



**Western Cape  
Government**

Health

# DIGITAL PRESS CONFERENCE

Health Update

Dr K Cloete

5 January 2021

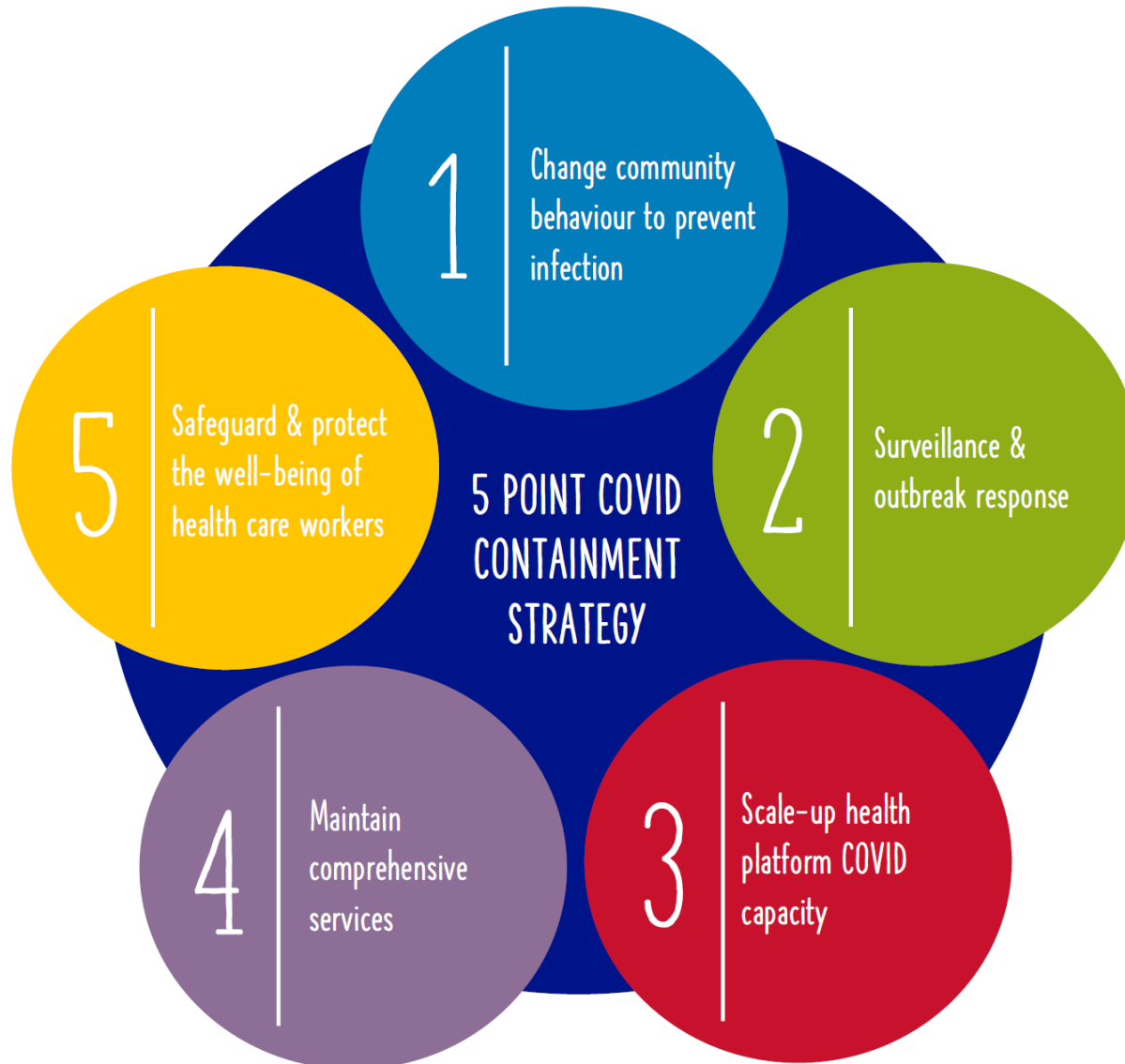
# Overview

---

1. 5-point COVID Resurgence Strategy
2. Community Prevention
3. Surveillance & Response Update
4. Scaling up health platform COVID capacity
5. Scaling down non- COVID capacity
6. Safe-guarding well-being of health care workers
7. Vaccine strategy
8. Key messages for upcoming weeks
9. Conclusions

# 5-point COVID Resurgence Strategy

# 5-point COVID Containment Strategy



# Community Prevention Update



# Community prevention – general comments

## 1. New regulations:

- a) The new **Adjusted Alert Level 3** in place. All **Western Cape Districts** declared **Hotspots**.
- b) Movement of people – **curfew from 21h00 to 06h00**, **establishments** close at **20h00**.
- c) **Mandatory face mask wearing**, restrictions on **gatherings** and **public transport**.
- d) **Alcohol prohibited** for off-site, on-site and public consumption.

## 2. Law Enforcement:

- a) The **Provincial, City and District Disaster Management Centres** have co-ordinated the **systematic enforcement of regulations**, along **with SAPS**, via the **Provincial Joints**.
- b) Multiple **joint operations** occurred between the **law enforcement agencies** across a range of **high-risk settings**.

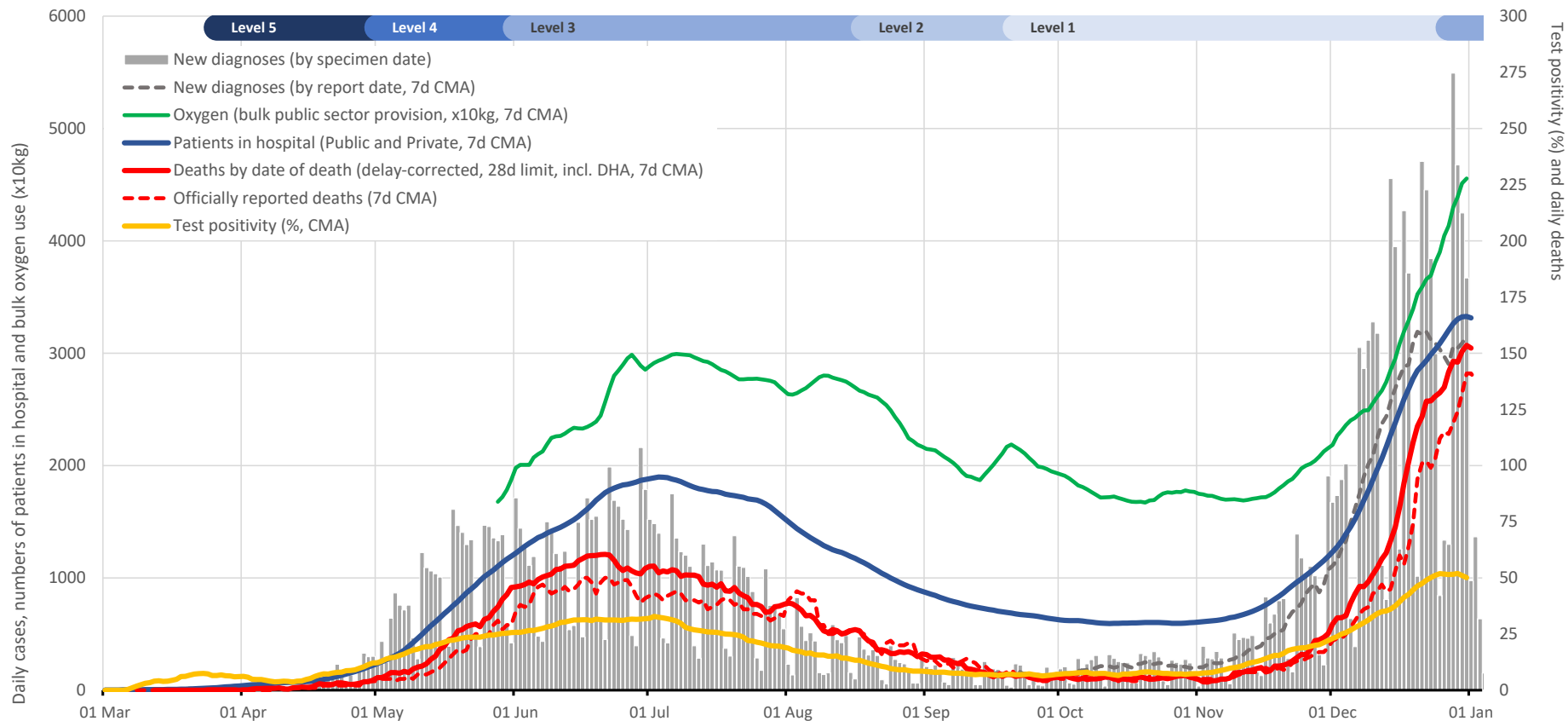
## 3. Communication:

- a) **Central messaging** on **risk of transmission** at especially **in-door gatherings**.
- b) **Decentralised** and **sector-specific** targeted messaging.

# Surveillance & Response Update

# Integrated testing, case, hospitalisation and mortality trends

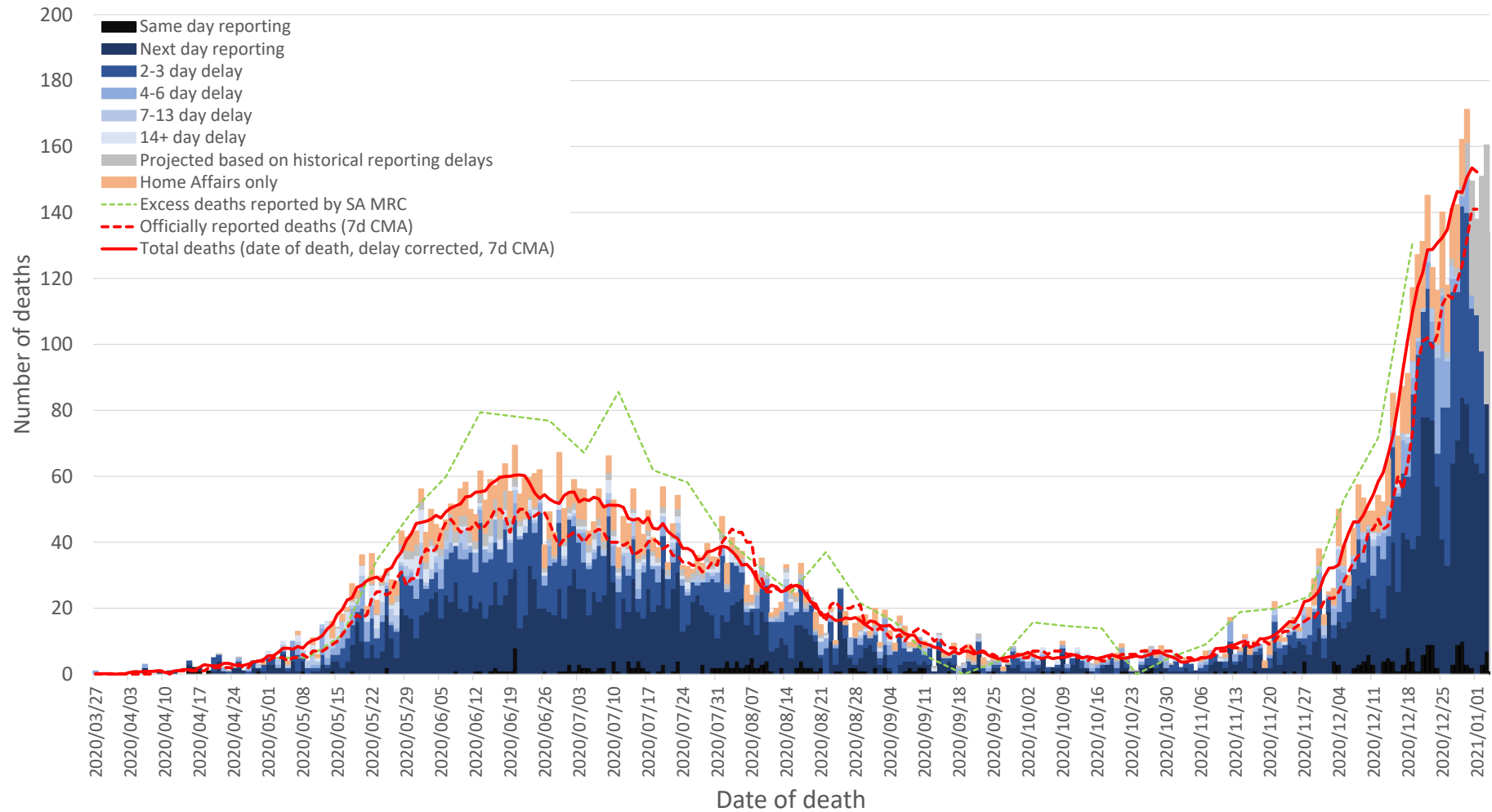
(by event dates)



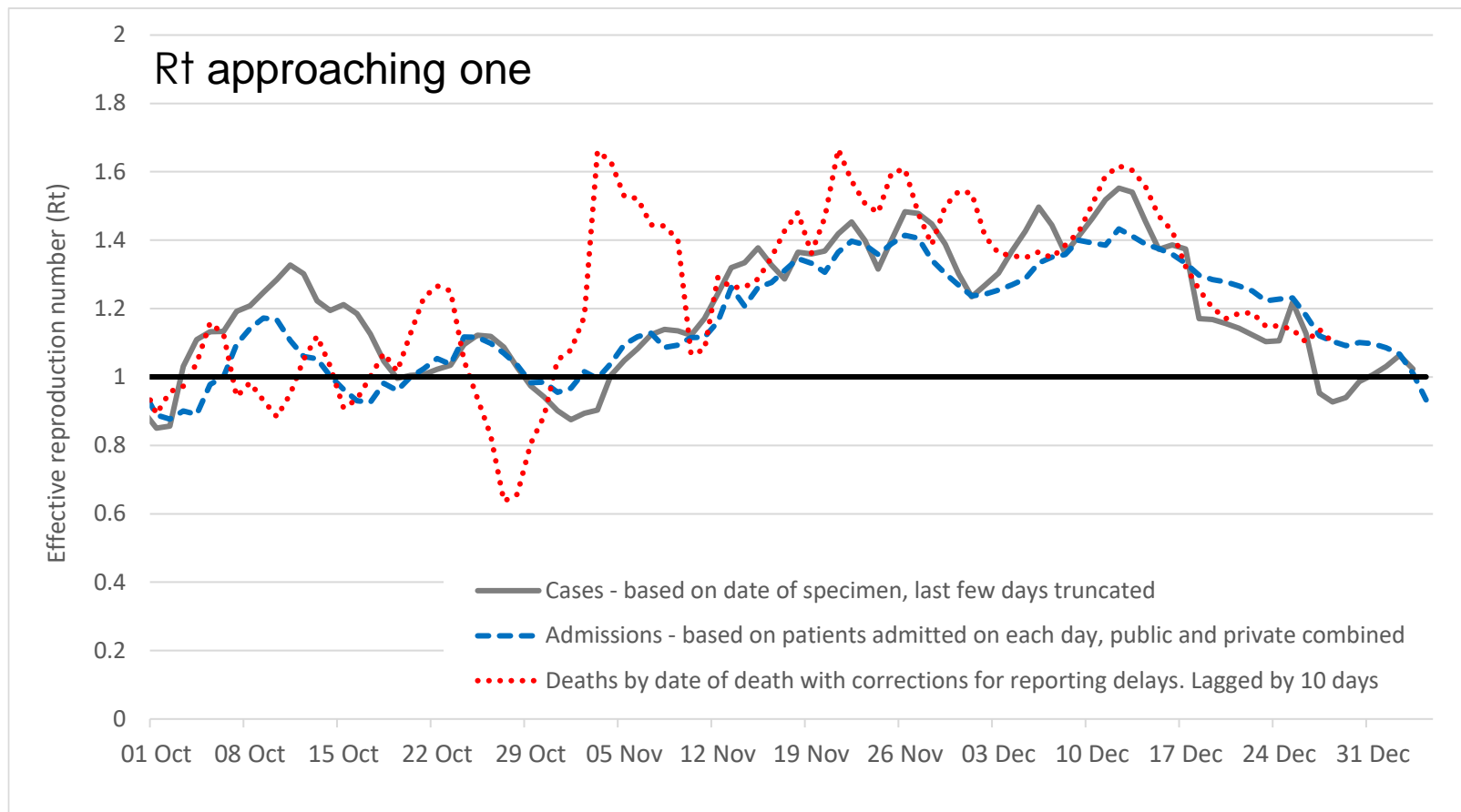


# Mortality by date of death

Mortality in patients with confirmed COVID-19, by delay to reporting  
(deaths within 28 days of diagnosis or 14 days of discharge, plotted by date of death)



# Current reproduction number (province-wide)



Calculated using *epiestim*



## Provincial Resurgence Overview

Health Impact Assessment  
WC Department of Health

Last Updated:

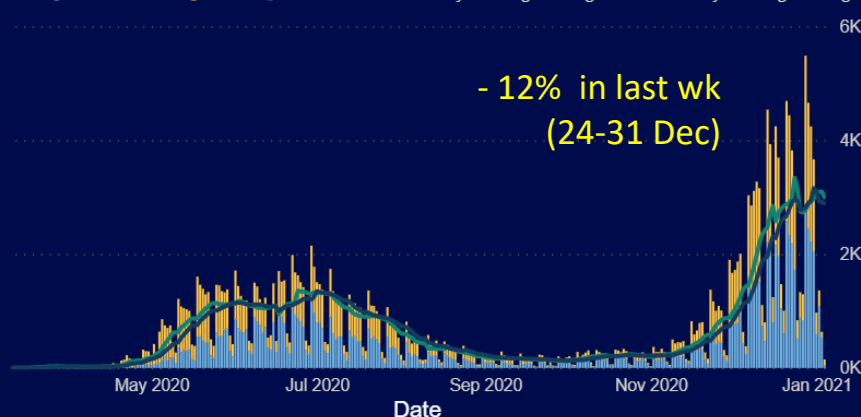
Tuesday, 5 January 2021



Select District, Subdistrict:

- ☒ Cape Winelands
- ☒ Central Karoo
- ☒ City of Cape Town
- ☒ Garden Route
  - ☐ Bitou
  - ☐ George
  - ☐ Hessequa
  - ☐ Kannaland
  - ☐ Knysna
  - ☐ Mossel Bay
  - ☐ Oudtshoorn
- ☒ Overberg
- ☒ West Coast

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



Date of Diagnosis

3/10/2020

1/5/2021

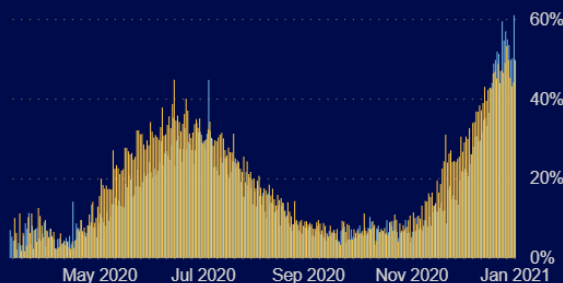
Date of Death

3/27/2020

1/3/2021

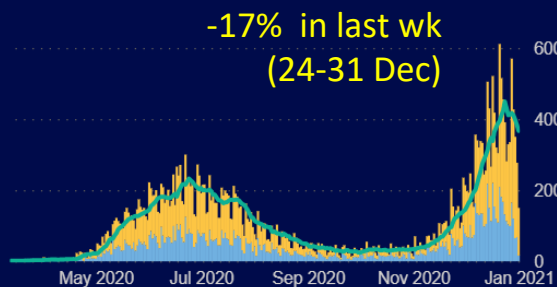
Proportion Positive by Date and Sector

Sector ● Private/Other ● Public



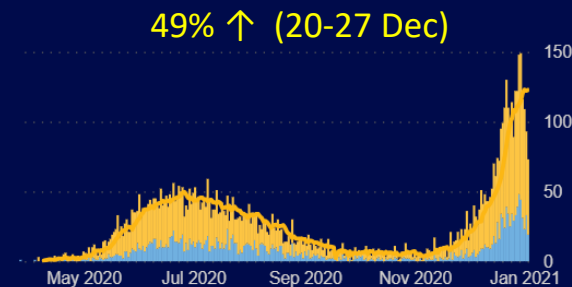
No. of Admissions and 7 Day MA by Date and Sector

Sector ● Private ● Public — 7 Day MA



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

Sector ● Private/Other ● Public — 7 Day MA



## Provincial Overview

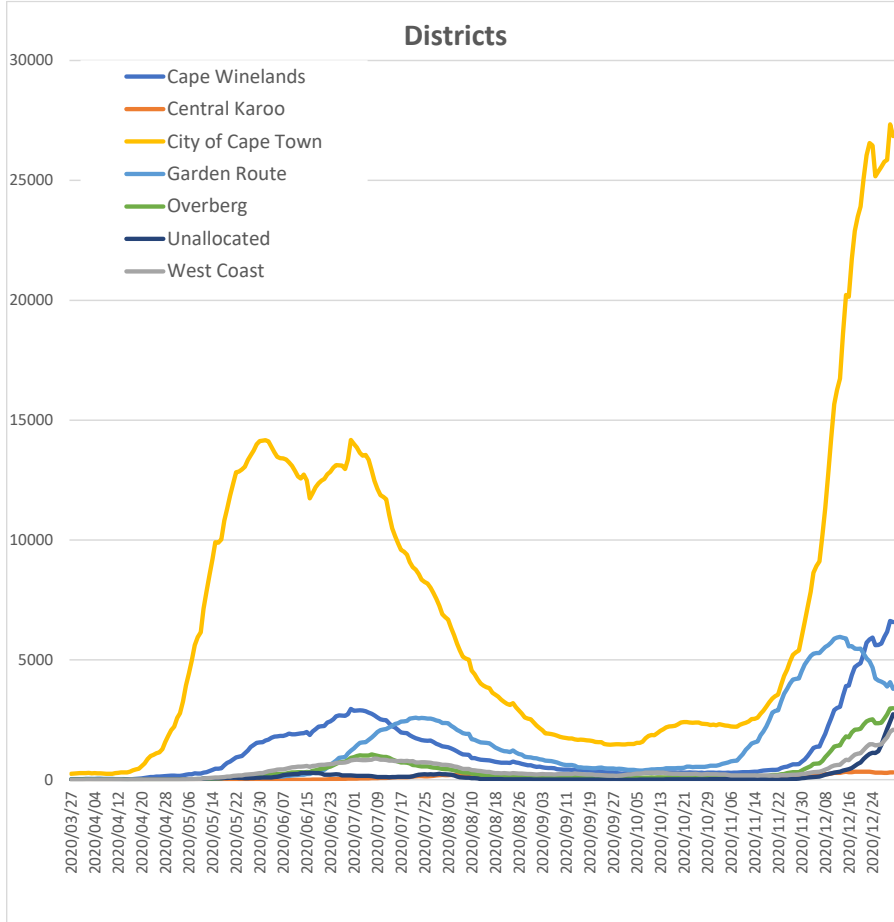
- The Province has seen a **decrease in reported cases**, but this **must be viewed with caution** as this data are affected by the holidays and changes to testing criteria.
- The proportion positive which is not affected by the factors stated above was 50.1% on 29 December and is starting to plateau. Admissions have started to stabilize overall.
- The stabilisation in admissions and the proportion positive is cause for hope, **but it is too early to be certain**. Data over the next few days will be critical to understanding if we are at the peak of the second wave.
- Deaths have continued to increase. This is to be expected as increases in deaths follow admissions.

\*Reporting delays may be longer than normal due to holiday period

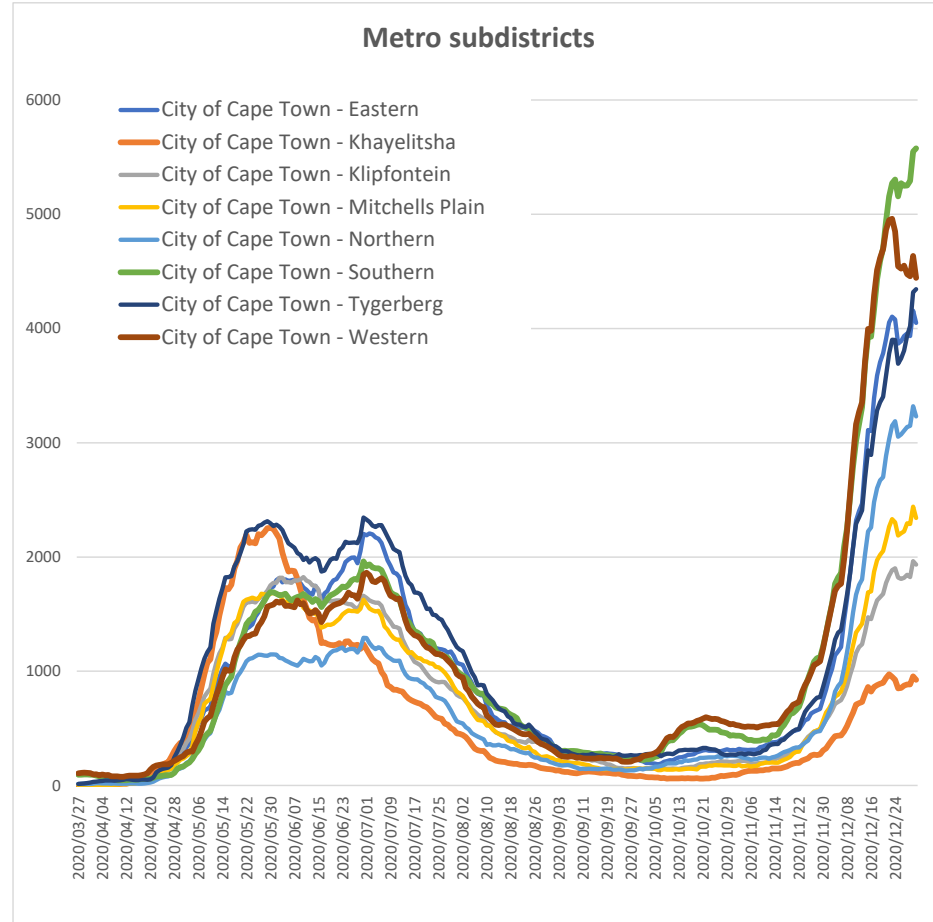
# Active cases

(Lagged by 4 days due to turn-around times)

## Districts

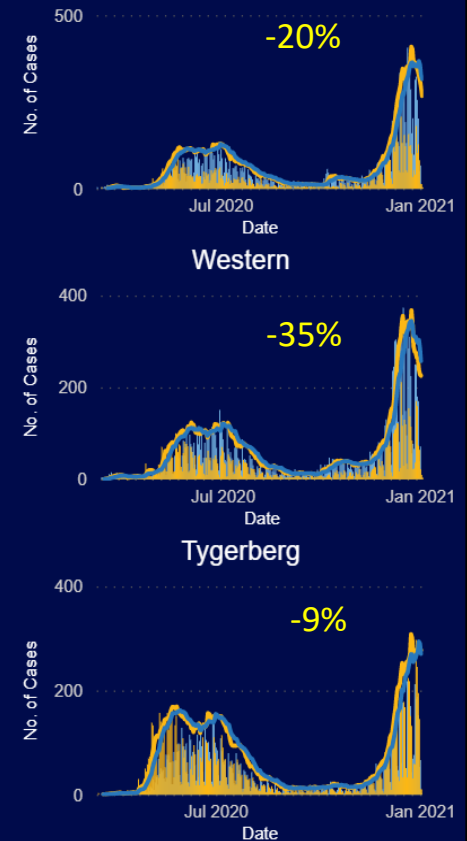
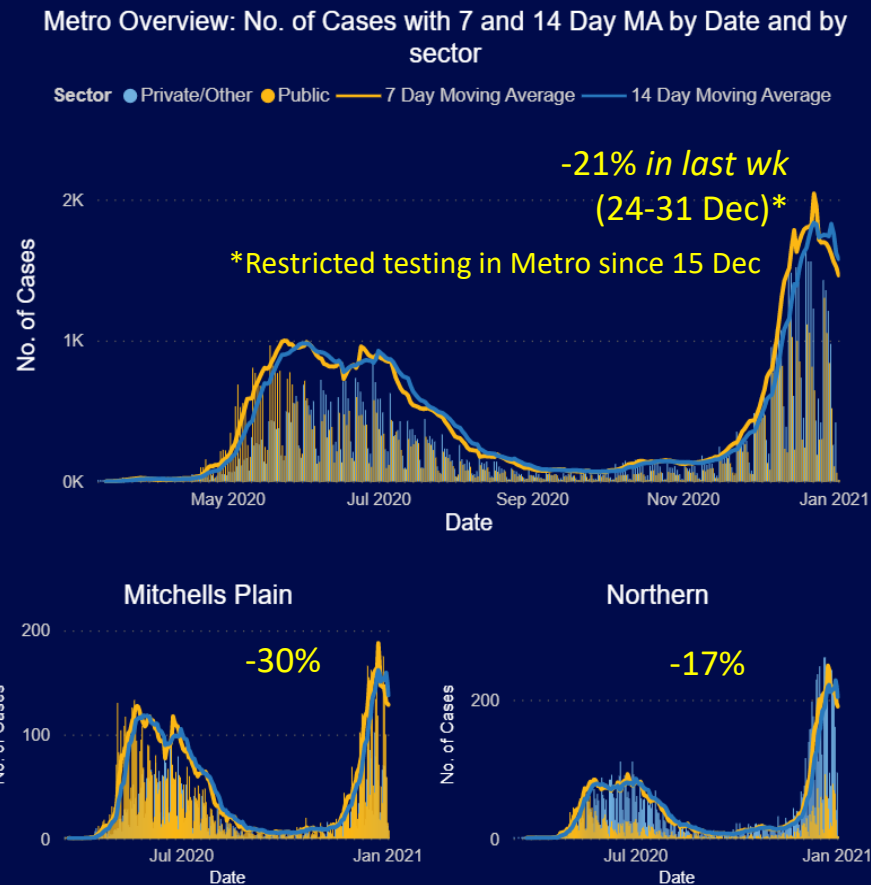
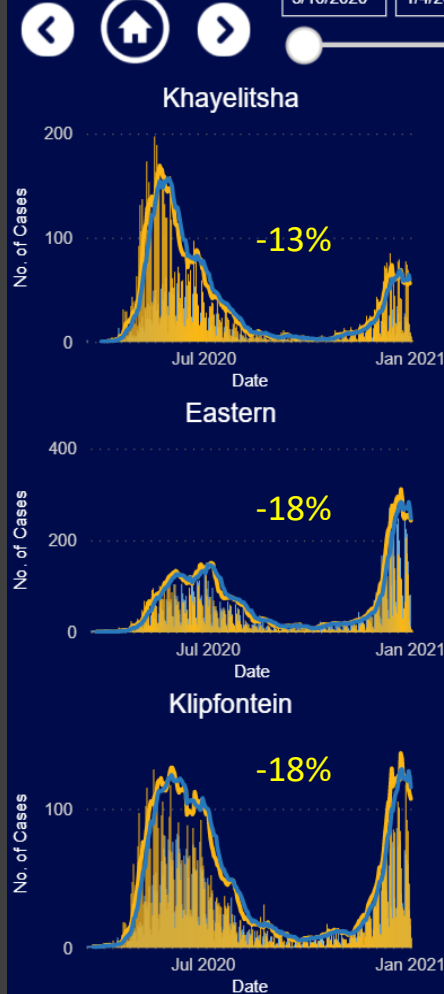


## Metro subdistricts



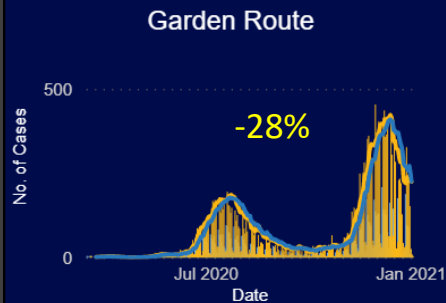
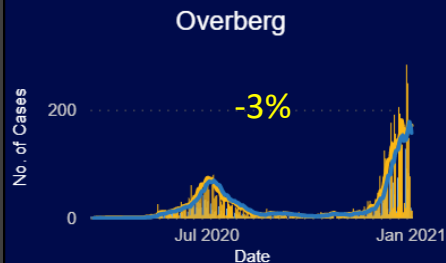
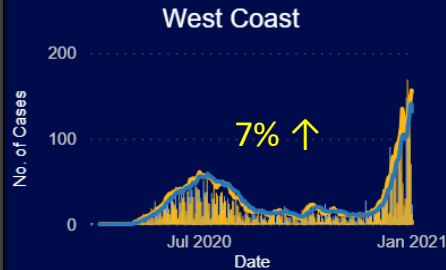
# Metro Resurgence Overview

WC Department of Health  
Last Updated:  
Monday, 4 January 2021  
Southern

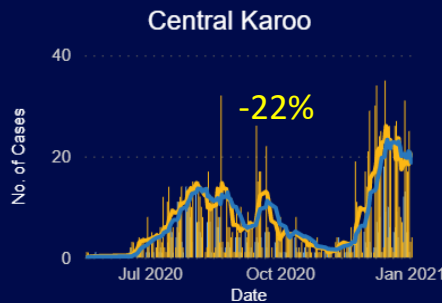
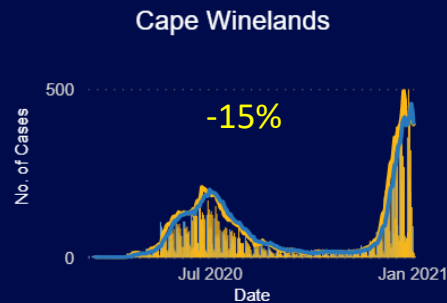
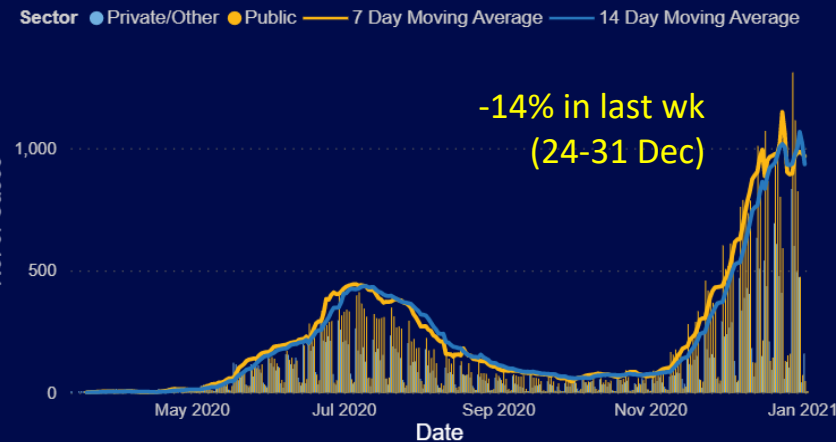


## Metro Overview

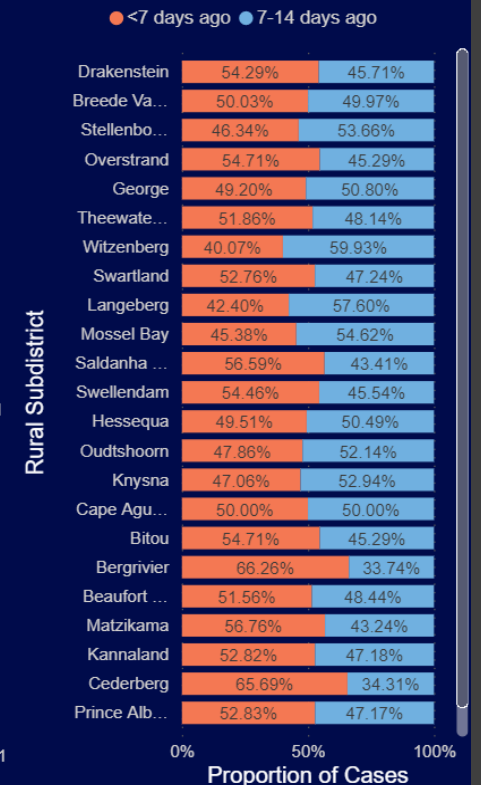
- All sub-districts in the Metro and the Metro as a whole has seen a **decrease in reported cases**. This data are affected by decreased testing during the public holidays, as well as a change in testing criteria in the Metro.
- Of note is the significant decrease in the Western sub-district which shows a 35% drop in reported cases. The Western area was one of the first to experience the second wave, and this **might be an early sign** that the area has reached its peak. We will have to watch this over the coming days.



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



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

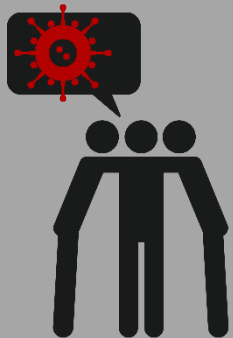


## Rural Overview

- With the exception of the West Coast, all Rural districts and Rural as a whole show a **stabilisation in reported cases**. Again, this is affected by the public holidays, and will have to be watched to see if the pattern holds. ( Rural has not changed its testing criteria).
- The West Coast shows an increase in cases, but the rate of increase has slowed considerable. A week ago, the weekly increase in cases was 85%.
- The Garden Route has **passed the peak of the second wave** and continues on a downward trajectory.

4 January  
2021

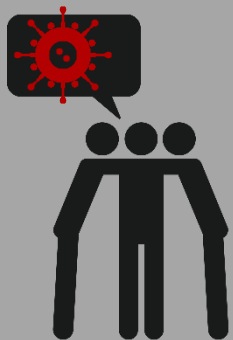
## Surveillance Huddle Report: Metro



KESS	<ul style="list-style-type: none"><li>• Ongoing decrease in positive cases on a day-to-day basis, and Khayelitsha even more so. It is difficult to confirm whether it is due to implementation of the latest testing criteria/ less testing capacity over the holidays etc</li><li>• Deaths still increasing (especially in Eastern)</li><li>• Hospitals are still under pressure with admissions although it seems to be coming down. A welcome drop in trauma related cases/admissions observed over the New Year's weekend.</li><li>• Case and contact tracing teams are under pressure and have been working with limited staff over the holidays, and still are. Looking forward to the uptake of cases by the call centre.</li><li>• EMS delays in collecting of patients for isolation or quarantine facilities have been experienced over the weekend.</li><li>• The Khayelitsha team remain concerned about non-compliance with regards to mask wearing, social distancing and hand washing.</li></ul>
KMPSS	<ul style="list-style-type: none"><li>• KMPSS have had an increase of +/- 2% positive cases since 29 Dec to date</li><li>• Hospital admissions increased between 6- 8% with death rates increased &gt;10% in each SD</li><li>• No clusters noted during this last week</li><li>• The field hospital at Lentegour up and running with 45 people this morning after discharges</li></ul>
NTSS	<ul style="list-style-type: none"><li>• Our hospitals are at 100% capacity</li><li>• The number of deaths are increasing</li><li>• Despite the change in testing criteria no notable drop in case numbers have been noticed</li></ul>
SWSS	<ul style="list-style-type: none"><li>• Continue to have a large number of active cases</li><li>• Very concerning is that most of the SS team has recently lost someone to COVID or has a family member in hospital, so everyone is experiencing an increased emotional burden</li><li>• We have been supporting a few cases in long-term care facilities and workplaces</li></ul>

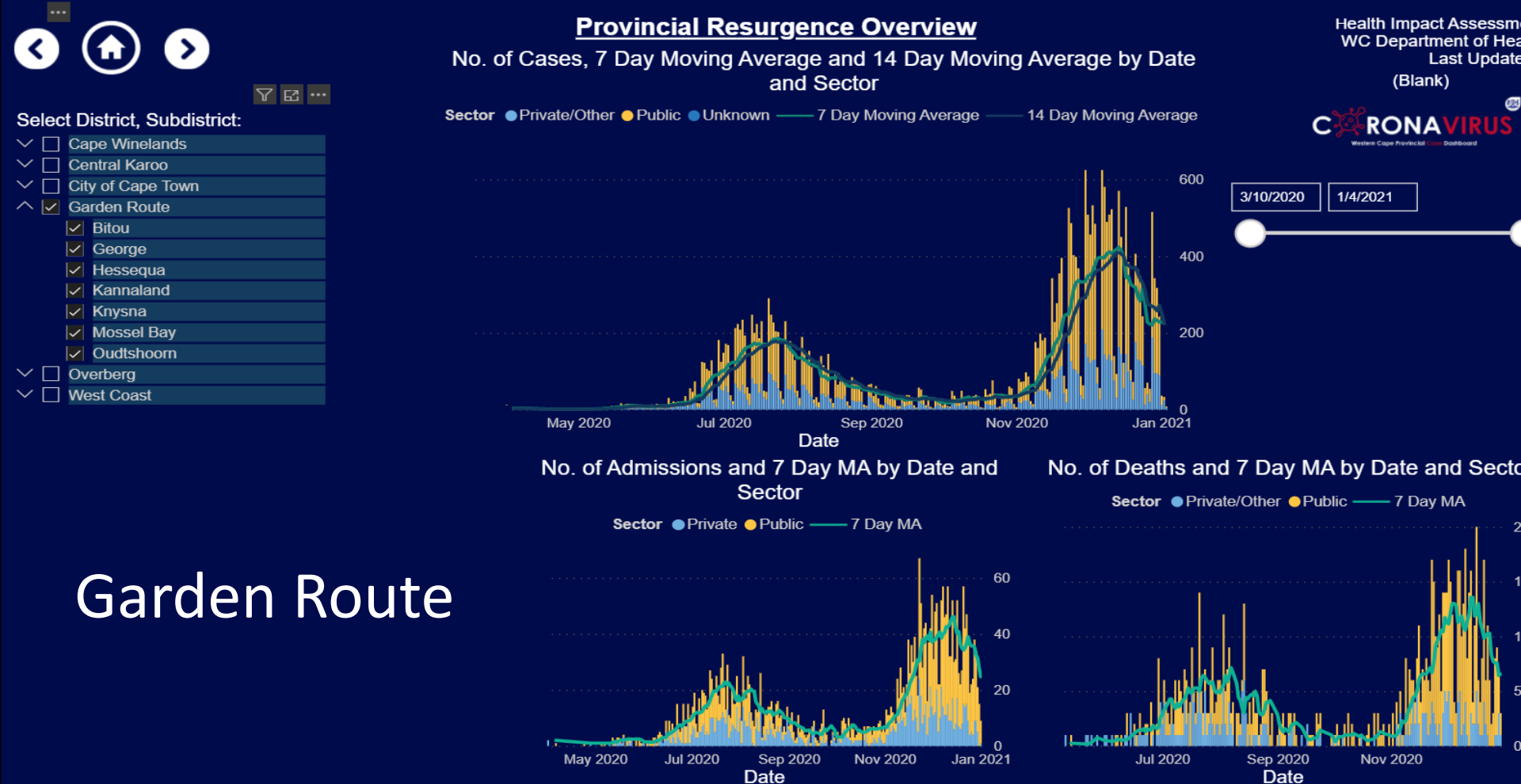
4 January  
2021

## Surveillance Huddle Report: Rural



Cape Winelands	<ul style="list-style-type: none"><li>• Cases and deaths increasing</li><li>• High Positivity rate among SAPS and municipality staff</li><li>• Patients are sick when they arrive at hospital.</li><li>• Oxygen levels under pressure</li></ul>
Central Karoo	<ul style="list-style-type: none"><li>• Increase in active cases, lots of family clusters</li><li>• High Positivity rate among SAPS, Municipality staff – especially traffic officers</li><li>• Deaths increasing</li></ul>
Garden Route	<ul style="list-style-type: none"><li>• Hessequa remains the sub-district with high numbers of new cases per day</li><li>• Oudtshoorn Hospital is the busiest of the district hospitals with other hospitals having a slight respite</li><li>• George Hospital critical care unit remains very busy</li><li>• All hospitals have seen a decrease in trauma cases at ECs over the weekend</li><li>• 115 deaths the last 7 days, compared to 92 the week before</li></ul>
Overberg	<ul style="list-style-type: none"><li>• High number of positive cases reported daily for all sub districts</li><li>• High increase in deaths</li><li>• Household clusters</li><li>• Biggest concern currently is an outbreak in a local Correctional Facility-being investigated.</li></ul>
West Coast	<ul style="list-style-type: none"><li>• Cases and deaths increasing</li><li>• High Positivity rate among SAPS and municipality staff</li><li>• Patients are very sick when they arrived at hospital.</li><li>• PHC overwhelmed with test requests</li><li>• Oxygen levels under pressure</li><li>• Camping sites are closed</li></ul>





## Garden Route

The Garden Route has now clearly passed the peak of the second wave.

Cases and hospitalisations remain on a downward trend. However, there has been a week on week increase in deaths.

The critical care unit in George Hospital remains under pressure

# Scaling up health platform COVID capacity

# Scaling up COVID capacity – general comments

## 1. PHC capacity:

- a) The PHC facilities facing **increasing demand** for **COVID testing**, and providing **triage** for **confirmed cases**.
- b) **Prioritisation of testing** and active **de-escalation** of **non-COVID PHC services**.

## 2. Hospital capacity:

- a) **7 537 total acute operational** public sector beds (excluding specialised beds at psych hospitals, TB hospitals, Red Cross hospitals, Mowbray Maternity hospital), **inclusive of general and critical care** public sector beds for COVID patients. The operational bed number differ from day to day, depending on staffing and oxygen availability.
- b) **626 inter-mediate care beds** in Metro provisioned: **336 Brackengate, 90 at Lenteguur, 200 at MPH Covid field hospital** - beds commissioned in an incremental fashion to ensure oxygen and staffing stability.
- c) We also have **59 intermediate care beds at Sonstraal Hospital**, in Paarl.
- d) Thereafter, depending upon staffing availability and if the need exists, we can open an additional **136 intermediate care beds** across the metro and rural platforms.

## 3. Fatalities management capacity:

- a) Mass fatality centre in the Metro with capacity for **240 bodies**; currently **155 decedents** and a **cumulative total** of **885** bodies admitted.
- b) Mass fatality **work group** co-ordinating capacity across the province.

# Hospital Admissions By Health District (public and private)

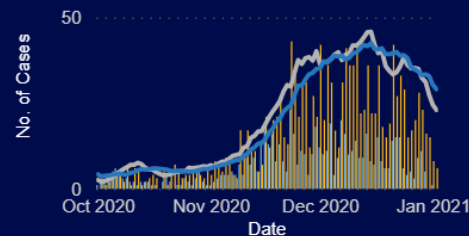
Health Impact Assessment  
WC Department of Health  
Last Updated:  
Monday, 4 January 2021

## Hospitalizations by District

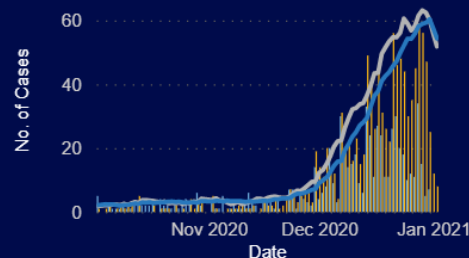
10/1/2020

1/4/2021

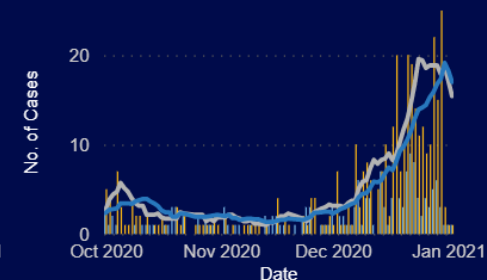
### Garden Route



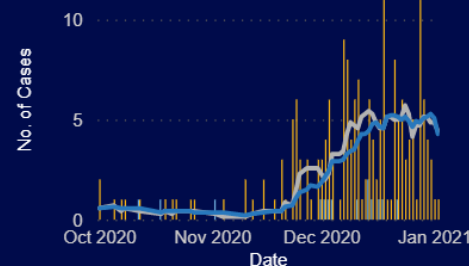
### Cape Winelands



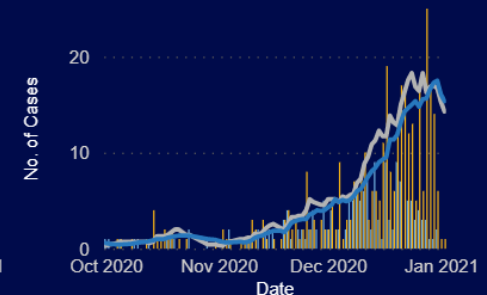
### West Coast



### Central Karoo

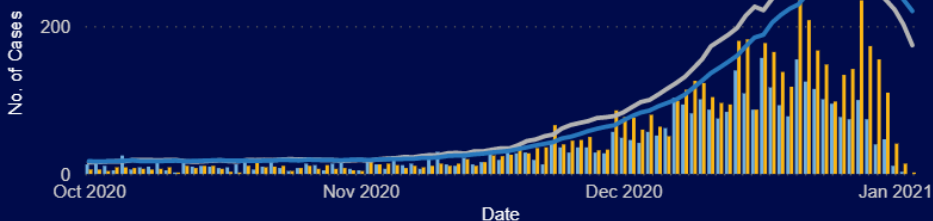


### Overberg



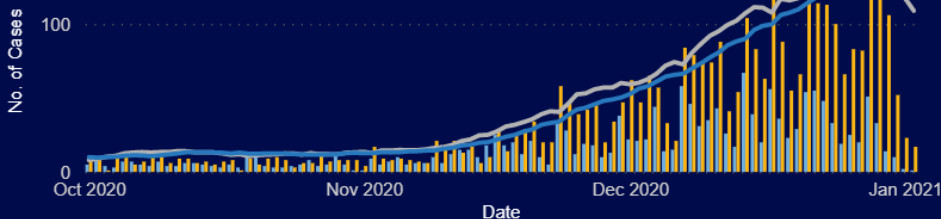
### City of Cape Town: Admissions with 7 and 14 Day MA by Date and sector

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



### Rural : Admissions with 7 and 14 Day MA by Date and sector

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



The seven day moving average has crossed the 14 day moving average in the Metro and Rural, indicating a decrease in total hospitalisations. This is a positive sign and will be watched closely.

The Garden Route continues to be under pressure, but hospitalisations are lower than the peak of the second wave.

# Acute service platform – general comments

1. Currently **3290 COVID patients** in our acute hospitals (**2052 in public** hospitals & **1238 in private** hospitals). This **excludes PUIs** and **cases in specialised hospital** settings.
2. COVID **hospitalisations** have continued **increasing** whilst we are experiencing **psychiatric** pressures; **trauma** has **decreased significantly**.
3. The **Metro hospitals** are running at an average **occupancy rate** of **99%**; **George** drainage area hospitals at **65%**; **Paarl drainage area** hospitals at **70%** & **Worcester** Drainage Area hospitals at **75%**.
4. Occupancies in the COVID general beds however reflect the **COVID pressures** with **Metro** hospitals at **96%**; **George** drainage area hospitals at **62%**; **Paarl** drainage area hospitals at **70%**; **Worcester** drainage area hospitals at **102%**
5. **COVID & PUI cases** currently make up **33%** of all available acute general hospital capacity in both Metro and Rural Regional Hospital drainage areas with **average occupancies of 92%** in COVID acute general beds
6. **COVID inter-mediate care** - the **Hospital of Hope** (Brackengate) currently has **307** patients (2 334 cumulative admissions), **Freesia & Ward 99** has **54 patients**, **Mitchell Plain field hospital** has **64 patients** and **Sonstraal** currently has **34 patients**.

# Acute service platform – general comments

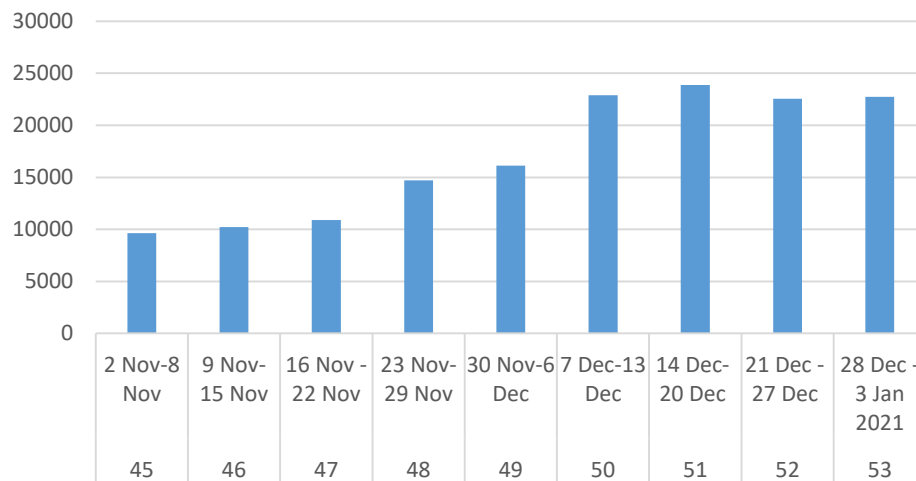
---

1. **Temporary tents** have been commissioned at the following hospitals: **Khayelitsha, Wesfleur, Mitchell's Plain, Eerste River, Helderberg, Karl Bremmer, Brackengate** – these are used for discharges mainly to ensure a more rapid turn-around time of the operational beds (Brackengate has two tents used for admissions and discharges).
2. **EMS and DTPW Taxi service** has implemented a **streamlined transport system** to assist with **inter-facility transfers** and **rapid discharges**, to optimise capacity.
3. Our data team has developed an integrated **daily hospital bed available capacity** and **utilisation dashboard**, which is also linked to **available staffing** and **oxygen capacity** at each of the hospitals.

# Update on Public Sector Testing

WEEK	DATE	NUMBER OF TESTS
45	2 Nov-8 Nov	9647
46	9 Nov- 15 Nov	10 229
47	16 Nov -22 Nov	10909
48	23 Nov-29 Nov	14706
49	30 Nov-6 Dec	16131
50	7 Dec-13 Dec	22901
51	14 Dec- 20 Dec	23866
52	21 Dec - 27 Dec	22549
53	28 Dec - 3 Jan 2021	22742

Public Sector Lab Tests



1. There has been a significant increase in testing in the public sector that has been maintained at double the testing prior to the resurgence
2. NHLS is successfully using mobile antigen testing across the province, especially at hospitals with on-site laboratories.
3. The testing criteria have been updated based on available testing capacity, and testing restrictions have been implemented

# Acute Care Availability & Utilisation per Drainage Area

Drainage Area	Operational Beds	Filled Beds	BUR %	% Covid patients	BUR % for Covid Beds(General Wards)
Cape Town	4 901	4 872	99%	29%	96%
George	895	586	65%	35%	62%
Paarl	943	659	70%	34%	90%
Worcester	798	600	75%	57%	102%
SubTotal WCDOH	7 537	6 717	89%	33%	92%

*Excluding Specialised Hospitals e.g. Mowbray Maternity, Psychiatric Hospitals, etc*

**Operational Bed = an inpatient bed available for inpatient use that is staffed and equipped.**



# Cape Town/ Metro Acute Care Availability & Utilisation

Drainage Area	Hospital	Operational Beds	Filled Beds	BUR %	% Covid patients	BUR % for Covid Beds (General Wards)
Cape Town	Tygerberg Hospital	1 407	1 337	95%	11%	74%
	Groote Schuur Hospital	1 066	965	91%	24%	89%
	Wesfleur Hospital	45	37	82%	46%	126%
	False Bay Hospital	58	49	84%	27%	75%
	Victoria Hospital	173	202	117%	47%	180%
	New Somerset Hospital	334	304	91%	31%	95%
	Mitchells Plain District Hosp	365	455	125%	29%	121%
	Khayelitsha Hospital	340	424	125%	17%	70%
	Karl Bremer Hospital	305	292	96%	37%	115%
	Helderberg Hospital	178	221	124%	26%	109%
	Eerste River Hospital	150	178	119%	34%	133%
	Brackengate Intermediate Care	330	309	94%	98%	92%
	LGH ward 99	30	25	83%	100%	83%
	Lentegeur Hospital: Fresia Ward	60	29	48%	100%	48%
	Mitchells Plain Intermediate Hosp	60	45	75%	100%	113%
	<b>Total Cape Town Drainage Area</b>	<b>4 901</b>	<b>4 872</b>	<b>99%</b>	<b>29%</b>	<b>96%</b>
	<b>SubTotal WCDOH</b>	<b>7 537</b>	<b>6 717</b>	<b>89%</b>	<b>33%</b>	<b>92%</b>

# George Drainage Area Acute Care Availability & Utilisation

Drainage Area	Hospital	Operational Beds	Filled Beds	BUR %	% Covid patients	BUR % for Covid Beds (General Wards)
George	Beaufort West Hospital	51	34	67%	56%	79%
	Laingsburg Hospital	20	4	20%	50%	33%
	Murraysburg Hospital	14	4	29%	75%	150%
	Prince Albert Hospital	29	10	34%	60%	86%
	Alan Blyth Hospital	30	12	40%	17%	20%
	Knysna Hospital	109	84	77%	36%	60%
	Mossel Bay Hospital	78	48	62%	31%	47%
	Oudtshoorn Hospital	121	103	85%	41%	70%
	Riversdale Hospital	50	39	78%	41%	57%
	Uniondale Hospital	13	8	62%	13%	50%
	Harry Comay TB Hospital	101	48	48%	38%	45%
	George Hospital	279	192	69%	28%	81%
<b>Total George Drainage Area</b>		<b>895</b>	<b>586</b>	<b>65%</b>	<b>35%</b>	<b>62%</b>

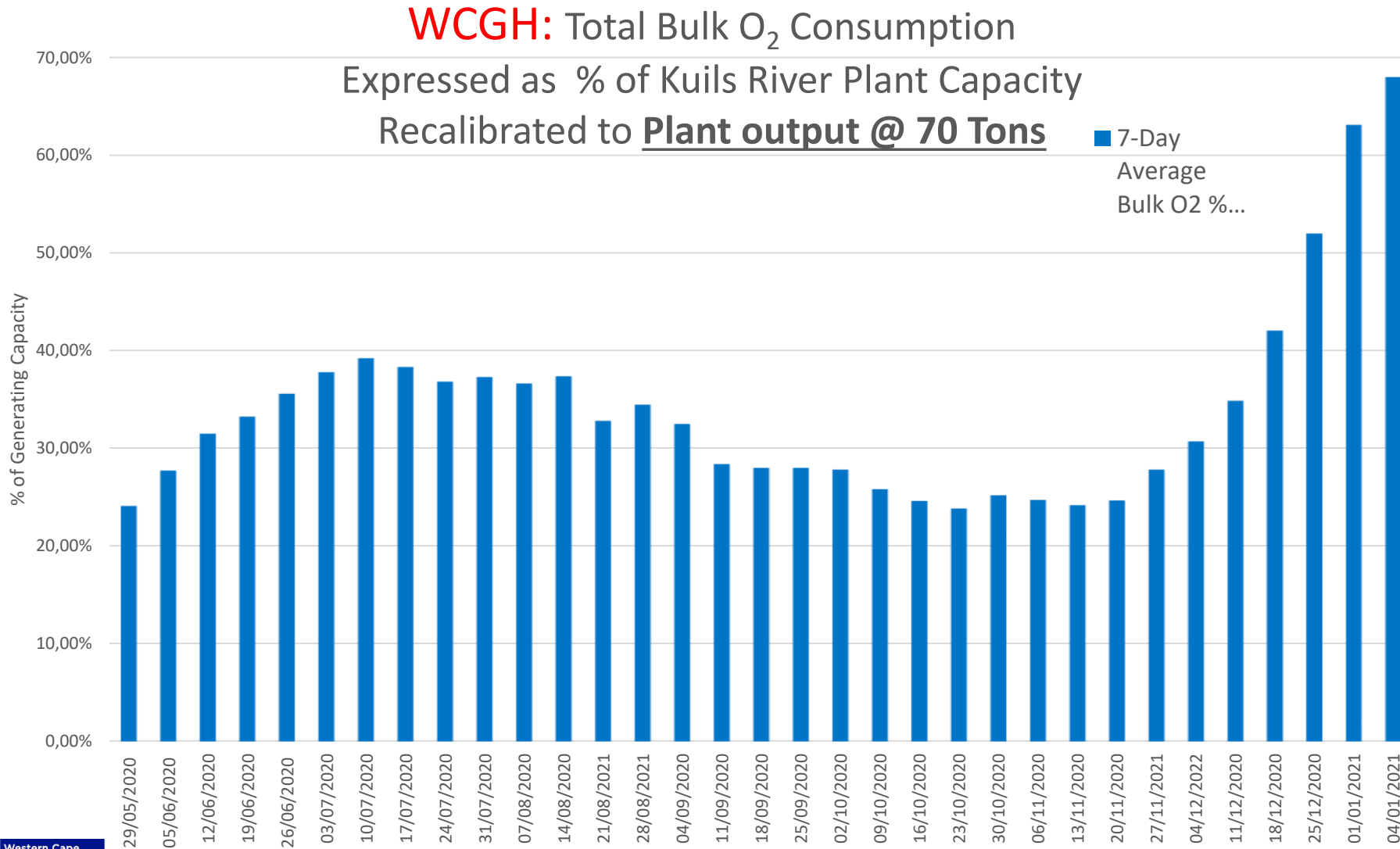
# Paarl Drainage Area Acute Care Availability & Utilisation

Drainage Area	Hospital	Operational Beds	Filled Beds	BUR %	% Covid patients	BUR % for Covid Beds (General Wards)
Paarl	Stellenbosch Hospital	110	39	35%	33%	48%
	Citrusdal Hospital	40	19	48%	42%	67%
	Clanwilliam Hospital	50	36	72%	19%	100%
	LAPA Munnik Hospital	15	6	40%	17%	20%
	Radie Kotze Hospital	43	17	40%	53%	53%
	Swartland Hospital	72	50	69%	42%	70%
	Vredenburg Hospital	124	105	85%	35%	106%
	Vredendal Hospital	87	69	79%	32%	85%
	Paarl Hospital	343	290	85%	26%	148%
	Sonstraal TB Hospital	59	28	47%	100%	88%
<b>Total Paarl Drainage Area</b>		<b>943</b>	<b>659</b>	<b>70%</b>	<b>34%</b>	<b>90%</b>

# Worcester Drainage Area Acute Care Availability & Utilisation

Drainage Area	Hospital	Operational Beds	Filled Beds	BUR %	% Covid patients	BUR % for Covid Beds (General Wards)
Worcester	Ceres Hospital	100	94	94%	53%	111%
	Robertson Hospital	55	43	78%	40%	53%
	Montagu Hospital	48	43	90%	47%	91%
	Caledon Hospital	62	37	60%	49%	78%
	Hermanus Hospital	103	76	74%	59%	138%
	Otto Du Plessis Hospital	51	40	78%	78%	148%
	Swellendam Hospital	76	36	47%	78%	122%
	Worcester Hospital	303	231	76%	58%	96%
Total Worcester Drainage Area		798	600	75%	57%	102%

# Provincial oxygen consumption at 69.57 % of total capacity



# Total bulk oxygen consumption / day



Reference = average daily consumption over  
past year leading up to March 2020 = 12.2  
TONS/ Day

# Oxygen utilisation – general comments

---

1. The combined oxygen utilisation in the Western Cape Public and Private hospital sectors is approximately **76.4 tons** daily.
2. Whilst Public sector hospital consumption is at **69%** of the Western Cape production capacity, the additional **31%** is used by the private sector, military hospital, etc. – the **combined utilisation** has moved **above the maximal production capacity** of the Afrox Western Cape plant.
3. Afrox have put contingency plans into place by bringing **additional oxygen into the province daily**, to augment the provincial supplies to provide a total capacity of **95 tons of oxygen per day**.
4. The Western Cape now have **5 bulk oxygen tankers** allocated for the delivery of oxygen supplies during this week.
5. We will monitor the utilisation of oxygen carefully over the coming weeks.

# Scaling down non- COVID capacity



# Scaling down non-COVID capacity – general comments

---

1. The recent regulations have had a significant impact on reducing **alcohol-related trauma**, especially in the **emergency centres** and in **critical care**.
2. The **psychiatric pressures at acute hospitals** have also resulted in the need to bring on line **100 additional beds at psychiatric hospitals** to further decongest the acute hospital platform.
3. The **de-escalation** of all other **non-COVID PHC and hospital care activities** are being managed actively across all hospitals on the service platform.

How have the  
recent alcohol  
regulations affected  
hospital trauma  
presentations?



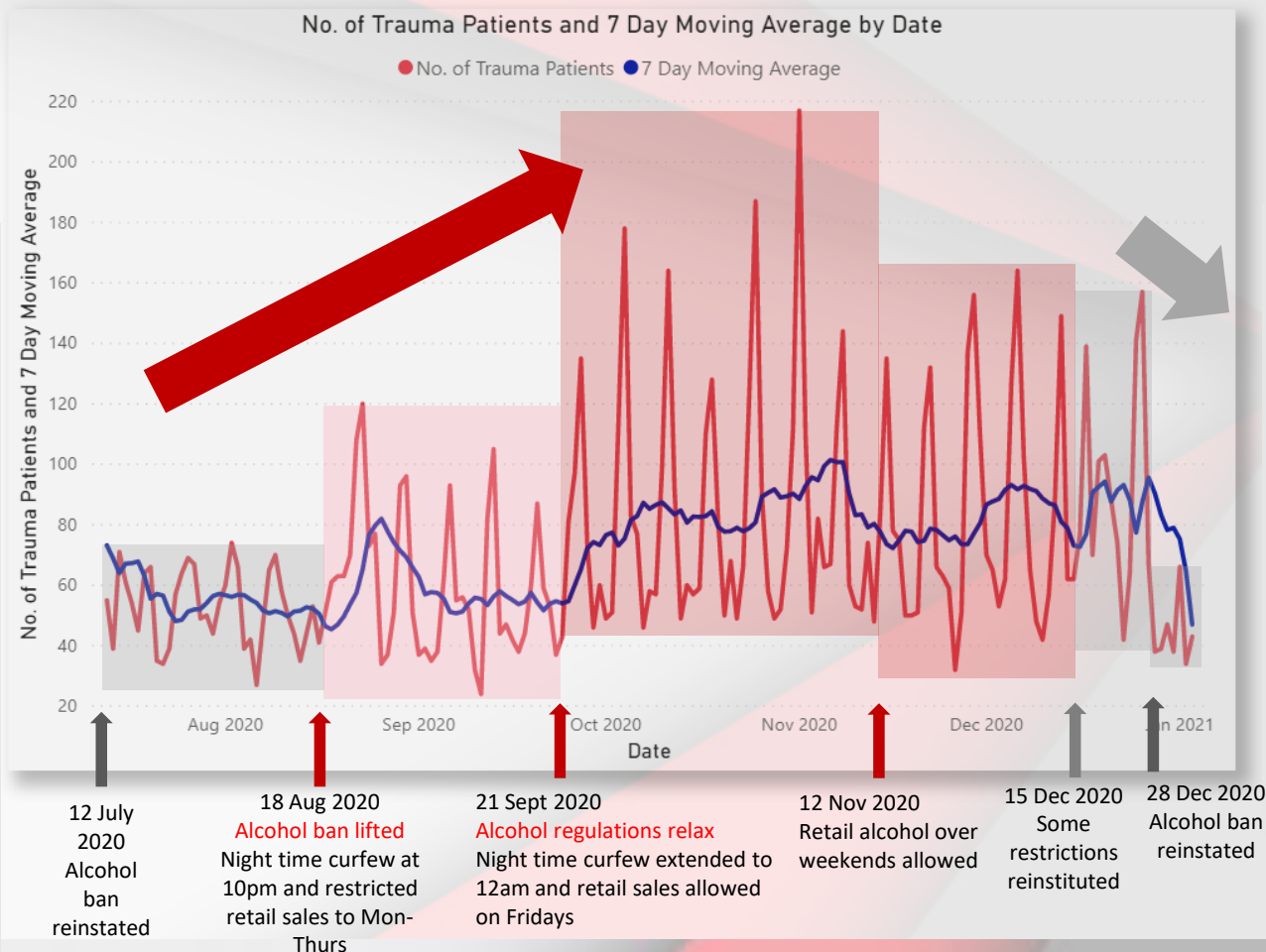
**Overview of the impact of recent alcohol regulation changes on trauma presentations (13 Jul 2020-03 Jan 2021)**

**The data clearly shows that with every relaxation of alcohol regulation, we see trauma numbers consistently increase in response to the regulation introduced.**

**Similarly, with every restriction we see trauma numbers decrease.**

## Sentinel Trauma Report

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

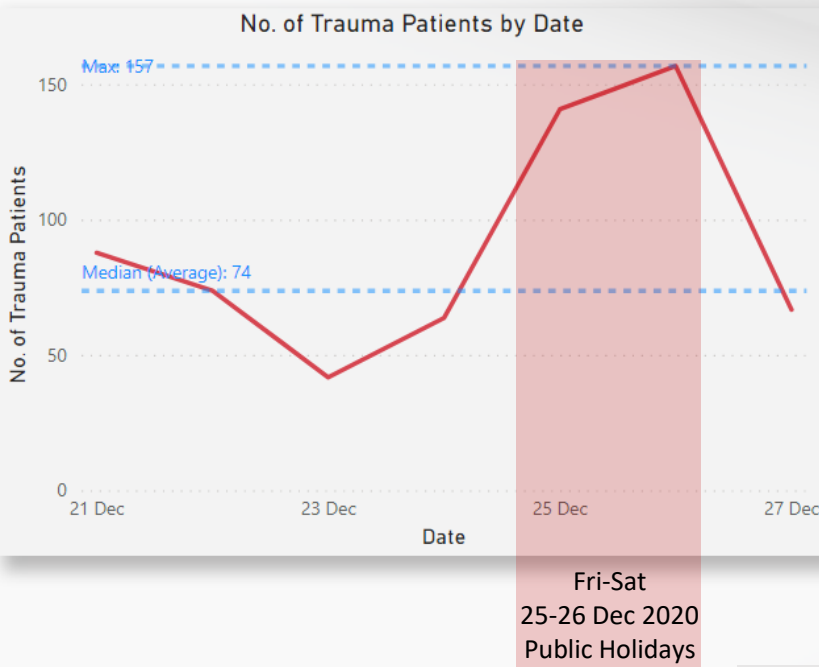


**We saw a significant decline in trauma presentations to Emergency Centres immediately after the alcohol ban was reinstated.**

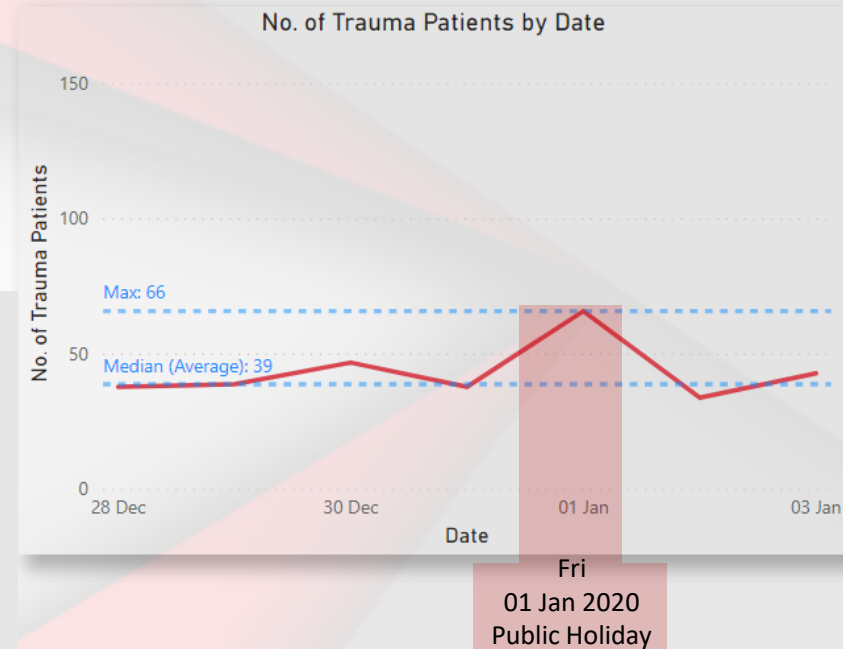
# Sentinel Trauma Report

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

## 1 week BEFORE the alcohol ban



## 1 week AFTER the alcohol ban



Immediately  
after the  
alcohol ban,  
daily trauma  
presentations  
on average  
decreased by  
47%.

The maximum daily  
trauma presentations saw  
a decline to the order of  
58%.

This compared Boxing Day  
to New Years Day.

### Restrictions in place 1 week BEFORE:

- Nighttime curfew 23:00-04:00
- Retail alcohol sales restricted to Monday-Thursdays

### Restrictions in place 1 week AFTER:

- Nighttime curfew 21:00-06:00
- Complete ban on alcohol sales

Source: HEC<sup>T</sup>IS  
Health Emergency Centre Trauma Information System

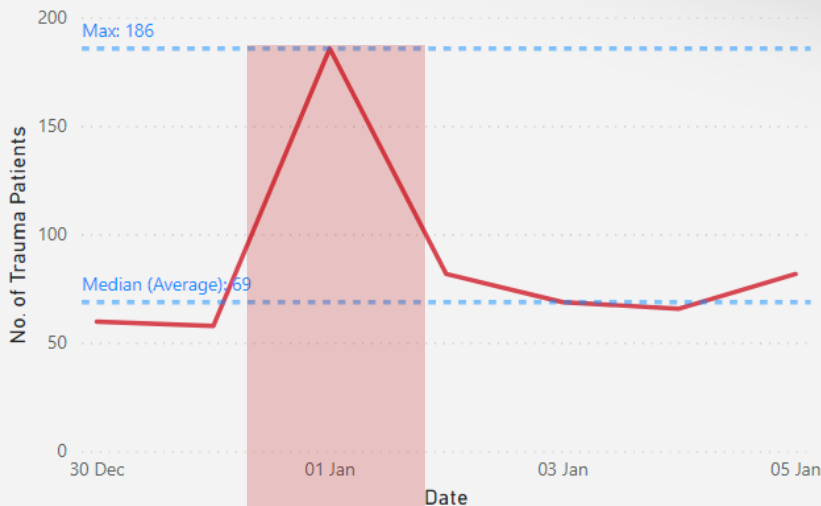
## Sentinel Trauma Report

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



### New Years Week 2020

No. of Trauma Patients by Date



Wednesday  
01 Jan 2020

**-65%**

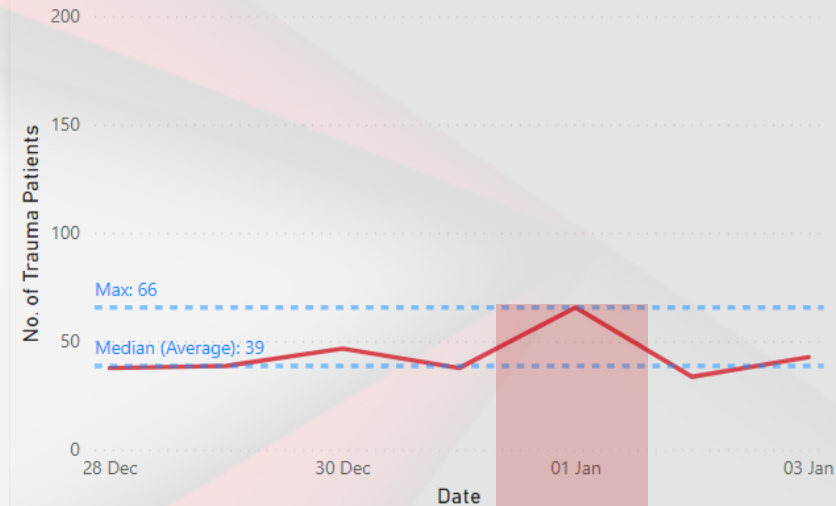


**Compared to  
New Years Day  
in 2020,  
in 2021 we  
flattened the  
curve of trauma  
and saw trauma  
presentations  
to hospitals  
decrease by  
65%!**



### New Years Week 2021

No. of Trauma Patients by Date



Friday  
01 Jan 2021

**The current restrictions on alcohol sales has resulted in a significant decline in trauma presentations to hospitals when comparing the same period last year. This clearly validates the experience reported from Emergency Centre staff across the country and in the Western Cape.**

# Safe-guarding well-being of health care workers

# Safe-guarding health care workers – general comments

---

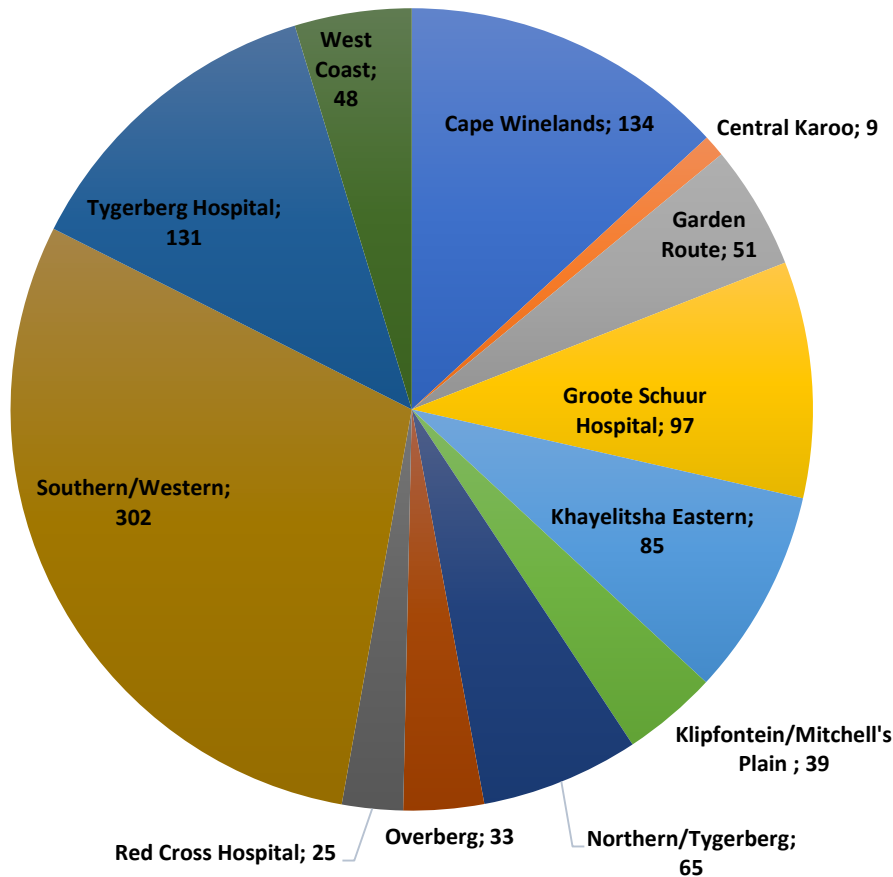
1. The biggest challenge is the **increasing COVID infection rate** amongst health care workers, and the impact on **staff member isolation and quarantine**.
2. The **availability** of additional staff members for **contract work** and **via agencies** is also a significant challenge.
3. The number of people willing to **volunteer their services** has also **decreased significantly**.
4. There is **sufficient PPEs across all the health facilities**, and in central storage, with additional orders being placed in recent weeks.
5. The system to provide **on-site support to frontline staff** in terms of **mental well-being** is being **scaled-up**.

# Current Health Care Worker Infections

Currently, **1019** Health Care Workers across **97 institutions** are infected with COVID-19 which equates to **3.08%** of a total staff complement of **33 062**.

- Cumulative total of **7 246** staff members took COVID related leave, to date (from March '20).

- A total of **37 795 days** were taken over the period which relates to an average of **5 days per case**.





# COVID Response – Staffing Strategy

## Source-and-Supply of Nursing Staff

### Existing Capacity with Comm Services and Currently In Service (44% to be retained)

- Offering Short-Term Contracts
- Filling of Vacancies (on reserve)

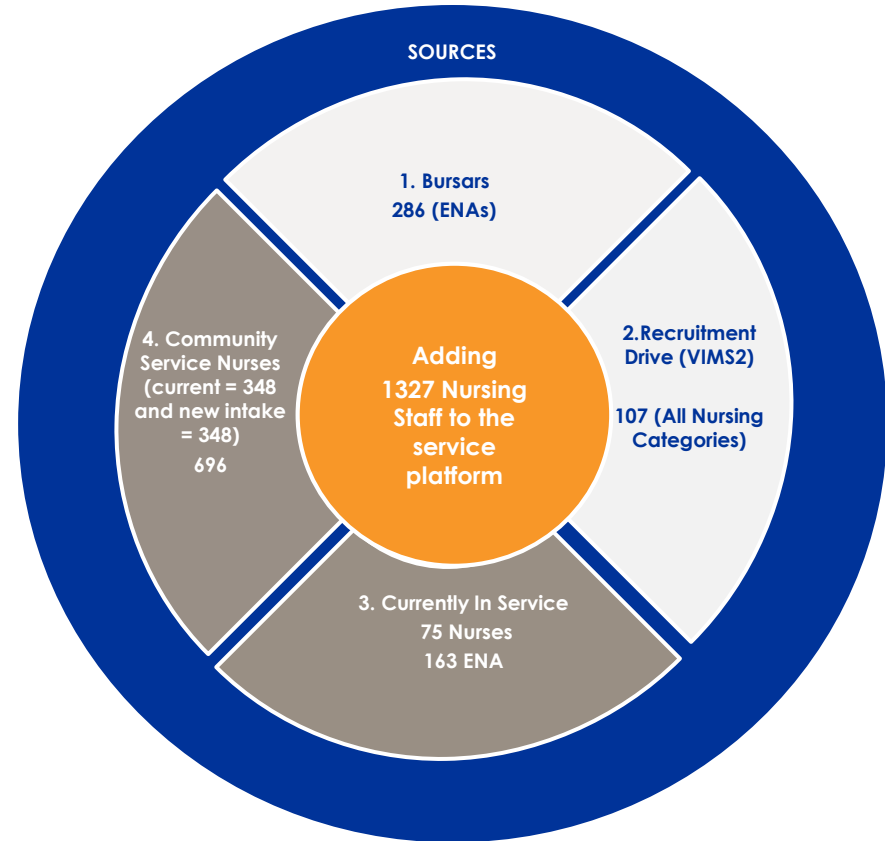
### Proactive Recruitment

(56% to be on-boarded)

- Appointment via Recruitment Drive
- Placement of Bursaries
- 495 contract appointments are currently in process since 1 Jan 2021 across the platform.
- 322 Medical Interns Appointed.

### Additional deployment

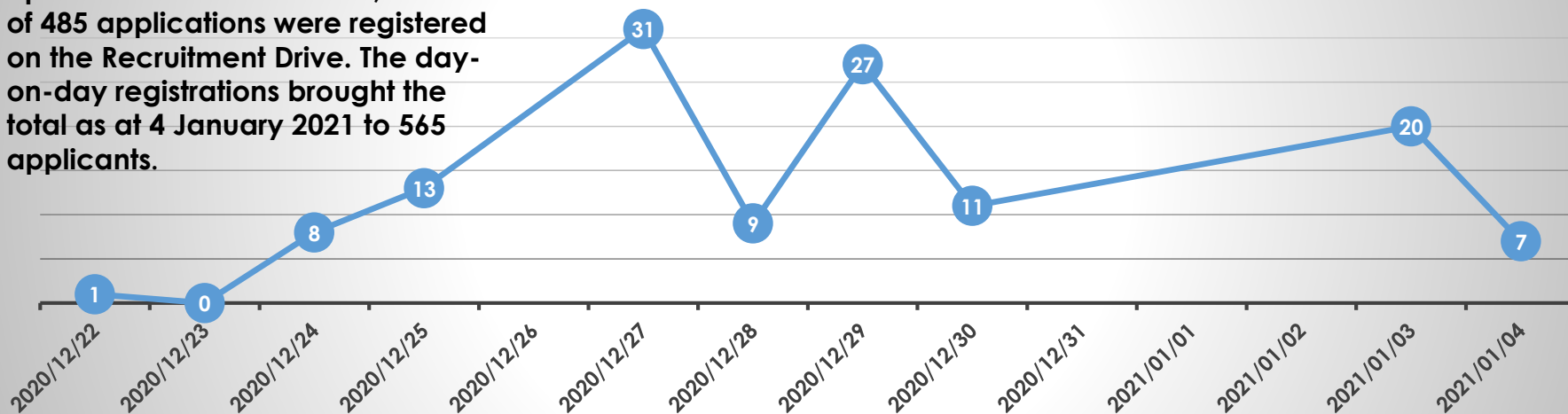
- SA Military request for specific staff in specific hospitals



# High Level Summary on Recruitment Drive

## Number of new entries on the Recruitment Drive

Up until 27 December 2020, a total of 485 applications were registered on the Recruitment Drive. The day-on-day registrations brought the total as at 4 January 2021 to 565 applicants.



Category of HCW	Possibly Available	Appointed on PERSAL
MO	130	17
Enrolled Nurse(EN)	86	11
Enrolled Nursing Auxiliary (ENA)	106	10
Not Indicated	22	4
Professional Nurse	110	30
Professional Nurse with Specialty	31	8
	<b>485</b>	<b>80</b>

Institutions have made 495 Offers to the following categories of staff:

OSD-Category Rank/Post	Reserved Posts
Allied Health	3
Doctors	36
Nursing	444
Pharmacists	1
Pharmacists-Assistant	1
Social Workers	1
Admin and Related	9
Grand Total	495

Of the 495 offers made, 80 were recruited from the Recruitment Drive and the balance were recruited from internal sources at Institutional level.

# Vaccine Strategy

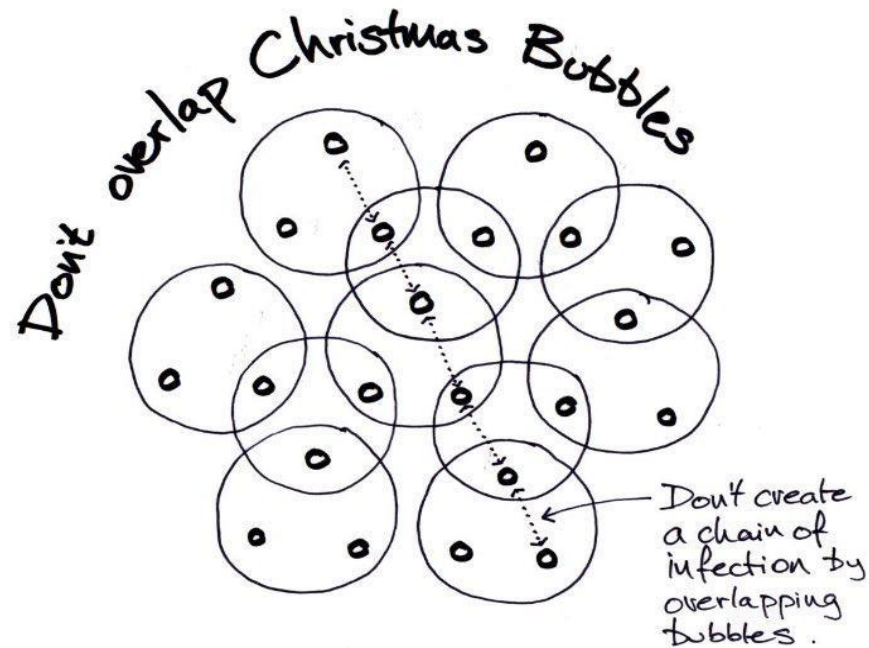
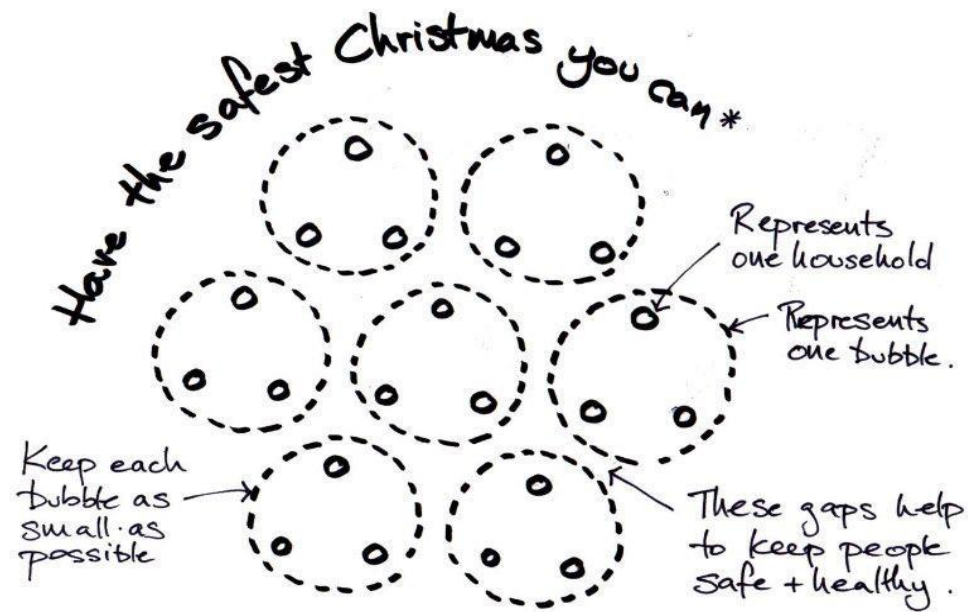
# Vaccine Strategy

---

1. **Pro-active strategy** to access **SAHPRA approved vaccines** in Western Cape – **aligned to the National Vaccine process**.
2. **Technical expert committee** will provide technical advice in relation to all aspects of the vaccine strategy.
3. **Prioritisation:**
  - a) Health Care workers and other essential workers
  - b) Vulnerable groups – elderly and people with co-morbidities
4. **Demand forecast and logistics:**
  - a) Estimated numbers of vaccines required per prioritised category
  - b) Logistics to be prepared for the administration of the vaccines
5. Next **concrete steps and timelines** include **SAHPRA approval**, sourcing and distribution strategy to **providing vaccines early in 2021**.

# Key public messages approaching the peak

# Maintain safe Household Bubbles



\* The fewer people you see,  
the safer we all are.

# Handy information during the peak (and beyond)

Many more people will be testing positive, and coming into contact with infected people. Please ensure you have the right information handy.

## Caring for your family at home

December 2020

### COVID-19

#### Caring for your family at home

**Use this information if you:**

- Test positive for COVID-19 or
- Have COVID-19 symptoms or
- Have COVID-19 symptoms and are waiting for test results or
- Had close contact with someone with COVID-19.

**Don't panic!**

- Most people with COVID-19 have mild symptoms or no symptoms at all and can be treated safely at home.
- Children are unlikely to become severely ill from COVID-19.
- Adults over 55 years or with a chronic condition are more likely to get severe COVID-19.

COVID-19 spreads mainly when we breathe in small droplets produced when someone with COVID-19 breathes, coughs, sneezes, sings, talks or shouts. These droplets also land on surfaces and objects. Sometimes we can catch COVID-19 if we touch those surfaces and then touch our eyes, nose or mouth.

**What you need to do now is to look out for symptoms of severe COVID-19, keep separate from the public and protect those at risk of severe COVID-19.**

**Look out for COVID-19 symptoms**

- You may have a cough, sore throat, loss of the sense of taste or smell, or a fever; in children, there may also be vomiting or diarrhoea. Contact your healthcare provider or phone the Provincial COVID-19 Hotline.
- Seek help urgently if **you** have difficulty breathing, chest pains or pressure that won't go away, confusion or have difficulty waking up.
- Seek help urgently if **your child** has fast breathing, can't wake up completely, has a fit, won't drink anything or vomits everything.
- Call ahead. Avoid public transport. Use your own transport or if this is not possible, call an ambulance.

**STAY SAFE  
MOVE FORWARD**

Western Cape Government

### Keep separate from the public and from those at risk of severe COVID-19.

- Stay home. Do not go out or have visitors.
- Arrange with friends and family to drop groceries, meals and medicines at the door.



**Try to separate those with COVID-19 symptoms or who tested COVID-19 positive from everyone else at home, especially those at risk of severe COVID-19. If needed, children should stay with their main caregiver.**

**Stay in a separate room.**  
If you have to share a room, don't share a bed.



**Use shared spaces alone** after everyone else has finished.



**Keep at least 1,5 metres apart from others and wear a mask.**



### Try to keep shared items and spaces clean and separate

Use a bleach solution to disinfect items and surfaces that are touched often.



Have separate eating utensils, bedding and towels.



Wash used items in hot water. Heat helps disinfect items.



### Practise good hygiene

- Wear a mask if in contact with others. Children under two years should not wear a mask.
- Open doors and windows for fresh air.
- Cough or sneeze into your elbow or a tissue. Throw the tissue safely in a bin.
- Wash your hands often.



### Keep separate from others for 10 days

- If you have symptoms: stop separation 10 days after your symptoms started.
- If you have no symptoms, stop separation 10 days after your last contact with someone with COVID-19 or 10 days after you had a COVID-19 test.
- Discuss with a healthcare provider when to stop if your test was negative or if you are unwell at 10 days.

Western Cape COVID-19 Hotline:  
080 928 4102 (tollfree)

WhatsApp: "Hi" to  
0600 123 456

**STAY SAFE  
MOVE FORWARD**





# Handy information during the peak (and beyond)

## Isolate when you had contact

**WHEN AND HOW TO ISOLATE**  
**COVID POSITIVE/ AWAITING TEST RESULTS/**  
**CLOSE CONTACT OF A POSITIVE PERSON**

Coronavirus is highly infectious and spreads through small air droplets when in close contact with an infected person. It's important to isolate if you develop symptoms or are awaiting a test result.

**WHAT IS A CLOSE CONTACT ?**  
Someone you have been in contact with for more than 15 minutes, closer than 1.5 m, without wearing a mask. Download **CovidAlertSA app** to receive notifications if you were a close contact.

**WHAT YOU SHOULD DO**

- Stay home or go to an isolation facility.
- Those with COVID-19 symptoms or who tested positive, must stay in a separate room from everyone else at home **OR** ask to use an isolation and quarantine facility.
- Do not leave your house or isolation facility until you completed your isolation period.
- Do not go out or have visitors.
- Ask friends to drop groceries, meals and medicines at the door or order online.

**How long must you isolate?**  
**Mild symptoms/COVID-19 positive:**  
10 days after your symptoms started.

**COVID-19 positive but no symptoms:**  
10 days after you were tested.

**Close contact with someone with symptoms or confirmed COVID-19:**  
If you have no symptoms, 10 days after you had close contact. If you have symptoms, 10 days after symptoms started.

**FOR MORE INFORMATION**  
Western Cape Government  
COVID-19 Hotline (tollfree)  
021 928 4102 or 080 928 4102  
National Hotline 0800 029 999  
WhatsApp "Hi" to 0600 123 456

**STAY SAFE  
MOVE FORWARD**

## Continued prevention behaviour

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**



# Conclusions

## Concluding remarks

---

1. We have entered the **peak** of the **2<sup>nd</sup> wave** in the Western Cape, with early signs of stabilisation.
2. Our **local teams** are still on **high alert for surveillance & response** to localised clusters that can be targeted for maximum impact, **especially the vulnerable**.
3. Our biggest concern is the **non-adherence to protective behaviours** – hence the **targeted law enforcement** interventions, in line with **new regulations**.
4. The **hospitalisation** and **mortality data** continue to show an **increase**, with early signs of moving to a plateau.
5. We have **activated contingency plans** per geographic area to **scale up hospital COVID capacity** as required, while **alcohol-related trauma** has decreased.
6. Our key consideration is that our **health care workers have** and **continue to face significant strain**. We need to **safe-guard them and their families**.
7. It is essential to maintain a **strong focus on behaviour change** to ensure containment for the **6 months**, while clarity around the **vaccine** emerges.

# Thank you