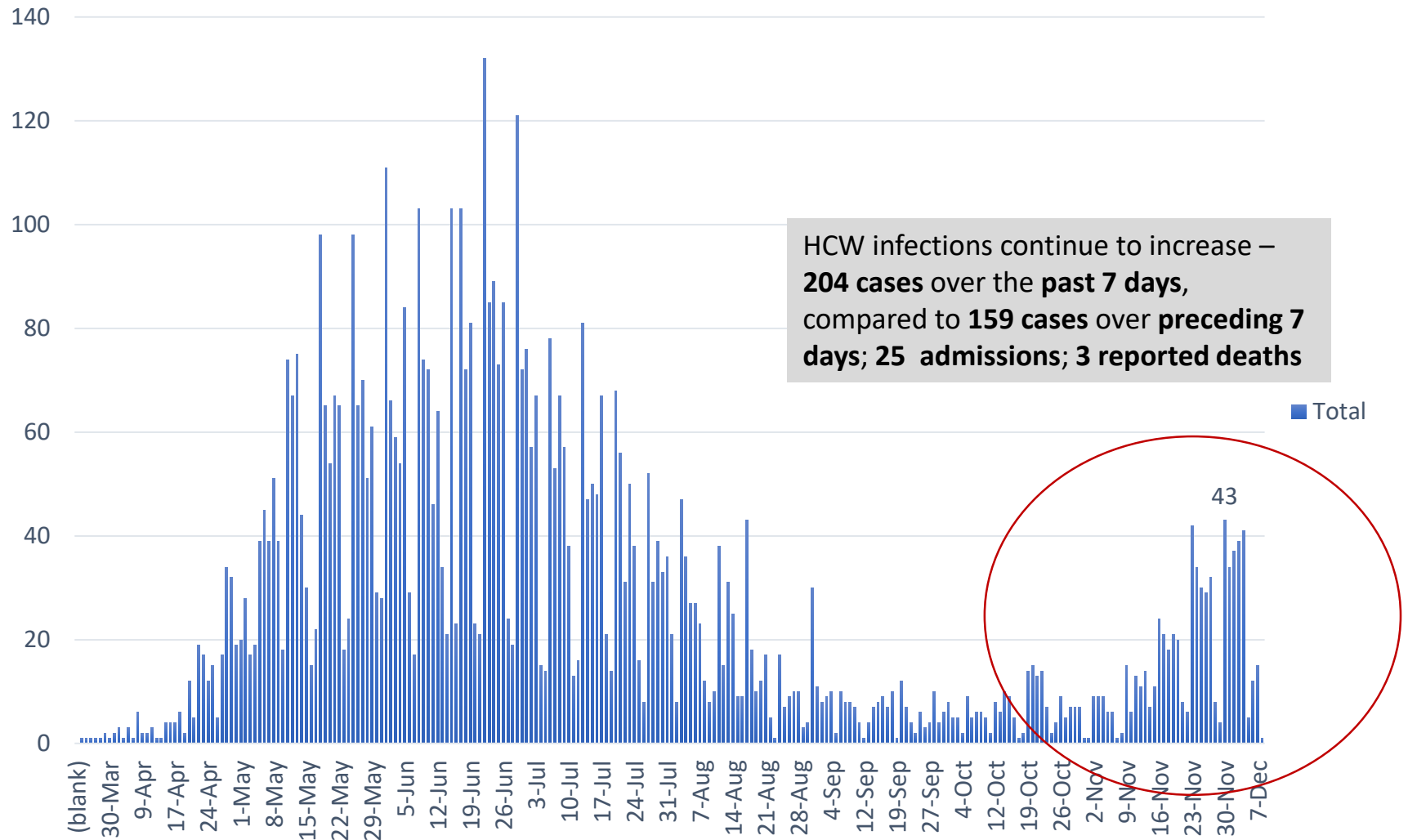


Lines are not stacked. PUIs excluded

# Hospital Admissions By Health District



# WCG: Health, Health Worker COVID-19 Infections



# COVID-19 infections in HCW- 9 November 2020-9 December 2020

## Healthcare Worker Resurgence Monitor

Health Impact Assessment  
WC Department of Health  
Last Updated:

Wednesday, 9 December 2020



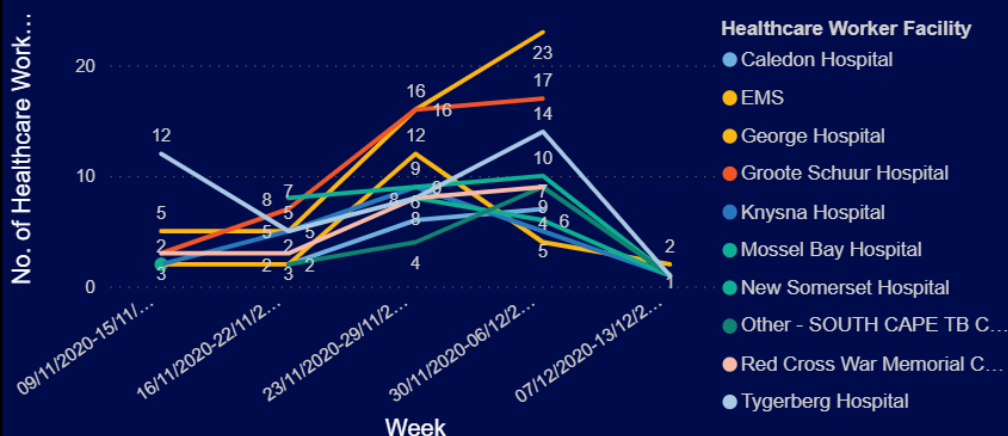
11/9/2020

12/9/2020

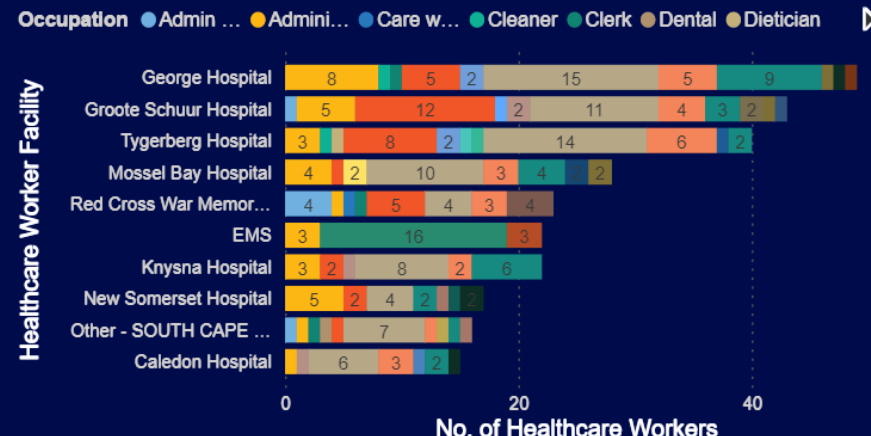
### Top 20 Facilities with COVID-19 Healthcare Worker Cases by Week

Healthcare Worker Facility	09/11/2020-15/11/2020	16/11/2020-22/11/2020	23/11/2020-29/11/2020	30/11/2020-06/12/2020	07/12/2020-13/12/2020	Total
George Hospital	5	5	16	23		49
Groote Schuur Hospital	3	7	16	17		43
Tygerberg Hospital	12	5	8	14	1	40
Mossel Bay Hospital		8	9	10	1	28
Red Cross War Memorial Children's Hospital	3	3	8	9		23
EMS	2	2	12	4	2	22
Knysna Hospital	2	5	9	5	1	22
New Somerset Hospital	2		8	6	1	17
Other - SOUTH CAPE TB CENTRE		2	4	9	1	16
Caledon Hospital		2	6	7		15
Other - DEPT OF HEALTH	3	4	1	4	1	13
<b>Total</b>	<b>38</b>	<b>61</b>	<b>116</b>	<b>135</b>	<b>10</b>	<b>360</b>

### Top 10 Facilities with COVID-19 Healthcare Worker Cases by Week



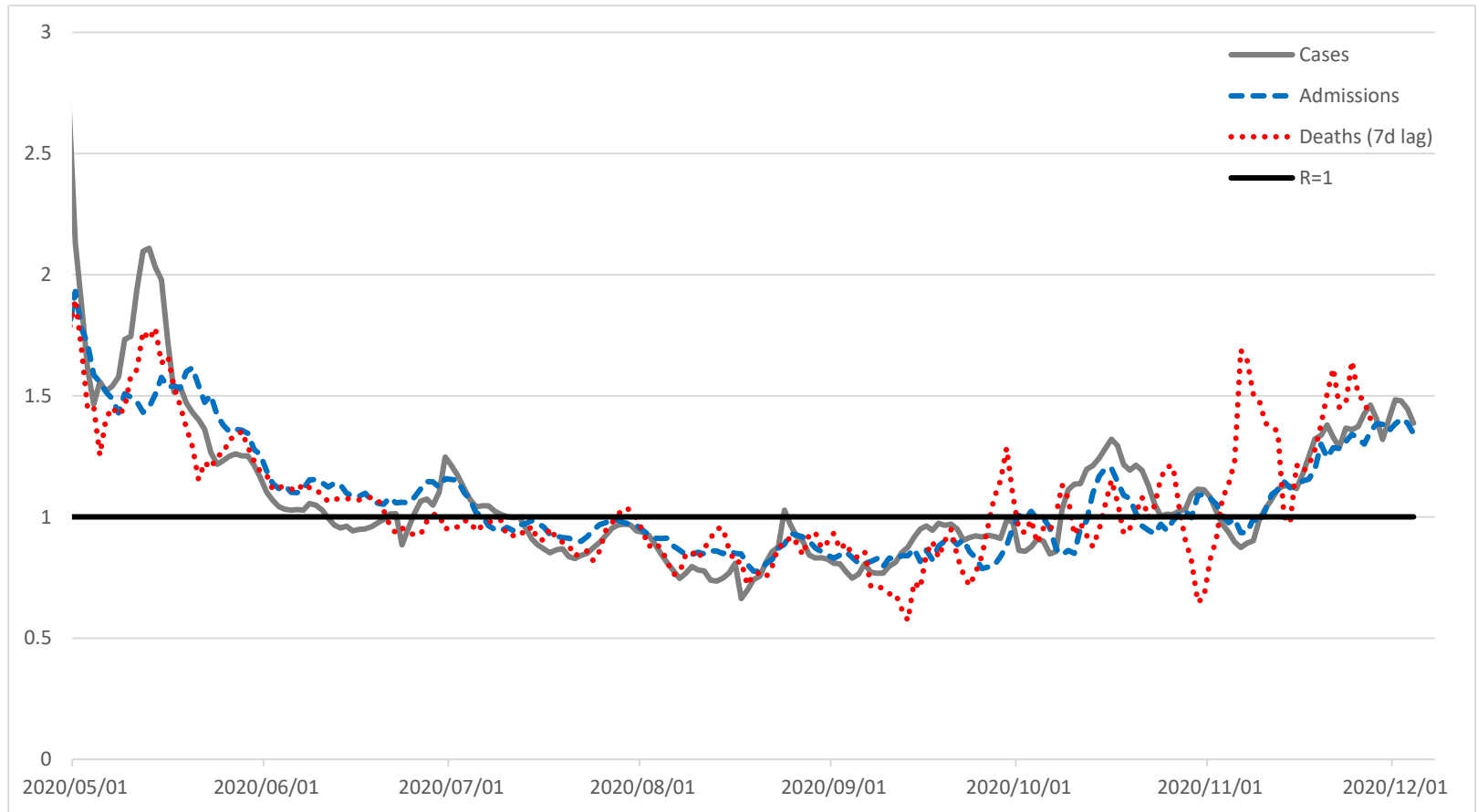
### Top 20 Facilities with COVID-19 HCW Cases by Occupation



We continue to see an increase in HCW infections week on week.

The health facilities with the most infections are in the Garden Route and the Metro, reflecting the state of the outbreak in those areas.

# $R_t$ still $\approx 1.4$ based on cases or admissions

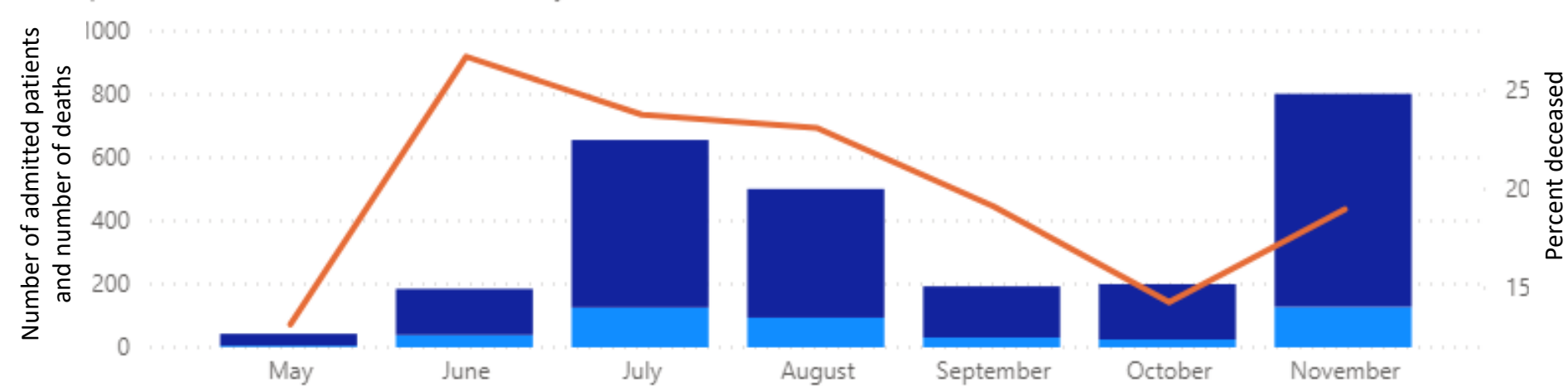


EpiEstim, 7d moving estimate

# Changes in probability of mortality in those admitted Garden Route

Garden Route only:

Inpt deaths Count of Admitted %Mortality



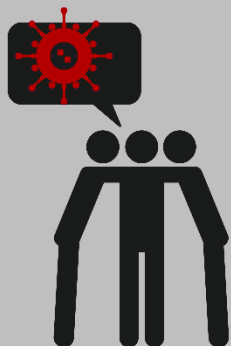
Probability of dying increases by 20-40% when daily admissions >30 in Garden Route adjusted for age, sex, comorbidities

# Surveillance & Response Update – District trends



8 December  
2020

## Surveillance Huddle Report



Surveillance Update – Tuesday 8 December 2020

### Key issues:

1. Cases increasing, contact tracing taking strain
2. Testing also under strain. This time, the problem is not lab capacity, but resources to do the test- public and private
3. Poor adherence to NPIs
4. Increasing hospital admissions and deaths
5. Multiple reports of people sharing masks in taxis
6. While there are some clusters, most cases are part of a generalized community spread pattern

### KESS

- Increase in case numbers, admissions and deaths. Situation very bad. Behaviour problematic, Minister visited hotspot on Friday. We hope that will help people improve their behaviour
- Barely keeping up with case and contact tracing, will get worse with festive season
- Admitted patients very sick

### KMPSS

- Daily increase in cases, wide-spread community transmission.
- Having several engagements with community leaders in an attempt to influence behaviour

### NTSS

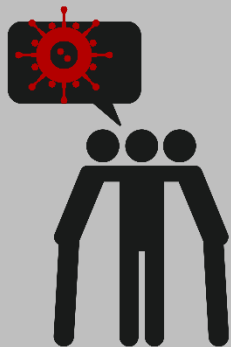
- Case load increasing, trying as best as we can Taxis also a problem- share a bucket of masks, not being washed between different passengers
- Mostly household spread, but 2 Clusters: a higher education institution, , large factory involving multiple floors.

### SWSS

- Massive increase in cases, no clusters/events 500 new cases yesterday.
- Similar situation as in June/July All public testing facilities taking strain, also private where people want to get tested before travelling.
- Concern that testing demand will outstrip supply.

**8 December  
2020**

## **Surveillance Huddle Report**



### **Cape Winelands**

- Stellenbosch: increase in cases- community spread pattern. Breede Valley, wide spread cases, especially on farms. Poor adherence to mask wearing in town and taxis
- Langeberg, increase new cases, clusters at factories noted, teachers at school, specific farms also affected
- In all sub-districts, we are busy with community outreach, loud hailing
- Also increase in hospitals admissions noted

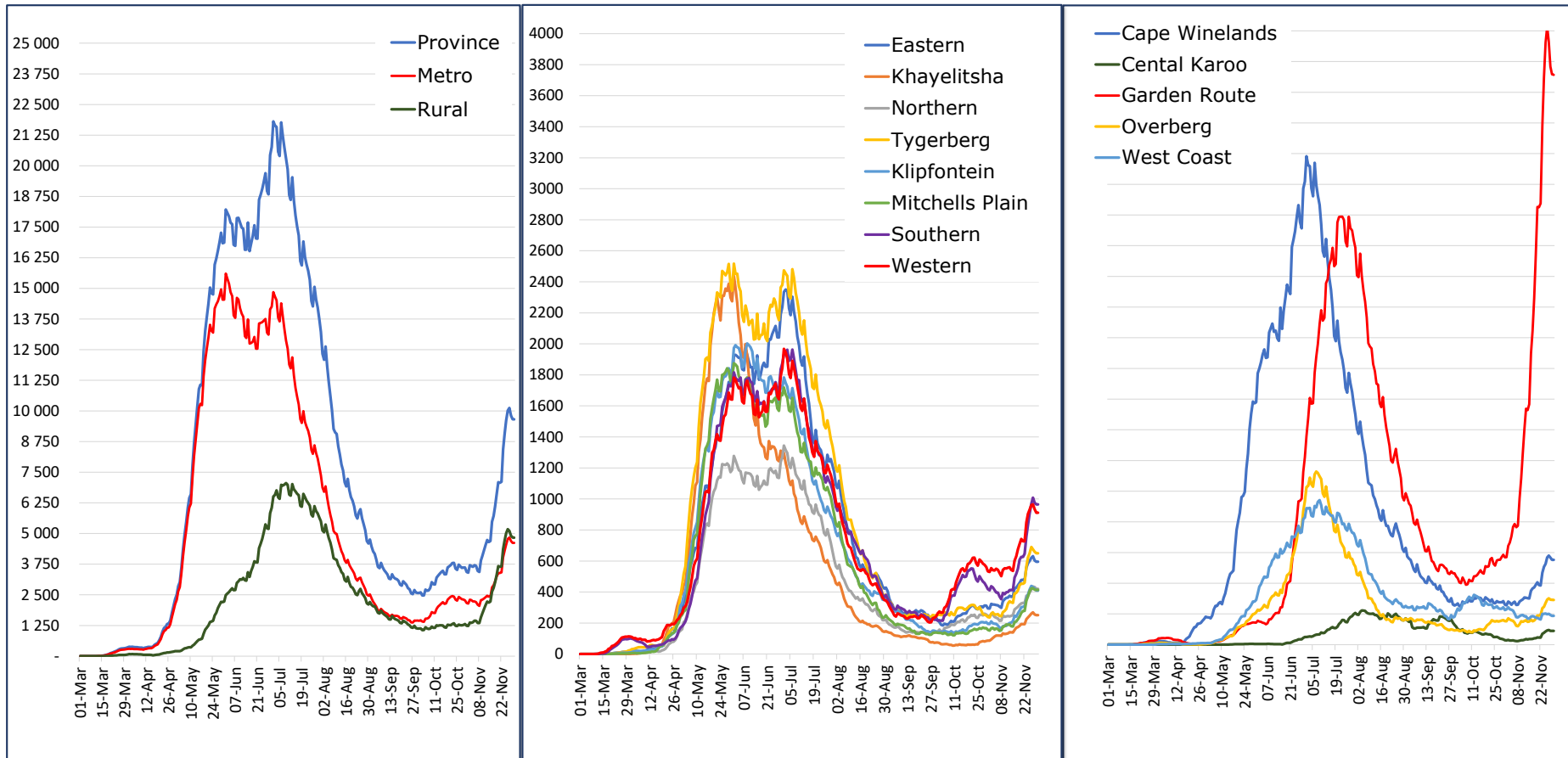
### **Overberg**

- Increasing case numbers, esp. at Theewaterskloof
- Overstrand: concern about Gansbaai and Kleinmond No superspreading events, municipality not granting permission for events
- Mostly household and workplace spread – especially taxis/buses, law enforcement will help

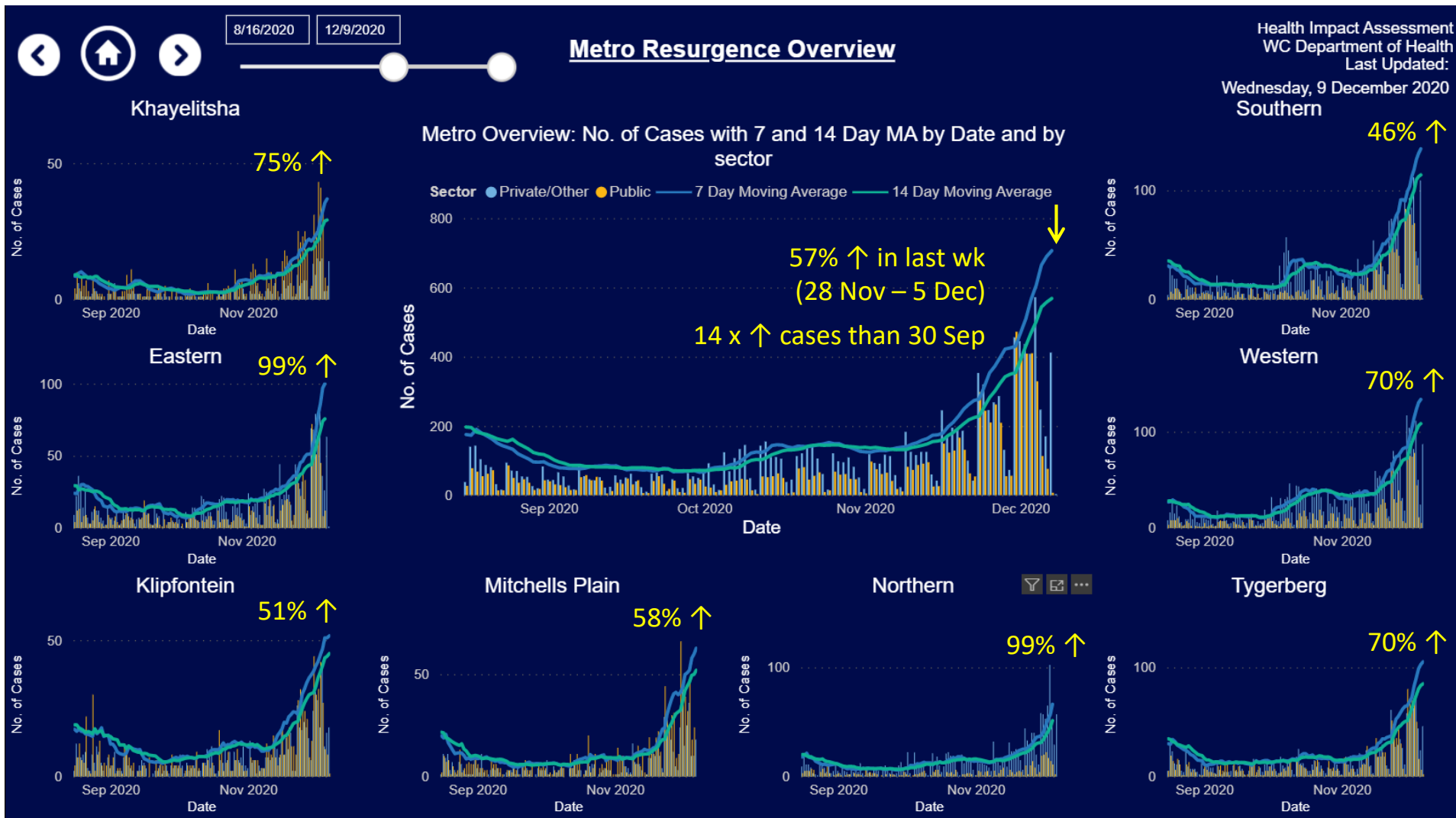
### **West Coast**

- Cedarberg now community transmission, no longer just clusters
- Langebaan super-spreader event at a yacht club 14 positive
- Taxis in Saldanha reusing masks for customers, without washing them in between, law enforcement will step in
- Darling Clinic 11 staff tested – 9 symptomatic, awaiting results Concerned about Swartland, Saldanha Bay

# Active cases by subdistrict



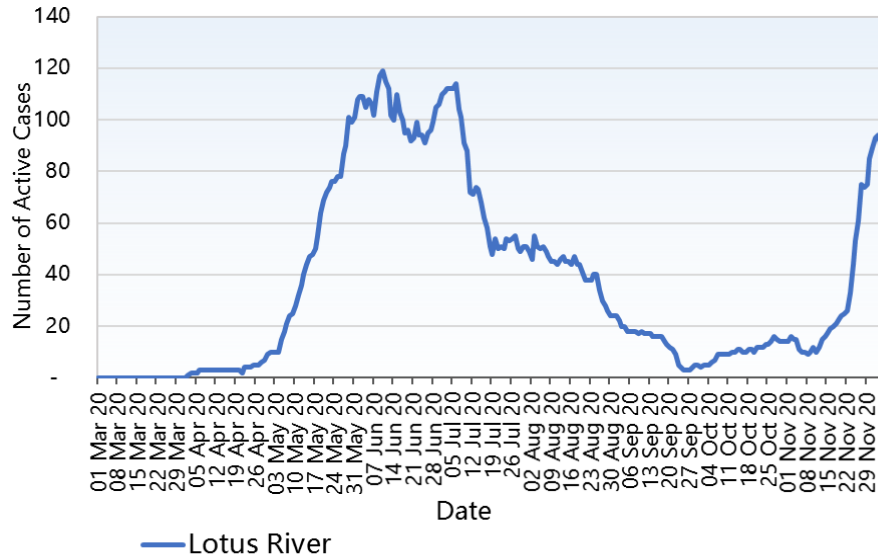
# Growth in cases: Metro



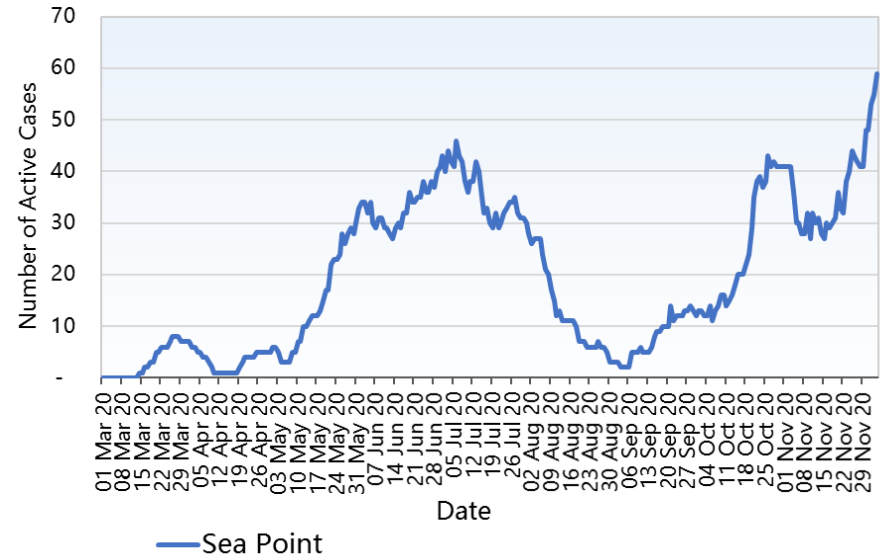
% increases in last week shown in yellow for each subdistrict and Metro as a whole  
% increase since end of September also shown for Metro

# Cape Metro Suburbs

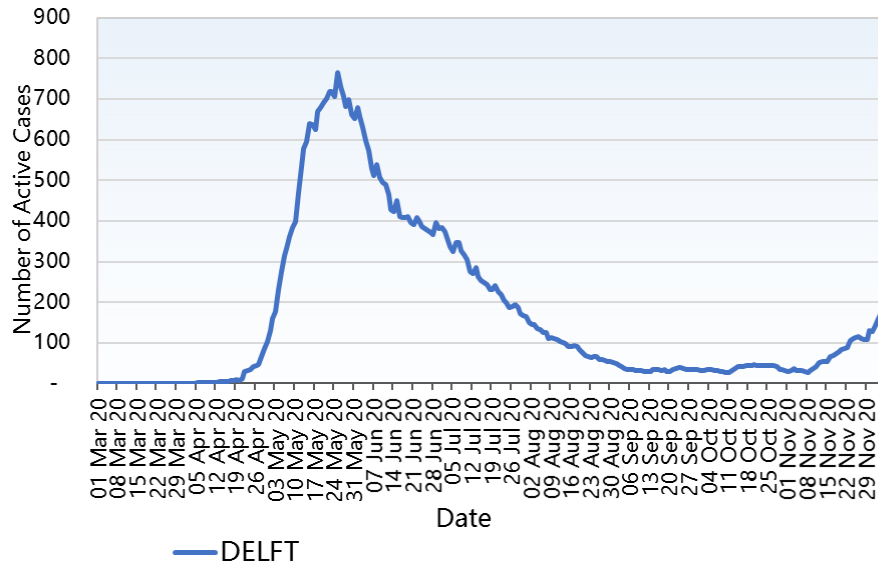
## Lotus River - Active Cases over Time



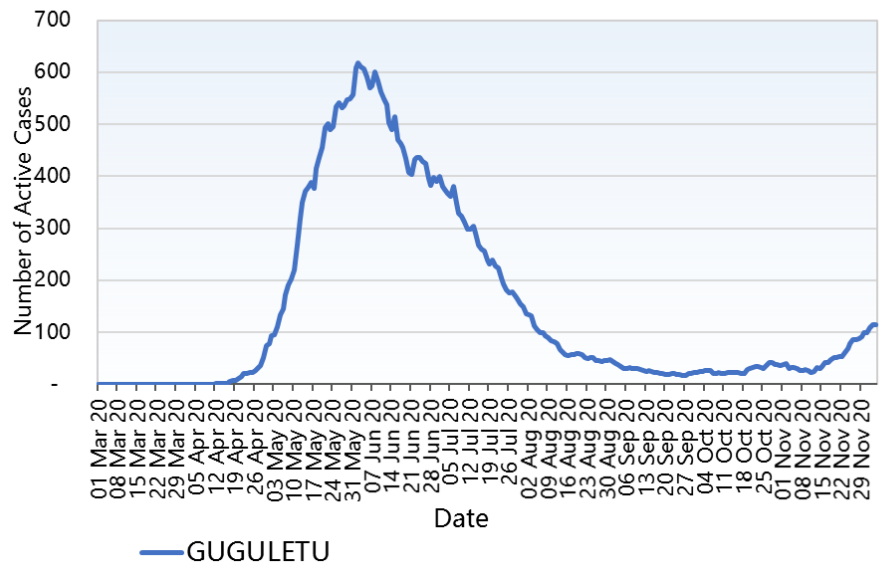
## Sea Point - Active Cases over Time



## Delft - Active Cases over Time



## Guguletu - Active Cases over Time



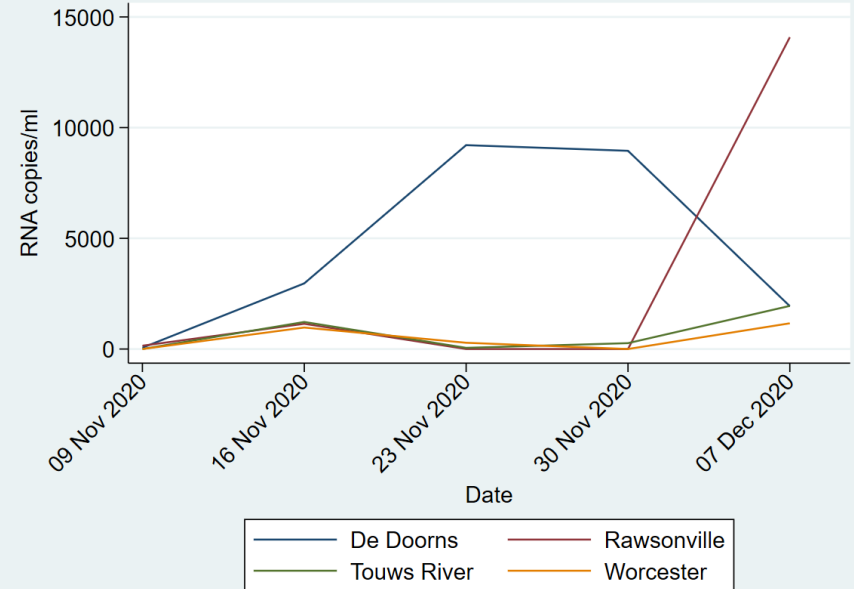
# Triangulating with wastewater

## SAMRC COVID- 19 AND WASTEWATER EARLY WARNING SYSTEM

WEEK 48  
update

### City of Cape Town, Breede Valley AND Overberg

Category 3 (Upper SARS-CoV-2 RNA Signal)



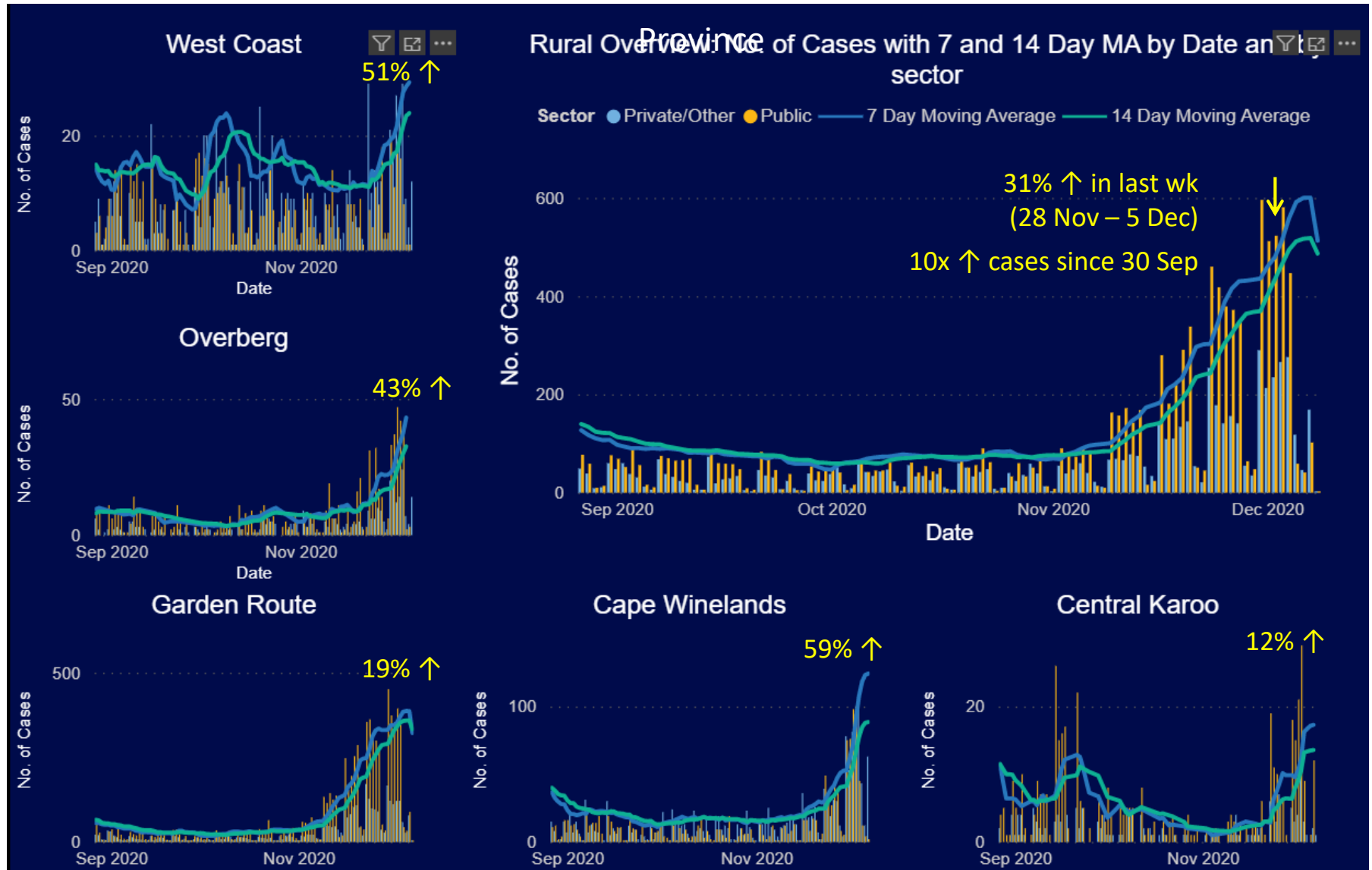
On average: ↓ SARS-CoV-2 RNA in wastewater this wk. vs last week

**Still some areas with steep ↑ including:**

Mitchells Plain, Wesfleur domestic & Scottsdene (Metro)

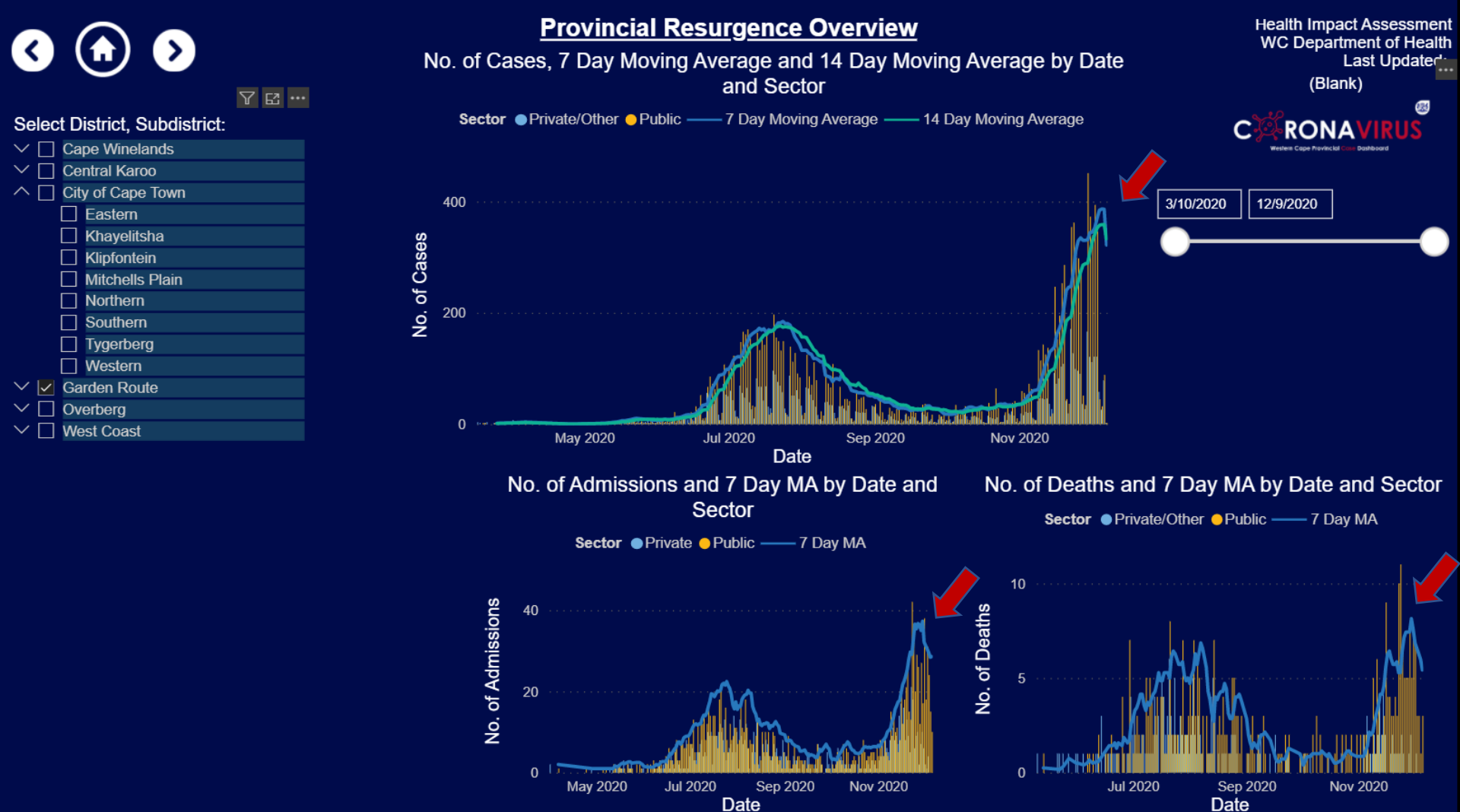
Rawsonville (Rural)

# Growth in cases: Rural Districts



% increases in last week shown in yellow for each Rural district and Rural overall  
 % increase since end of September also shown for Rural overall





For the first time since the start of the resurgence in the Garden Route, the 7 day and 14 day moving averages are crossing. This is a hopeful sign that the Garden Route may have reached its peak. This is further supported by early signs of decreasing hospitalisations and deaths.

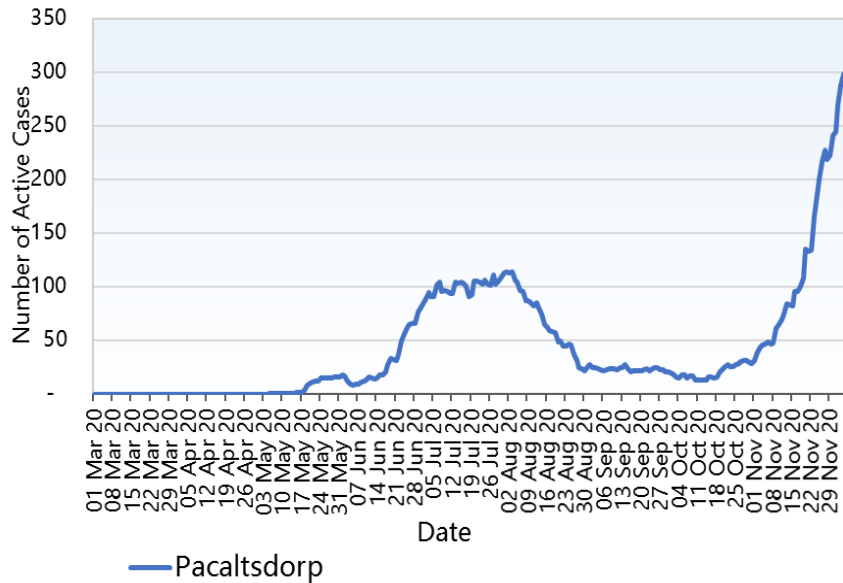
These are positive signs in the Garden Route, but this trend may be reversed by super spreader events.

It is also important to remember that even if a peak has been reached, hospitals in the Garden Route are still under severe pressure.

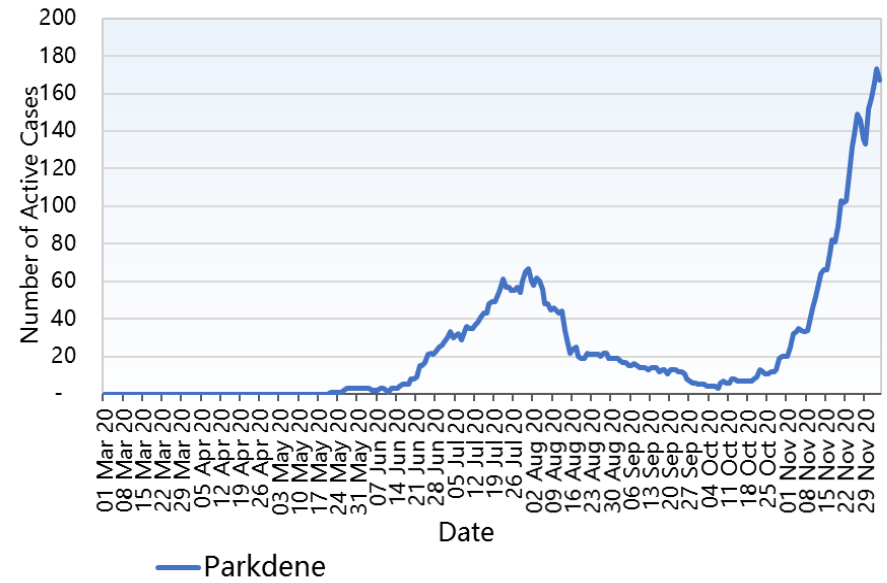


# Garden Route: George Sub-district

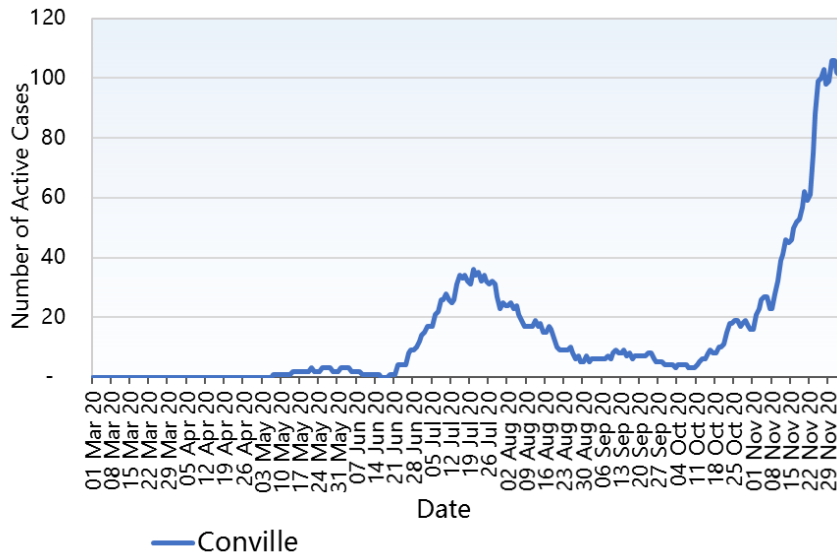
## Pacaltsdorp - Active Cases over Time



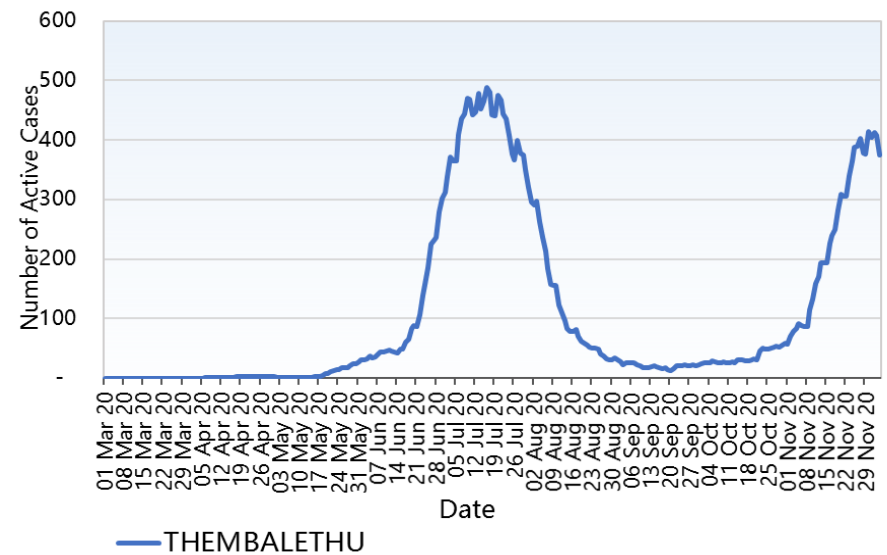
## Parkdene - Active Cases over Time



## Conville - Active Cases over Time



## Thembaletu - Active Cases over Time



# 8 December 2020

## Surveillance Huddle Report- P1

### Garden Route

#### Garden Route Districts Daily Huddle

8 Dec 2020

##### Hessequa

1. New cases: only 9 from SPV referrals
2. Tests done: 75 of which 21 were from Albertinia; rest of tests widespread across sub-district
3. Active cases: 58

##### Mossel Bay

1. New cases: 79 (65 nhls and 19 private)
2. Age group a little different today: 40-59 years
3. Focus areas remain: Kwanonqaba, Asla, Extension 8
4. Correctional Services: 5 positive inmates; relevant block has been sealed off.
5. Active cases: 928 (big increase)
6. Lab TAT: good
7. Mossel Bay Hosp: 14 patients
8. Private Hosp: 25 patients (Hospital experiencing slightly decreased pressure)
9. Petrosa: 100 patients

##### George

1. New cases: 55 (excludes antigen tests done, for which there is a delay in receiving results)
  - XXXX bus service: one positive of 59 on bus (very poor precautions on bus: no sanitizers, no ventilation)
  - YYYYY bus service: one positive (also very poor precautions)
  - AAAA old age home: 3 staff pos at moment; interventions being done, 2 deaths
  - BBBB old age home: 2 staff pos
2. 6 deaths
3. Tests done: 329 (huge amount)
4. Active cases: 1587
5. George Hosp: 71 patients, 20 critical care
6. Private Hosp: 39 patients
7. Harry Comay Hosp: 26 patients

##### George Hospital

1. Total of 40 positive staff members
2. There is a staffing challenge due to above
3. Ethics committee meeting as necessary

# 8 December2020

## Surveillance Huddle Report- P2

### Garden Route

#### Knysna/Bitou

1. New cases: 84 (includes antigen testing)
  - Matric farewell party in Knysna: additional children and teachers now also positive
  - Still wide distribution
2. Active cases: Knysna 354 and Bitou 182
3. Knysna Hosp: 32 patients
4. Private Hosp: almost full to capacity – only 1 bed available

#### Kannaland

1. New cases: 10 (a lot for this sub-district)
  - No clusters; distant or close family members
  - Ladismith 8 and Zoar 2

#### Oudtshoorn

1. New cases: 14
  - No clusters
2. Active cases: 290
3. Oudtshoorn 18 patients
4. Private Hosp: 15 patients

#### Central Karoo

1. 18 New C19 + Cases:
2. Beaufort West SD: 13 new C19 Cases
3. 12 x Beaufort West:
4. 2 x Staff members:
  - 1 PN at BWH (maternity)
  - 1 Admin Clerk at BWH (EC). Tested + for the 2nd time. Previous positive test was 21 July 2020 (140 days)
5. Laingsburg SD: 1 new positive case
6. Prince Albert SD: 4 new cases
7. 2 new cases at Prince Albert Municipality



## Garden Route - Concluding remarks

- The increase in number of new cases, hospitalisations and deaths in the Garden Route has slowed down.
- Despite this, the health platform remains under severe pressure.
- Health Worker infections are a major concern, particularly in George.
- The current trends are positive, but these could be changed by new outbreaks and super-spreader events.

# Update on the Health System Recovery and 5-point Resurgence strategy



# Resurgence, Health System Recovery and Reset Strategy

## 1. Continue to be vigilant and manage COVID-19, with agility:

- a) Change **community behaviours** to **prevent infections**
- b) Surveillance and **outbreak response** to **contain the spread**
- c) Scale up **health platform capacity** to **manage COVID disease**
- d) Maintain **comprehensive health services** to provide **essential non-COVID services**
- e) Safeguard and **protect the well-being of health care workers**

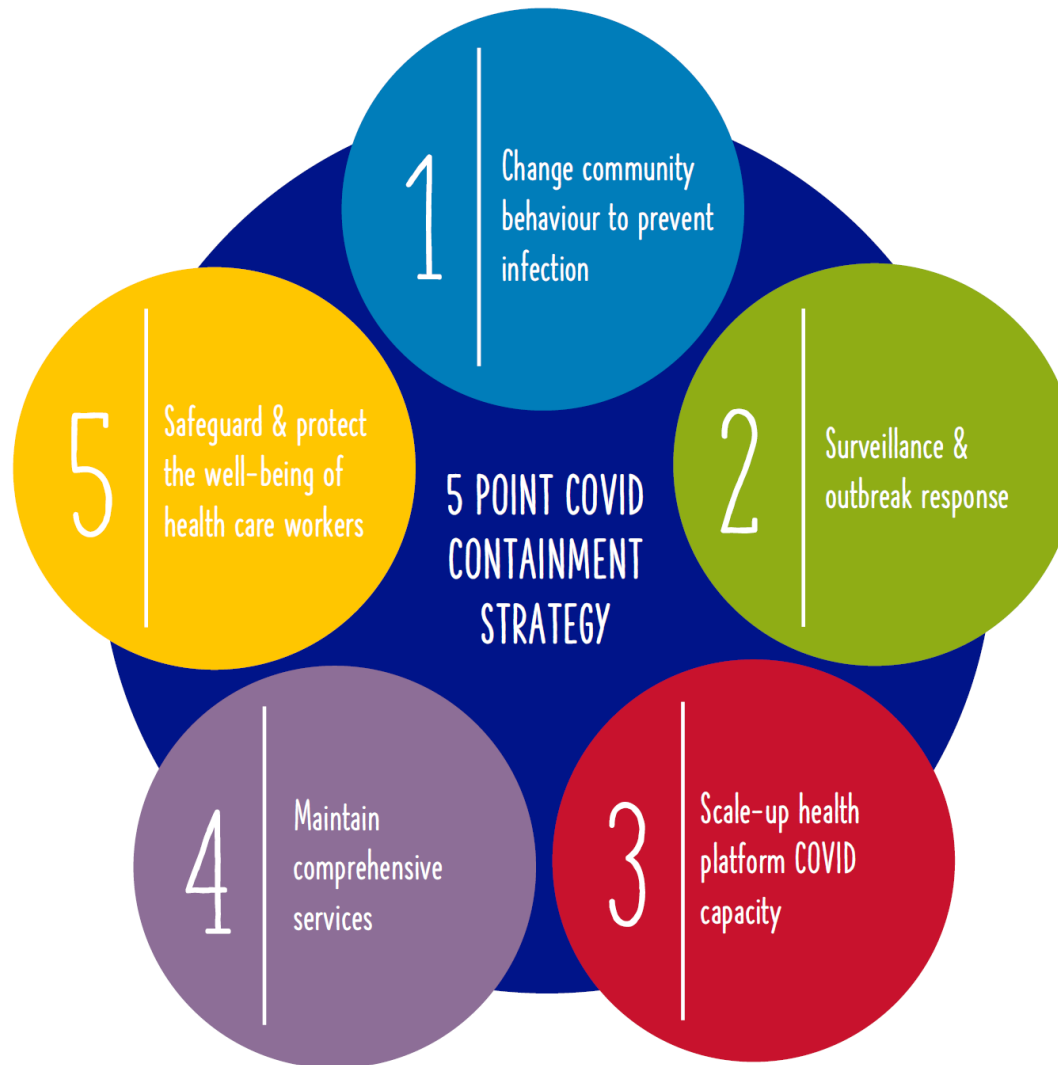
## 2. Re-introduce comprehensive health services, in a different way:

- a) Prioritise the **most essential and highest impact services**
- b) Re-design how we **render these essential activities**, within a **COVID reality**
- c) Align with the **WCG recovery strategy** for **safety, well-being** and **jobs**

## 3. Strengthen our organisational capacity towards Universal Health Coverage (UHC):

- a) Intentional **learning** and introducing an **evidence-informed, data-led** approach
- b) Move towards **key system levers for UHC**, e.g. service design, strategic purchasing, etc.
- c) Adaptive **governance and leadership** for **resilience**, with **focus on our people**

# 5-point COVID Containment Strategy



# 5-point COVID Containment Strategy

## 1. Change community behaviours to prevent infections:

- a) Need **strong and bold central public messaging** and **targeted local messaging**
- b) Co-ordinated **Provincial, District and local JOC enforcement**, lead by Law Enforcement and EHPs

## 2. Surveillance and outbreak response:

- a) The **surveillance** and **outbreak containment strategy** is being implemented
- b) The **daily huddles** are functioning well to contain local outbreaks

## 3. Scale up health platform COVID capacity:

- a) Local teams putting **contingency plans** in place in **each geographic area**
- b) Defined **trigger points** for **step-wise escalation** of **inter-mediate, acute** and **critical care** access

## 4. Maintain comprehensive services:

- a) Ensure a **core quantum of essential services** be maintained, while scaling up COVID capacity
- b) **Carefully reduce comprehensive services** to allow for COVID capacity, in the face of **alcohol-related trauma**

## 5. Safe-guard and protect well-being of health care workers:

- a) Ensure **sufficient PPE** to protect all front-line staff members
- b) Implement **OHS policy fully**, including addressing **mental well-being** for staff



# Acute service platform – general comments

1. Currently **1641 COVID patients** in our acute hospitals (**894** in **public** hospitals & **747** in **private** hospitals), with **218** in ICU.
2. COVID **hospitalisations** have **begun increasing sharply** whilst we are experiencing **trauma, surgical, psychiatric** and **neonatal pressures**.
3. The metro hospitals are running at an average **occupancy rate of 81%** whilst **rural hospitals** are running at an average **occupancy rate of 84%**.
4. **COVID & PUI cases** make up **10%** of hospital admissions in the **Metro** and **13% of hospital admissions in the rural areas** (both increasing daily).
5. The **Hospital of Hope** (Brackengate) currently has **179** patients (1227 cumulative admissions), and **Sonstraal** currently has **5 COVID patients** and (22 TB patients).
6. The **oxygen utilisation** has increased in line with the increase in cases (**46%** of available capacity) and the mass fatality centre has admitted 483 bodies to date (**currently 14**).

# CAPE METRO ACUTE CARE AVAILABILITY & UTILISATION

	Operational Beds	Filled Beds	Available Beds	BUR %
TBH - Tygerberg Hospital	1,227	1,033	194	84%
GSH - Groote Schuur Hospital	825	617	208	75%
RXH - Red Cross War Memorial Children's Hospital	195	171	24	88%
NSH - New Somerset Hospital	330	263	67	80%
ERH - Eerste River Hospital	185	143	42	77%
FBH - False Bay Hospital	76	52	24	68%
HHH - Helderberg Hospital	196	148	48	76%
KHA - Khayelitsha Hospital	372	372	0	100%
KBH - Karl Bremer Hospital	360	276	84	77%
MPH - Mitchells Plain Hospital	426	346	80	81%
VHW - Victoria Hospital	208	145	63	70%
WFH - Wesfleur Hospital	58	31	27	53%
<b>Totals</b>	<b>4,458</b>	<b>3,597</b>	<b>861</b>	<b>81%</b>

Operational Beds = Beds that are Equipped and Staffed

Bed Utilisation Rate = % Operational Beds Occupied

## OCCUPANCY IN METRO ACUTE CARE PLATFORM IS 81%

# COVID BED OCCUPANCY AS % OF THE ACUTE HOSPITAL CAPACITY IN THE CAPE METRO

	Covid Ventilated Cases	HFNO	PUIs	Covid Non Ventilated Cases	Total Covid Cases
TBH - Tygerberg Hospital	10	16	26	21	73
GSH - Groote Schuur Hospital	10	15	2	48	75
RXH - Red Cross War Memorial Children's Hospital	0	0	18	5	23
NSH - New Somerset Hospital	0	0	28	9	37
ERH - Eerste River Hospital	0	0	10	3	13
FBH - False Bay Hospital	0	0	6	2	8
HHH - Helderberg Hospital	12	0	5	0	17
KHA - Khayelitsha Hospital	1	1	31	13	46
KBH - Karl Bremer Hospital	0	0	16	3	19
MPH - Mitchells Plain Hospital	0	5	0	29	34
VHW - Victoria Hospital	0	4	5	16	25
WFH - Wesfleur Hospital	0	0	6	0	6
R300 - Brackengate	0	4	0	176	180
SICF - Sonstraal Intermediate Care Facility	0	0	0	0	0
<b>Totals</b>	<b>33</b>	<b>45</b>	<b>153</b>	<b>325</b>	<b>556</b>

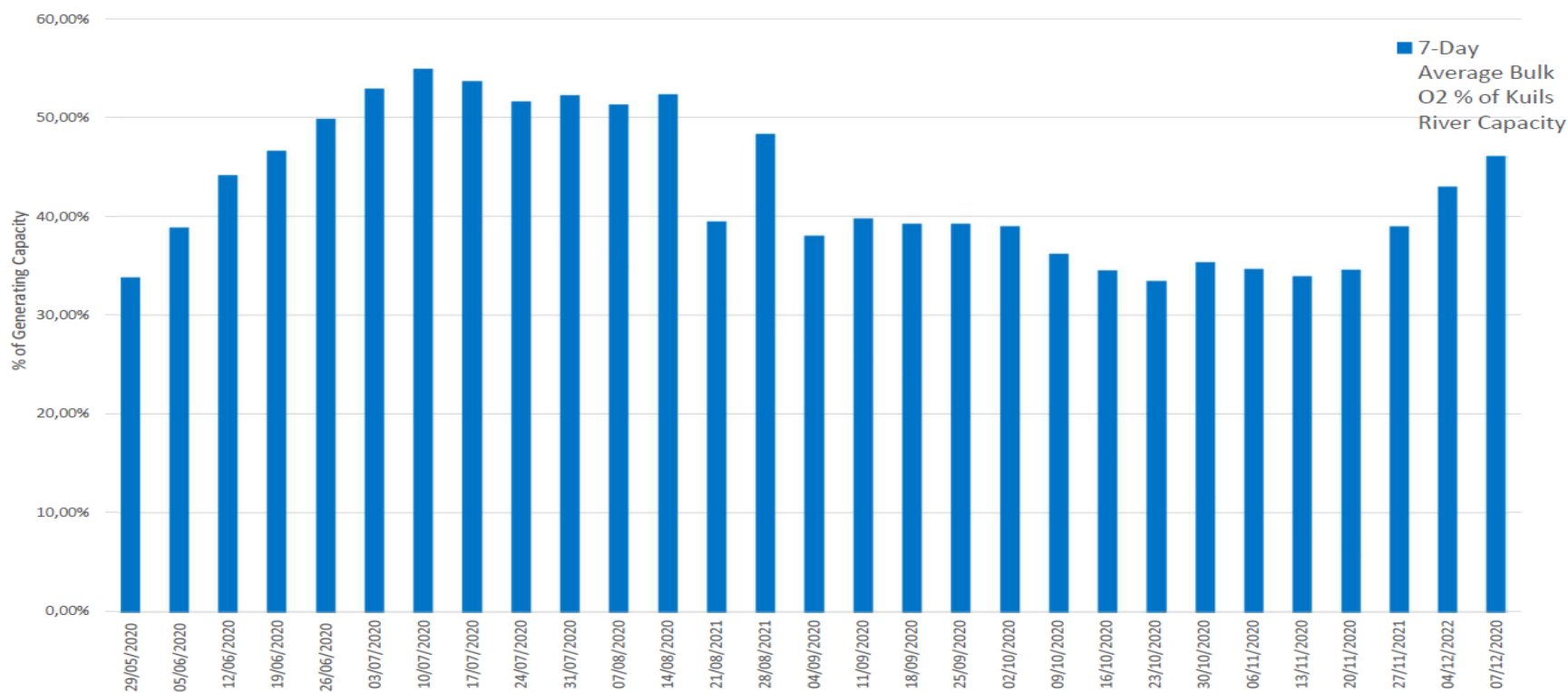
\*Percentage COVID Patients of Total Hospital Admissions  
 (Excl. Brackengate & SICF)

10%

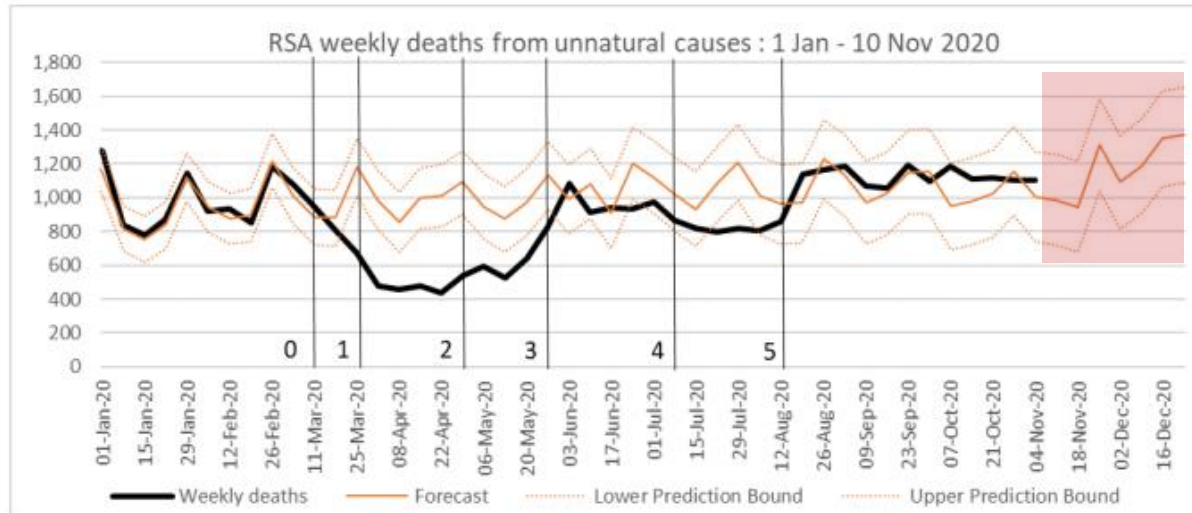
**PERCENTAGE COVID PATIENTS OF THE TOTAL HOSPITAL ADMISSIONS IS 10%**

# Provincial oxygen consumption at 46 % of total capacity

WCGH: Total Bulk O<sub>2</sub> Consumption  
Expressed as % of Kuils River Plant Capacity



# SA MRC Report on unnatural deaths



## Vertical time lines:

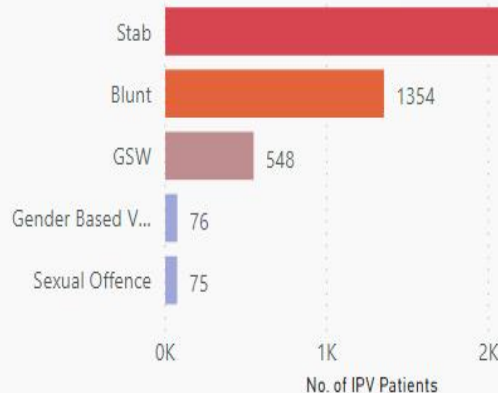
0. Week Disaster Management Act implemented
1. Week lockdown level 5 introduced
2. Week lockdown changed to level 4 with curfew
3. Week lockdown changed to level 3 including unbanning sale of alcohol
4. Week sale of alcohol re-banned and curfew re-introduced
5. Week lockdown changed to level 2, including unbanning of alcohol

*Numbers have been scaled to the estimated actual number of death and for the last week has been adjusted for delayed registrations*

- The MRC noted significant drops in unnatural deaths during periods of decreased alcohol availability during COVID-19
- The MRC also forecasts a significant increase in unnatural deaths over the December period

# Impact of recent alcohol regulation changes on interpersonal violence (IPV) presentations to hospital (13 Jul - 26 Oct 2020)

No. of IPV Patients by Type



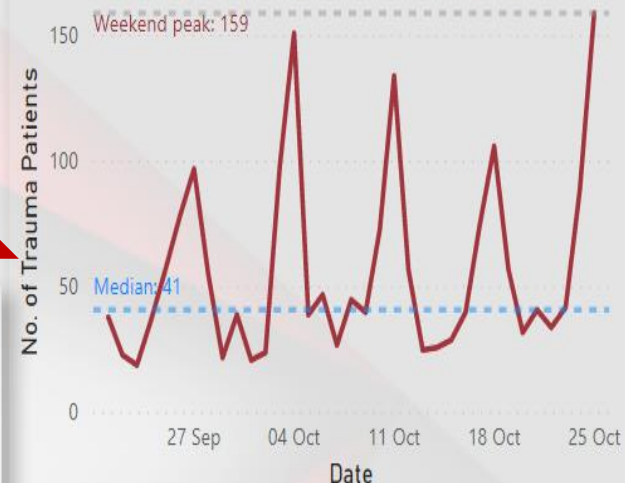
When the alcohol ban was lifted the average (median) no. of daily IPV cases presenting to hospital increased to 34 (55% increase) with weekend peaks at 104 (103% increase)

## Sentinel Trauma Report

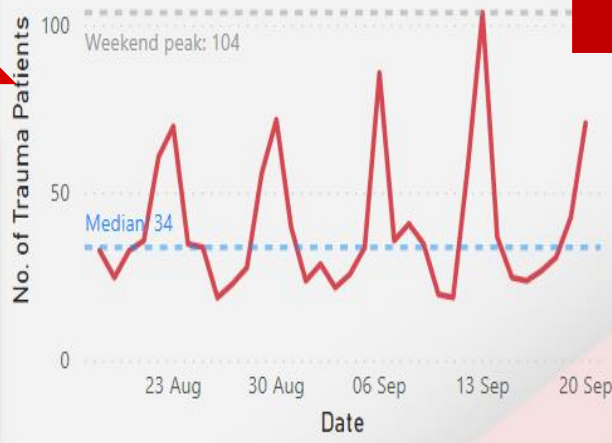
This report shows a sample of 4 hospital emergency centres and their trauma patient numbers over time

When alcohol regulations were further relaxed (21 Sept) the average (median) no. of daily IPV cases presenting to hospital increased to 41 (additional 21% increase) with weekend peaks at 159 (additional 53% increase)

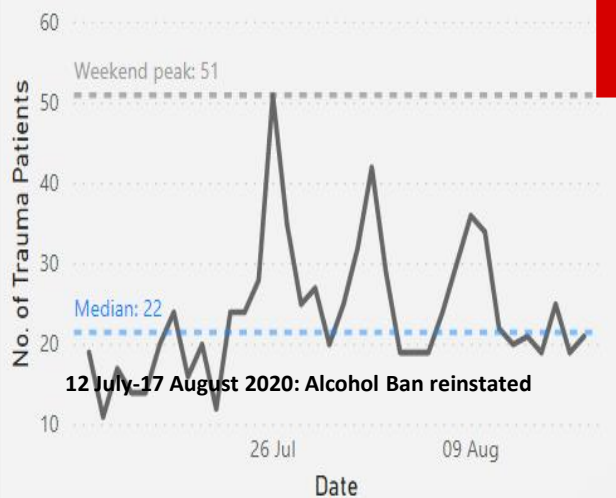
### Further relaxation of alcohol regulations



### Second Alcohol Ban Lift



### Alcohol Ban Reinstated



12 July – 17 August 2020:

Full Alcohol Ban as under lockdown conditions

18 August – 20 September 2020:

Alcohol Ban lifted with regulations in retail alcohol from Mon-Thursday and night time curfew at 10am

21 September 2020 – 26 October 2020:

Alcohol regulations further relaxed with night time curfew extended to 12am and retail alcohol sales allowed on Friday

Over the period from 13 July to 26 October 2020 we have seen the average (median) number of daily IPV cases presenting to hospital increase from 22 to 41 and weekend peaks from 51 to 159. This equates to an 86% increase in average daily IPV cases to hospital and a 212% increase in weekend IPV peaks from the baseline of the recent alcohol ban at the hospitals sampled.



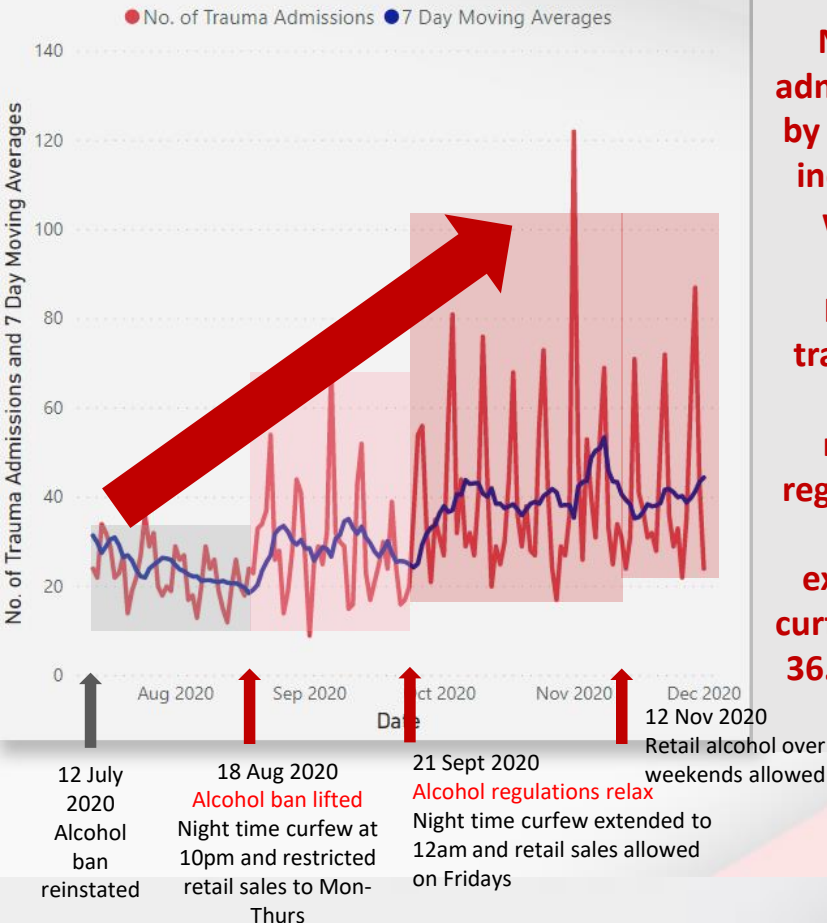
# The colliding epidemics of trauma and COVID-19 in terms of hospital admissions

## Sentinel Trauma Report

This report shows a sample of hospital emergency centres and their trauma patient numbers over time

### Trauma Admissions (13 July-01 Dec 2020):

No. of Trauma Admissions and 7 Day Moving Averages by Date

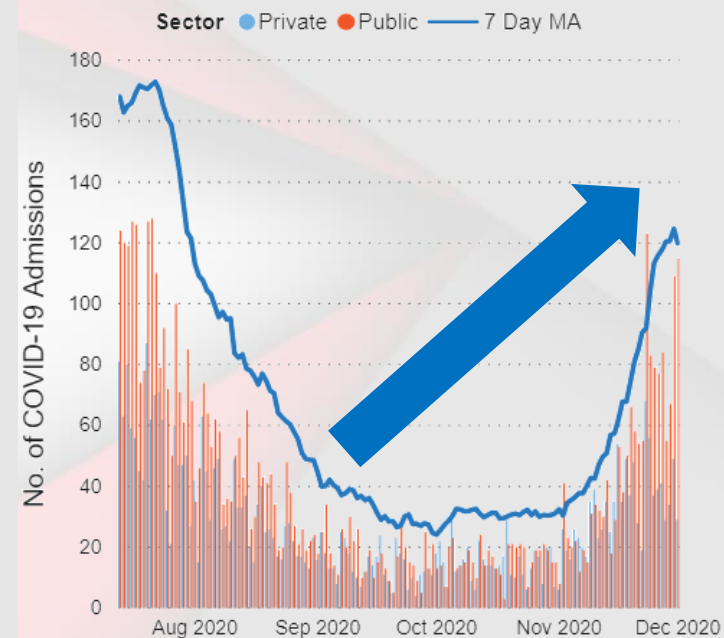


**Over the month of November, COVID-19 admissions have increased by 409% and continues to increase as we continue with the resurgence.**

**In the same context, trauma admissions have increased with each relaxation of alcohol regulation. The relaxation of retail sales and extension of night time curfew, in particular, saw a 36.2% increase in trauma admissions.**

### COVID-19 Admissions (13 July-01 Dec 2020):

No. of COVID-19 Admissions and 7 Day MA by Date and Sector



Source: HECTIS and WC PHDC

# What we know about COVID-19 spread – Key messages



# Coronavirus is in the AIR!

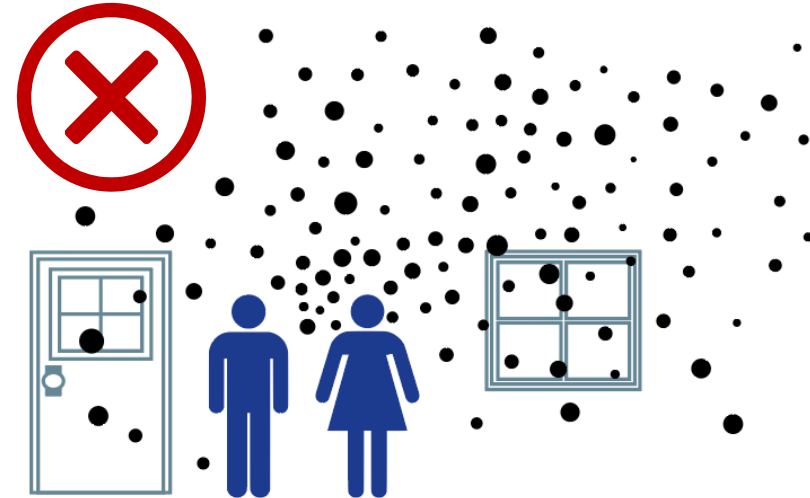
## Previously we thought ...

Hands and surfaces important in spread.

## Now we know ...

Air droplets cause most COVID-19 spread.

We are breathing in small droplets containing virus.



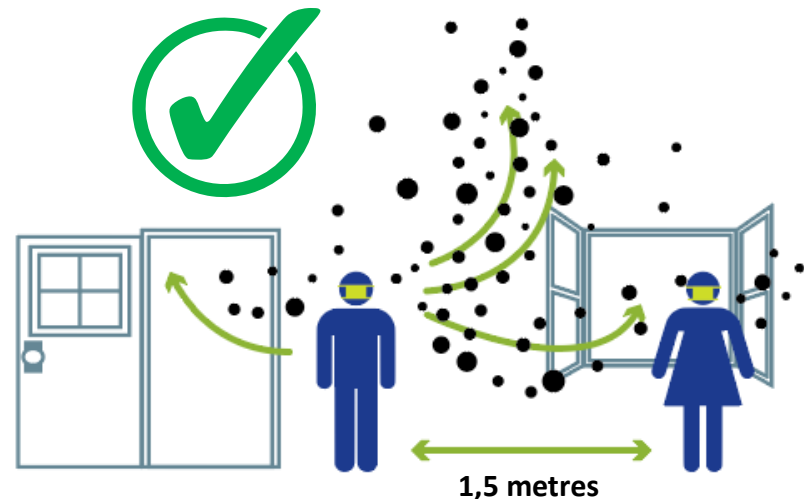
World Health Organization

The virus can spread from an infected person's mouth or nose in small liquid particles when the person coughs, sneezes, sings, breathes heavily or talks.

Interim guidance 1 Dec 2020

## What can we do...

- Be careful about sharing your “air space”
- Keep your distance
- Ensure good ventilation
- Wear a mask



# Coronavirus spreads where people GATHER

## Previously...

Gatherings of people were limited by lockdown which flattened the Wave 1 curve.

## Now we know ...

Social gatherings can contribute substantially to spread

## What can we do...

- Avoid gatherings
- Limit size (more people = more risk)
- Keep them short (longer = more risk)
- Go outdoors (indoor = more risk)
- Practise distancing, ventilation, mask wearing and respiratory hygiene at work.



# Coronavirus is spread by children, teenagers & adults

## Previously we thought ...

Mainly spread by symptomatic adults.

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## Now we know ...

- Spread by people of all ages including children, teenagers and adults with few or no symptoms.
  - People at highest risk of severe COVID-19: > 55 years and those with diabetes.
- 

## What can we do...

- Shield people at risk of severe COVID-19
- All ages need to work together to break transmission chains.



# Protect yourself and others

December 2020

## Protect yourself and others this summer

-  Sick? Stay home & arrange a test
-  Keep physical distance
-  Wear a mask
-  Cover your cough
-  Open doors & windows
-  Avoid crowds, close-contact & confined spaces
-  Wash/sanitise hands often



**STAY SAFE**  
**MOVE FORWARD**

 Western Cape Government Health

**FOR MORE INFORMATION:**  
Western Cape COVID-19 Hotline: 080 928 4102 (tollfree)  
[www.westerncape.gov.za](http://www.westerncape.gov.za)

# Gatherings: making safer choices



**GO SMALLER**

COVID-19 spreads at gatherings.  
Re-consider the size of your Christmas gathering.

STAY SAFE  
**MOVE FORWARD**



**GO OUTDOORS**

COVID-19 spreads at gatherings.  
Re-consider indoor gatherings and take them outdoors.

STAY SAFE  
**MOVE FORWARD**



**GO SPACIOUS**

COVID-19 spreads at gatherings.  
Re-consider confined spaces and keep your gathering spacious.

STAY SAFE  
**MOVE FORWARD**



**GO VIRTUAL**

COVID-19 spreads at gatherings.  
Re-consider having a traditional Christmas gathering.

STAY SAFE  
**MOVE FORWARD**

# Conclusions

## Concluding remarks

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1. The **increase in active cases** in **all districts** (especially **Garden Route & Cape Metro**), represents an **established resurgence** in the Western Cape.
2. Our **local teams** are on **high alert for local surveillance and response** to clusters.
3. The biggest concern is the **non-adherence to protective behaviours** – there is a big need for **targeted enforcement and behaviour change** interventions.
4. The **hospitalisation data** shows a rapid **increase at this point** and **mortality rates are starting to increase**.
5. We have **contingency plans per geographic area** to **scale up hospital COVID capacity** as required, but **alcohol-related trauma is a major challenge**.
6. Our key concern is that our **health care workers face significant strain** over the coming weeks. We need to **safe-guard them and their families**.
7. It is essential to ensure a **strong focus on behaviour change to ensure containment** for the next **18-24 months**, while we deal with the **challenges of the WCG recovery plan**, in the face of significant **upcoming budget challenges**.

# Thank you