

#### Western Cape Government

Health

#### **Digital Press Conference**

Health Update

Dr K Cloete

18 March 2021



## **Overview**

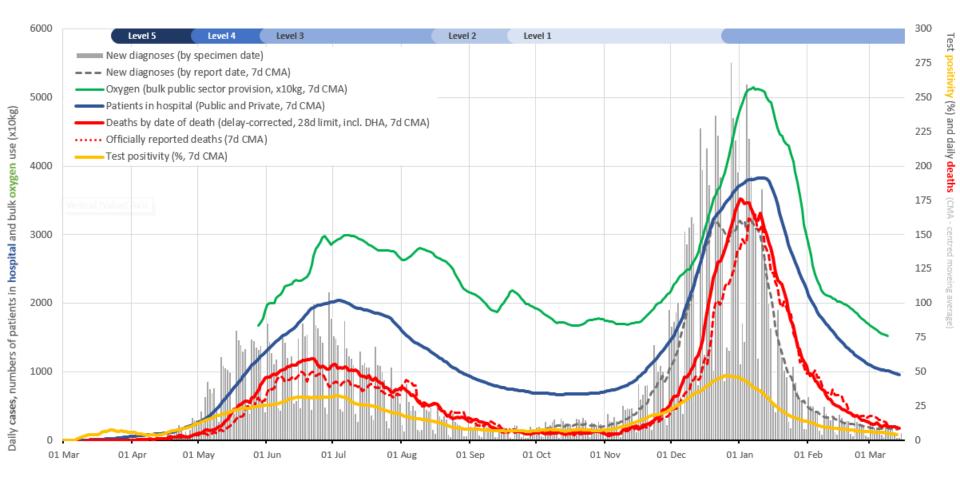
- 1. Surveillance & Response Update
- 2. Health platform COVID response
- 3. Well-being of health care workers
- 4. Vaccine strategy
- 5. Conclusions



# Surveillance & Response Update



## Integrated testing, case, hospitalisation and mortality trends

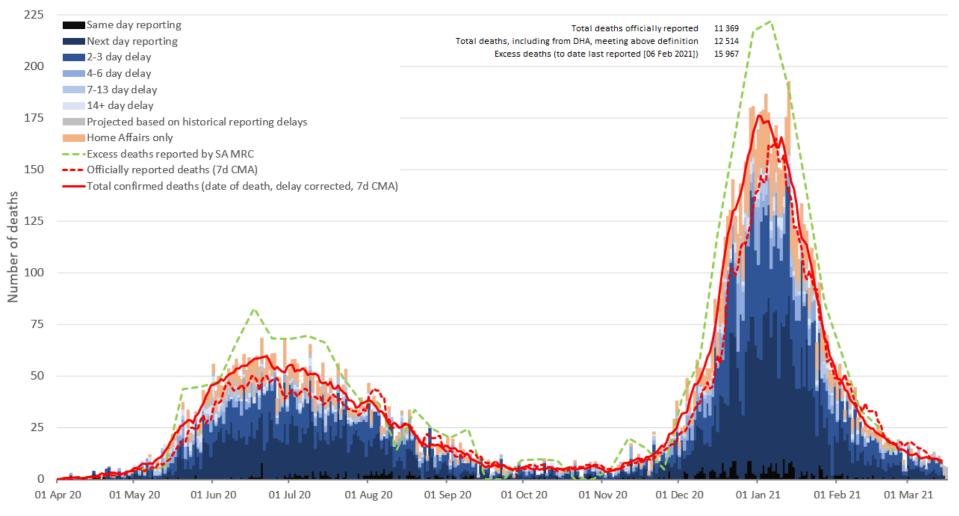




## Mortality by date of death

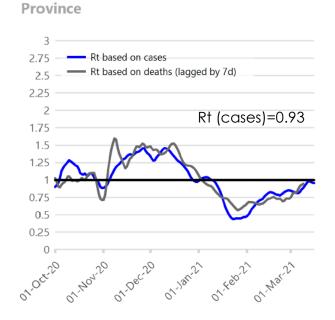
Mortality in patients with laboratory-confirmed SARS-CoV-2, by delay to reporting\*

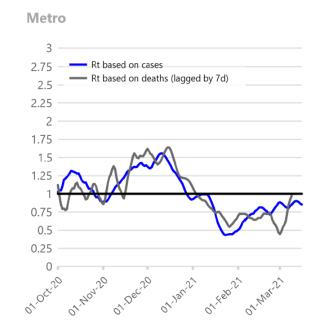
(within 28 days of diagnosis or 14 days of discharge, by date of death, excluding non-natural deaths on population register)



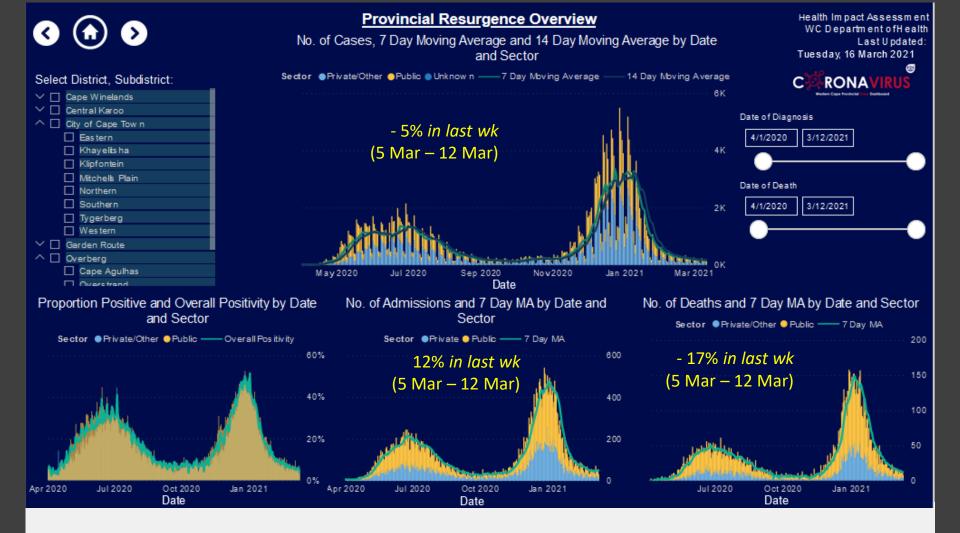
\* Excludes deaths in those with undiagnosed COVID-19, in patients with clinical diagnoses in spite of absent or false negative SARS-CoV-2 test results, and in those without recorded ID numbers dying at home or in ambulatory or emergency room care; CMA - centred moving average

## **Current reproduction number**



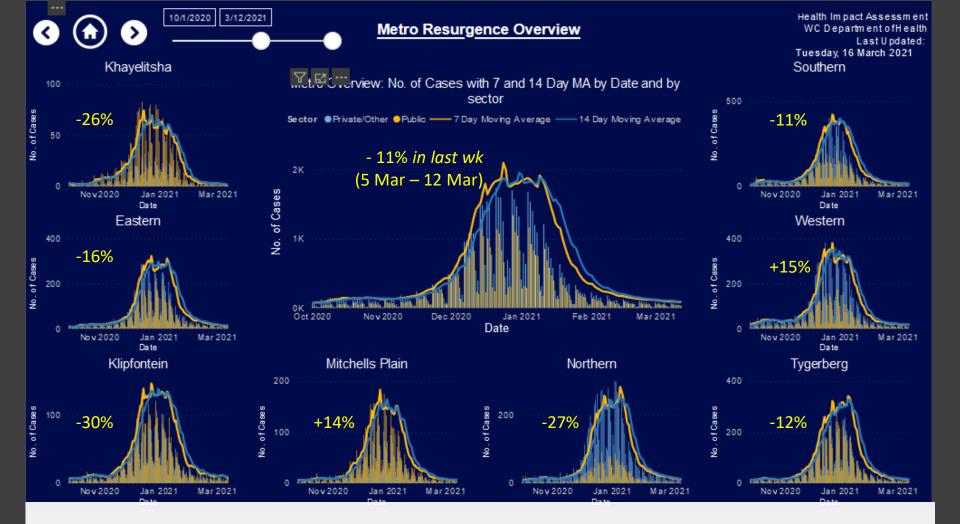






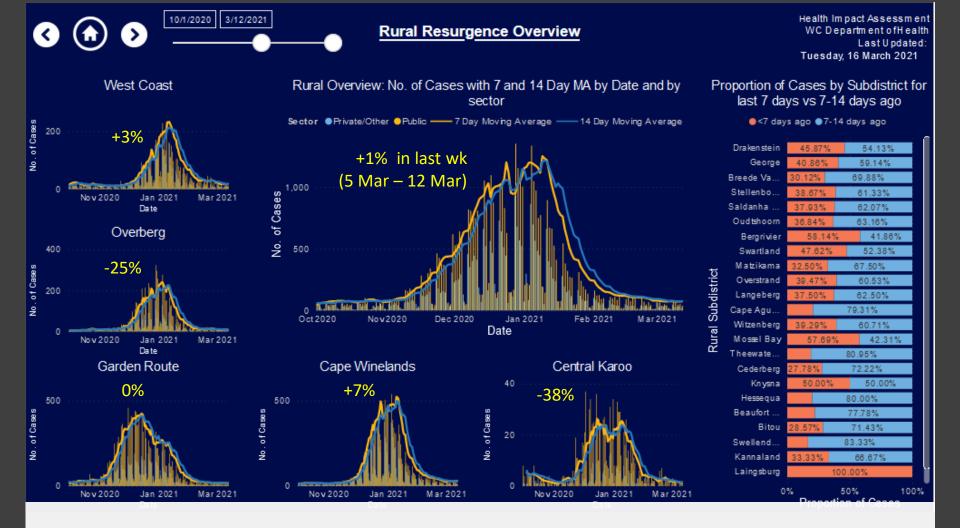
Provincial Overview

- COVID-19 cases and admissions in the Western Cape are starting to plateau. Deaths are still declining.
- Using the 7 day moving averages of new infections, confirmed cases have declined by 5%, but admissions have increased slightly by 12%. Deaths have dropped by 17%.
- The proportion positive is relatively stable at 5.2% on 12 March 2021.



#### Metro Overview

- Cases in the Metro decreased by 11% from 5 March to 12 March 2021.
- With relatively small absolute numbers of cases, the percentage increases of cases can vary quite dramatically.
- Mitchells Plain and Western Sub-districts are showing a slight increase, but the overall trend in the Metro is that case numbers are plateauing.
- High vigilance required over upcoming holiday period.



#### **Rural Overview**

- Cases in Rural have increased by 1% overall.
- Cape Winelands District has seen an increase in cases, and clusters there have been identified and are being managed. West Coast has also seen a slight increase in cases.
- We continue to watch for and work to contain local outbreaks in all districts, especially over upcoming holiday period.

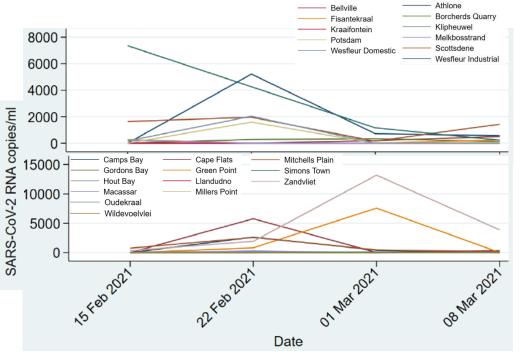
#### Triangulating with wastewater



#### SAMRC COVID- 19 AND WASTEWATER EARLY WARNING SYSTEM

WEEK 10 2021

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

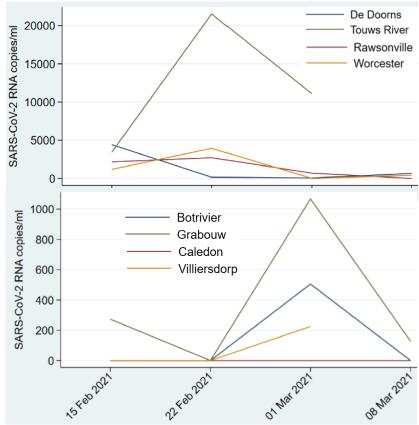


#### Metro:

Decrease/sustained low SARS CoV-2 RNA across most treatment plants with none detected at 9 treatment plants (previously 12). Noticeable decreases at Green Point & Zandvliet.

Increase in SARS-CoV-2 RNA >1000 copies/ml at:

- Scottsdene



#### Breede Valley:

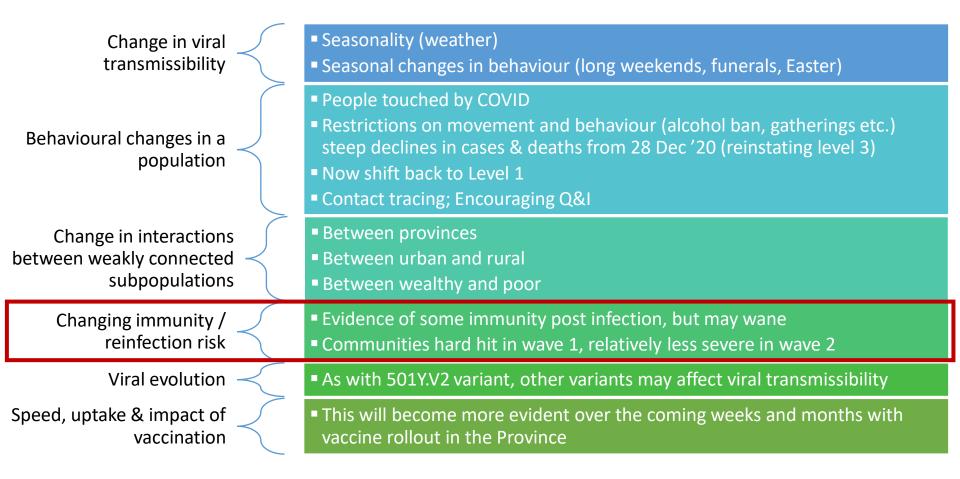
SARS CoV-2 remains low; not detected in Rawsonville (Note: no result for Touws River due to technical challenges)

#### Theewaterskloof:

Decreases in SARS-CoV-2 with none detected at Botrivier & Caledon (Note: no results for Villiersdorp due to technical challenges.)

## South Africa and Western Cape – expectations for 3<sup>rd</sup> wave

- 1. National MAC technical working group with involvement of WC epidemiologists
- 2. 3<sup>rd</sup> wave is very likely but there remains uncertainty about timing, location and magnitude of resurgence. This will be driven by:



#### Messages for the holiday season: making safer choices

#### **GO SMALLER**

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





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





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



GO VIRTUAL

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





# The health platform COVID response



## Acute service platform – general comments

- 1. Currently **950 COVID patients** in our acute hospitals (**548** in **public** hospitals & **402** in **private** hospitals). This **excludes PUIs** and **cases in specialised hospital** settings.
- COVID hospitalisations have continued to decline; there has however been an increase in trauma cases
- 3. The Metro hospitals have an average occupancy rate of 86%; George drainage area hospitals at 62%; Paarl drainage area hospitals at 71% & Worcester drainage area hospitals at 69%.
- Occupancies in COVID beds show Metro hospitals at 11%; George drainage area hospitals at 15%; Paarl drainage area hospitals at 23%; Worcester drainage area hospitals at 20%.
- 5. COVID & PUI cases currently make up 6% of all available acute general hospital capacity in both Metro and Rural Regional Hospital drainage areas.
- 6. COVID inter-mediate care the Brackengate Hospital of Hope currently has 12 patients (3 245 cumulative patients), Freesia & Ward 99 has 5 patients, Mitchell Plain Hospital of Hope has 11 patients and Sonstraal currently has 1 patient.
- 7. The Metro mass fatality centre has capacity for 240 bodies; currently 0 decedents (cumulative total of 1368 bodies) admitted. The overall capacity has been successfully managed across the

Province.

## Acute Care Availability & Utilisation per Drainage Area



#### WCDOH: Daily Operational Bed Status Dashboard as at 17/03/2021

Drainage Area		Filled				Designated Covid	Designated Covid
Dramage Area	Operational	Beds		COVID	% Covid	Beds(General	Beds(Critical
	Beds		BUR %	BUR %	patients	Wards)	Care)
Cape Town /Metro	5,041	4,342	86%	11%	4%	10%	21%
George	918	569	62%	15%	<mark>8</mark> %	15%	17%
Paarl	940	663	71%	23%	1 <b>0</b> %	22%	100%
Worcester	781	539	69%	20%	14%	<b>19%</b>	30%
SubTotal WCDOH	7,680	6,113	80%	14%	<b>6%</b>	13%	<b>26</b> %

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

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



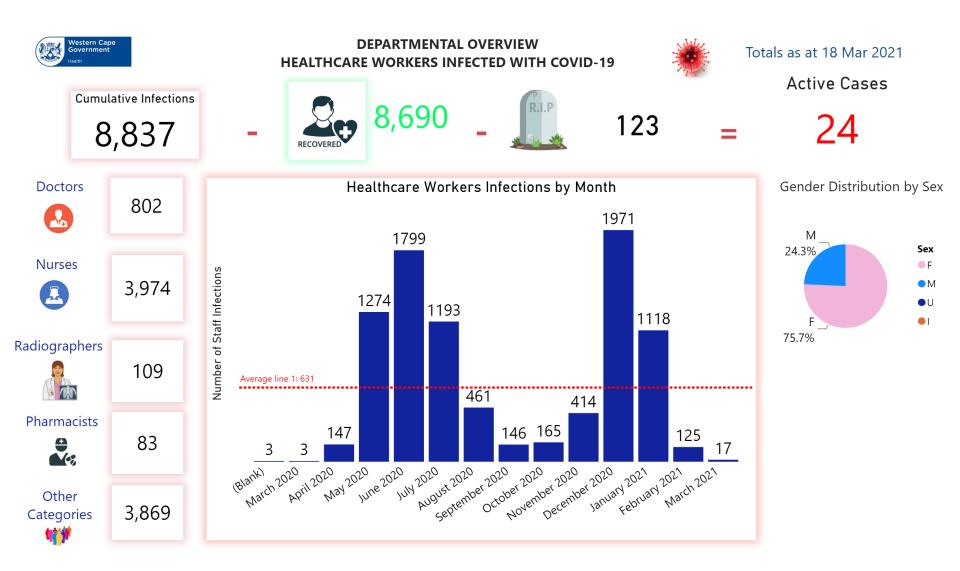
## Oxygen utilisation – general comments

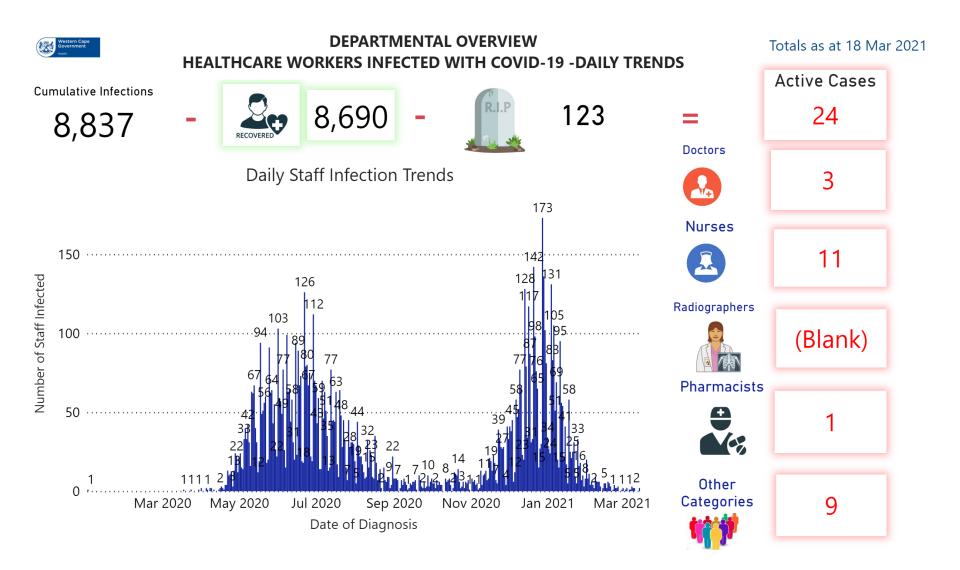
- The combined public-private utilisation is now 19.28 tons/day, 27.54% of the maximal production capacity (70 tons/day) at the Afrox Western Cape plant.
- The public sector total bulk oxygen consumption has reduced to 15.22 tons/day (21.57% of capacity), compared to 51 tons/day in the first week of January.
- 3. The Western Cape still has **4 bulk oxygen tankers** allocated for the daily delivery of oxygen supplies during the week.
- 4. We have started to **address some of the capacity challenges** at facility level, as identified during the 2<sup>nd</sup> wave, in preparation for the 3<sup>rd</sup> wave.
- We will continue to monitor the utilisation of oxygen over the coming weeks, but the situation has completely stabilised.



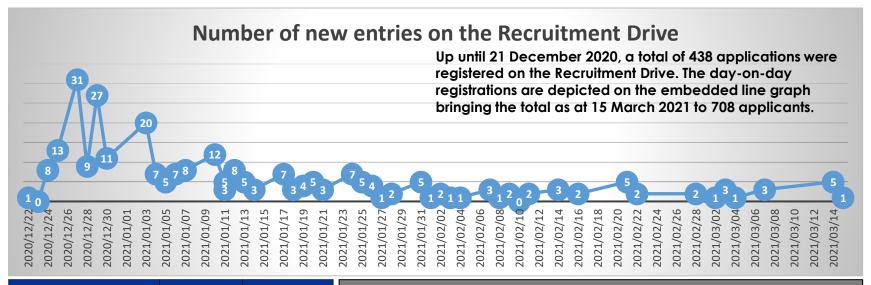
# Safe-guarding the well-being of health care workers and the health services







## High Level Summary on Recruitment Drive



	Possibly	Appointed on	Institutions have made 29 Offers to the following categories of staff:				
Category of HCW	Available	PERSAL					
мо	156	26	OSD-Category Rank	Filled	Reserved Posts	Grand Total	There are currently 1126 filled
Enrolled Nurse(EN)	95	20	Allied Health	24	2	2 26	additional COVID pasts 29 offers
			Doctors	82		82	
Enrolled Nursing Auxiliary (ENA)	111	24	Nursing	849	26	875	are pending finalization which
Not Indicated	32	7	Pharmacists	5		5	will bring the total to 1155. Of the 708 Recruitment Drive
Professional Nurse	128	61	Pharmacists- Assistant	10		10	applicants, 146 has thus far been
Professional Nurse with			Social Workers	3		3	appointed on PERSAL. The
Specialty	40	8	Admin and Related	153	1	154	
	562	146	Grand Total	1126	29	1155	
							appointment.

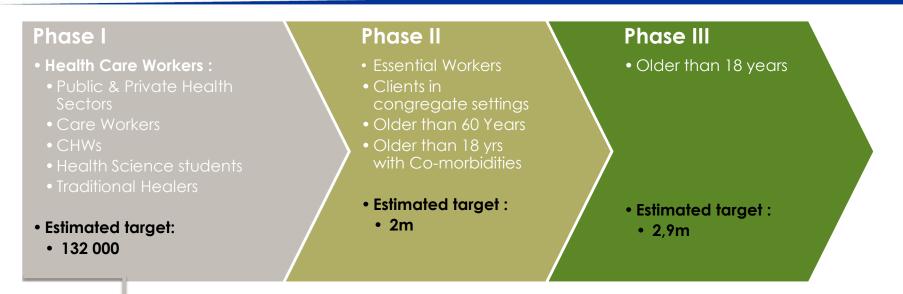


# Vaccine Implementation update



## Vaccine update: Phases and Prioritisation Groups

Western Cape Government



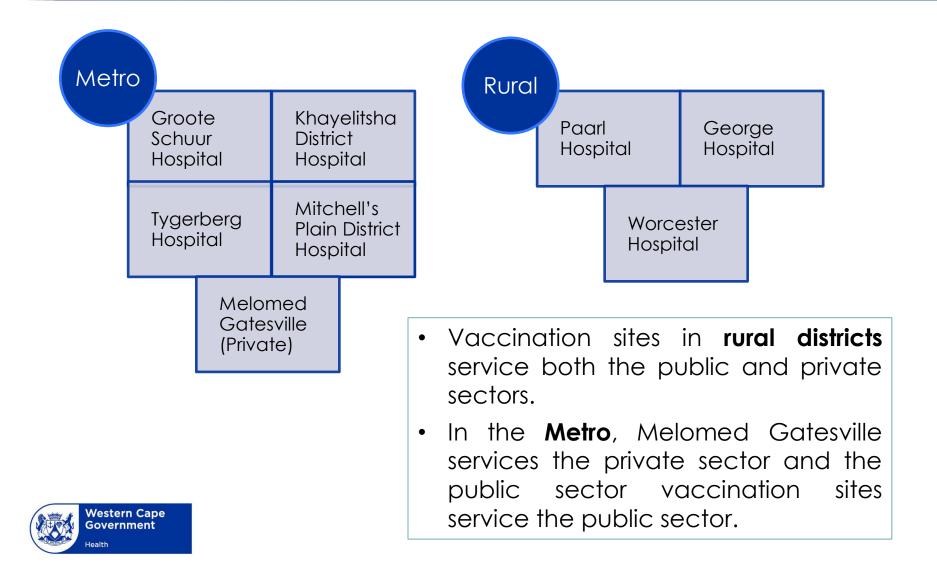
- It is anticipated that we will be able to cover 40% of health care workers with the limited doses being received via the Sisonke Programme, as Phase 1a.
- We are preparing to rapidly scale up vaccination to multiple sites during April to complete Phase 1, as Phase
   1b, depending on vaccine availability. Expecting Pfizer
   vaccine arrival.

## Vaccine Update: J&J Sisonke Programme (Phase 1a)

- Since the launch of the J&J Sisonke Programme took place on 17
   February 2021 at Khayelitsha District Hospital, the province is currently in
   the process of implementing its third tranche of the vaccines.
- Each vaccine tranche covers a 2-week period. With Tranche 1 (17 28 February 2021) and Tranche 2 (01 – 15 March 2021) a total of 25 960 doses were delivered to the Western Cape. The first delivery of Tranche 3 saw a further 5 320 doses, bringing the total number of doses received thus far to **31 280**.
- 3. As at 16 March 2021, a total of **29 520** health care workers have been vaccinated in the province (public and private sectors).

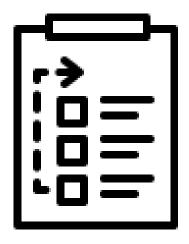


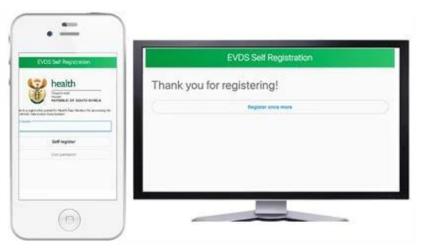
## Vaccine Update: Sites



## Vaccine update: Implementation

- Prioritisation and sequencing of most-at-risk healthcare workers continues to ensure equitable access to the vaccine programme for those healthcare workers at greatest need.
- Initial operational challenges with regards to the Electronic Vaccine Data System (EVDS) have largely been resolved.
- There is greater awareness and understanding amongst healthcare workers of the process to follow to access the vaccines.



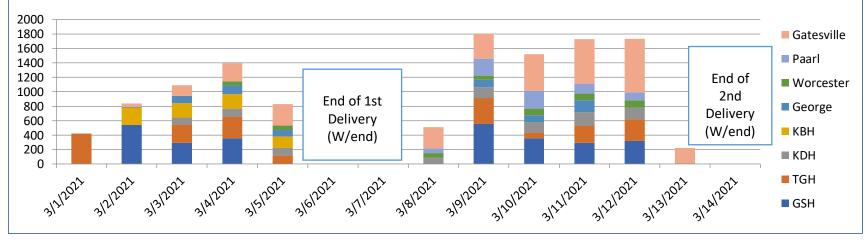




#### Vaccine Update Phase 1a: Uptake from 17 February to 14 March 2021

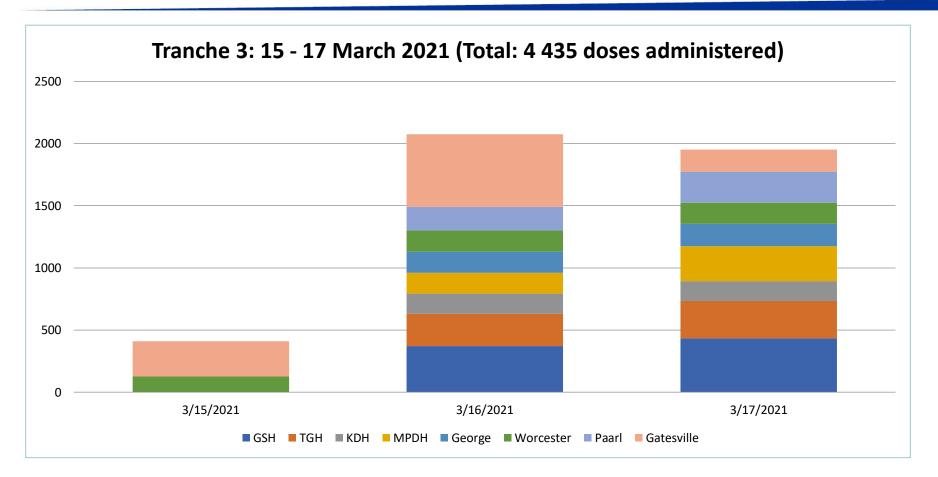


Tranche 2: 01 - 14 March 2021 = 12 090 doses administered





#### Vaccine Update Phase 1a: Current Tranche (15 - 17 March 2021)



#### Highest daily output thus far achieved was on 16 March 2021 = 2 075



## Vaccinator Database (as at 17 March 2021)

Group Cape Metro CAPE TOWN CDU CMD College of Emergency CT Eastern SD CT Khayelitsha SD CT Klipfontein SD	District Cape Metro CAPE TOWN Cape Winelands CDU Central Karoo CMD College of Emergency Care CPUT	Facility/Institution Aan-het-Pad Clinic Abalone Factory ACVV Admin Building Adriaanse Clinic Alan Blyth Hospital Albertinia Clinic Alexandra Hospital	4018 total Vaccinators	409 1	<b>947</b> 81 Nurses Other
CT Mitch Plain SD CT Northern SD CT Southern SD	CT Eastern SD CT Khayelitsha SD CT Klipfontein SD	Alma CDC     Alphen Clinic     Amalienstein Clinic		identi	fied so far
CT Tygerberg SD CT Western SD DCS Metro Metro Health Services NHLS	CT Mitch Plain SD CT Northern SD CT Southern SD CT Southern SD CT Tygerberg SD CT Western SD DCS	Amawandle Incon Clinic     Annie Brown Clinic     Aquarius Health Covid Fi     Area Central HO     Area East HO     Area North HO	2088 total Trained	<b>475</b> Pharmacists/EMS/Educa	<b>305</b> ator Supervisor/ Manager



# Phase 2 preparation – targeted to start in May 2021



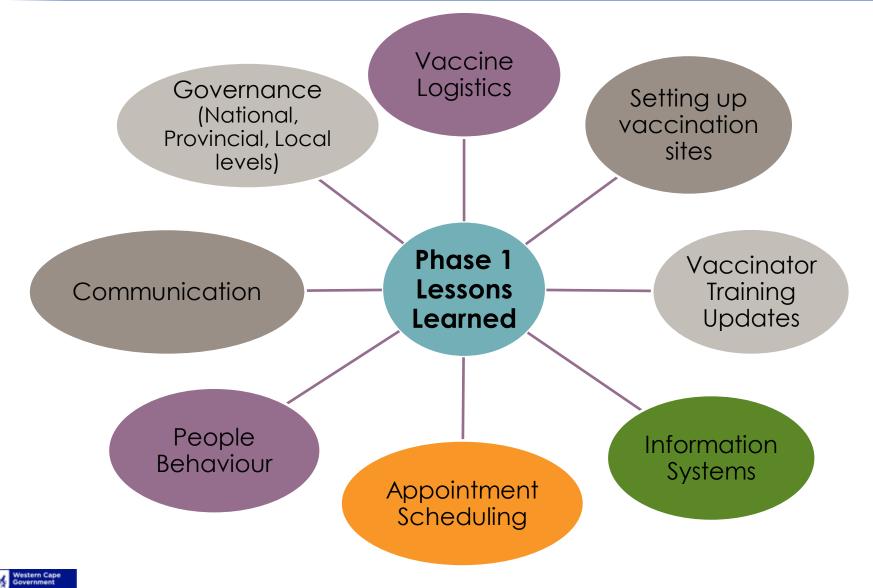
## Global lessons from mass vaccination programmes

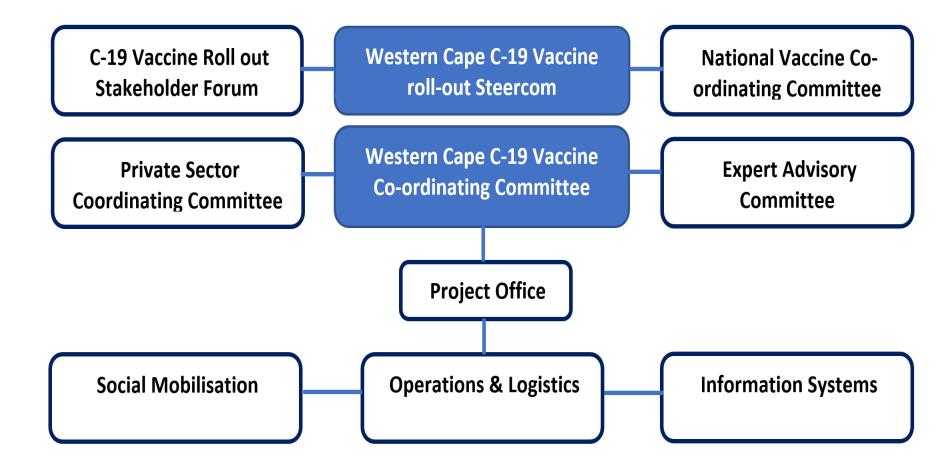
#### Lessons learned from Global COVID-19 Vaccination Programmes





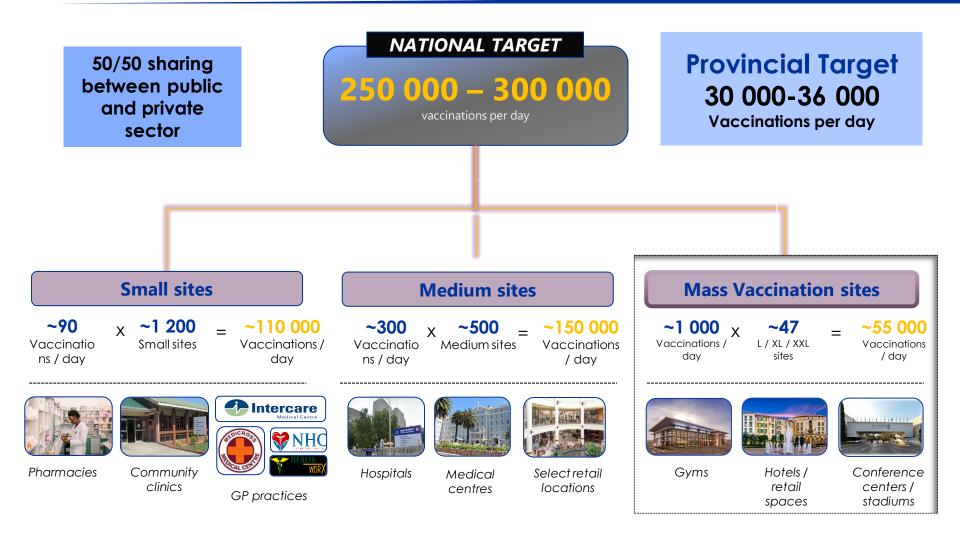
## Lessons learned from Phase 1 vaccination







## Potential SA portfolio of COVID-19 vaccination sites





## **Operations and Logistics Work Stream**

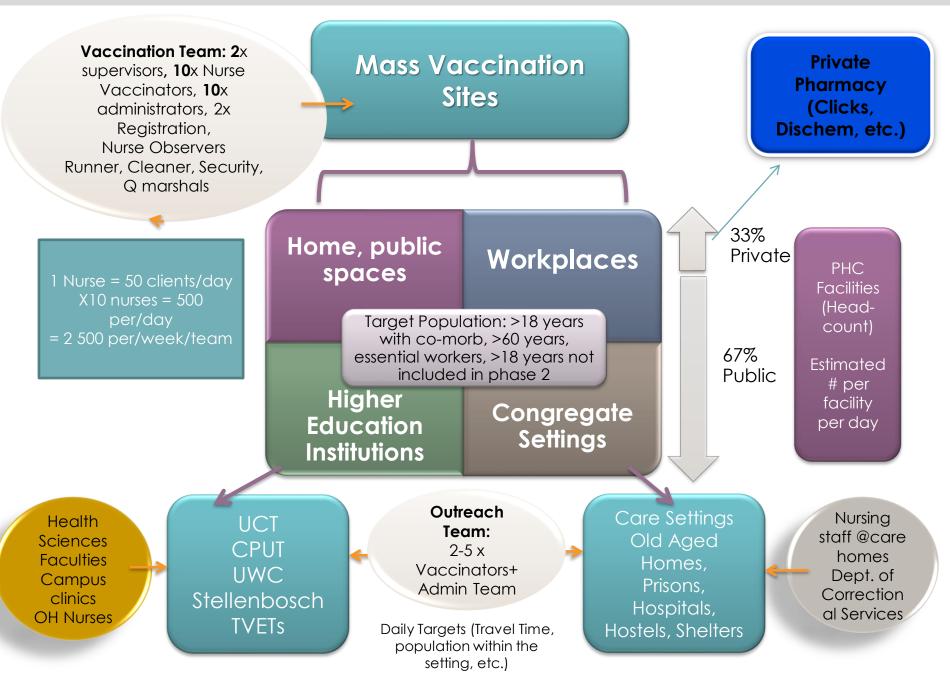
A set of tools has been developed & packaged as an information pack to assist teams with the district level planning:

- Refinement of Phase 2 population estimates down to sub-district level
- Recommended composition of a Vaccination Team
- Considerations for setting up a site
- List of available large venues that could be used as vaccination sites
- Proposed model (see next slide)

Proposed Vaccination Team					
Staff	Qty				
Pharmacist/Pharmacy Assistant	1				
Pharmacy service is dependent on size of site or					
distance from approved delivery site, e.g. large					
sites may require mini pharmacy on site, smaller					
sites might make use of outreach from approved					
delivery site					
Vaccinators	6 to 10				
EVDS Administrators	6 to 10				
Covid-19 Screener	1				
Registration Administrator	2				
ENA for Observation Area	1				
On site/ on call Medical or EMS					
support for resuscitation	1				
Queue Marshall	2				
Security	2				
Cleaning Staff	1				



#### Phase 2 & Phase 3 Covid-19 Vaccine Rollout



# Conclusions



#### **Concluding remarks**

- Our current situation is one of having navigated and exited a 2<sup>nd</sup> wave with a clear and consistent decline in cases, hospitalisation and deaths.
- We move into heightened surveillance vigilance and urge everyone to adhere to protective behaviours to reduce new cases – while in Level 1, especially over the coming holiday period, to avert an early 3<sup>rd</sup> wave.
- We have to reflect on our experience over the 1<sup>st</sup> and 2<sup>nd</sup> wave to learn and to improve our response for the coming 12 months.
- We require a concerted whole of government and whole of society response to mitigate the impact of the 3<sup>rd</sup> wave.
- 5. We have to significantly scale up the implementation of vaccines over the coming months as the key drive against COVID over the coming months.



# Thank you

