



**Western Cape
Government**

Health

DIGITAL PRESS CONFERENCE UPDATE

Health Response Update

Dr K Cloete

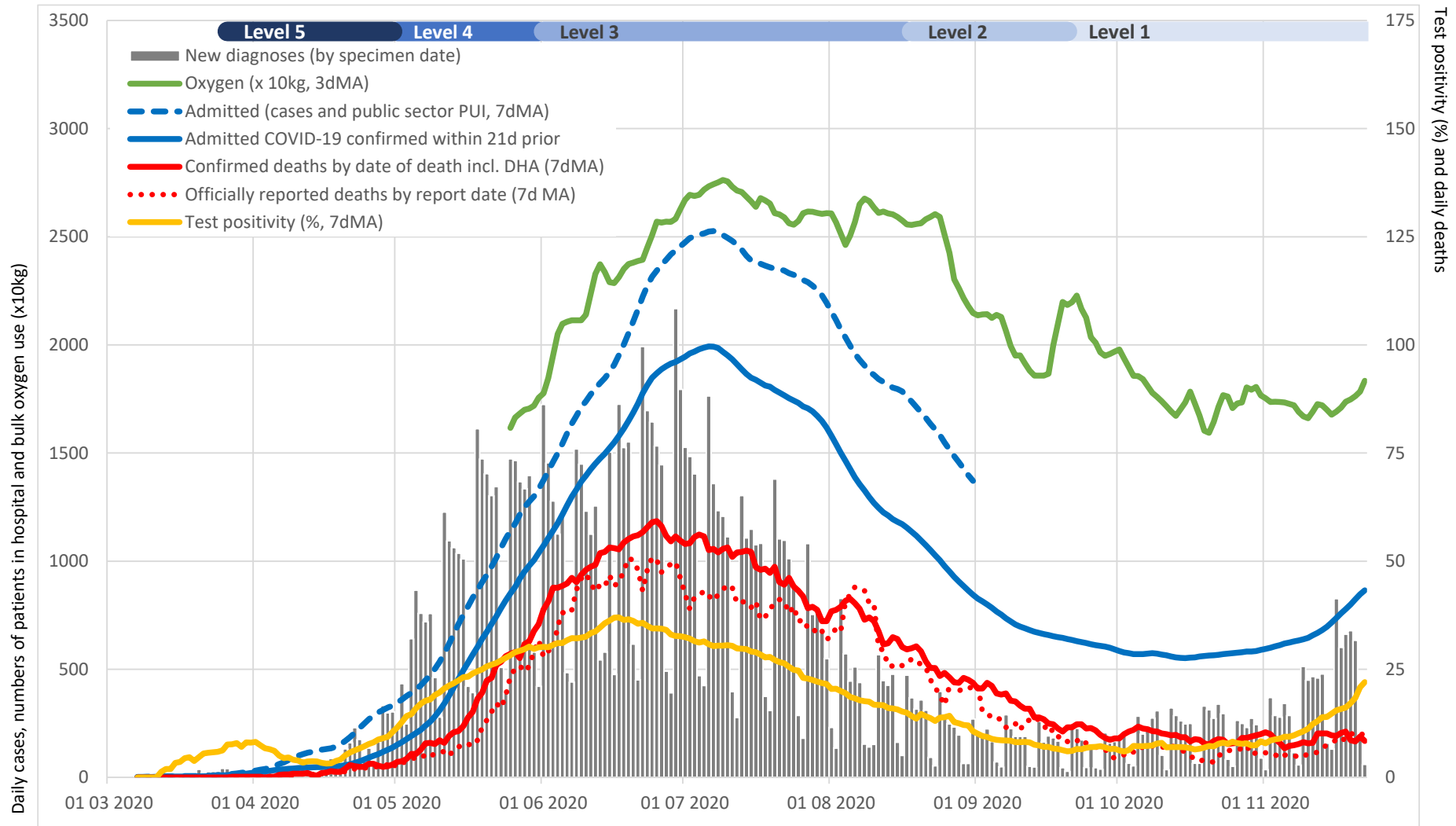
25 November 2020

Purpose

1. Surveillance Update – Provincial trends
2. Surveillance & Response Update – District trends
3. Surveillance & Response Update – Garden Route
4. Update on the COVID strategy & health platform response
5. Conclusions

Surveillance Update – Provincial trends

Integrated testing, case, hospitalisation and mortality trends





Provincial Resurgence Overview

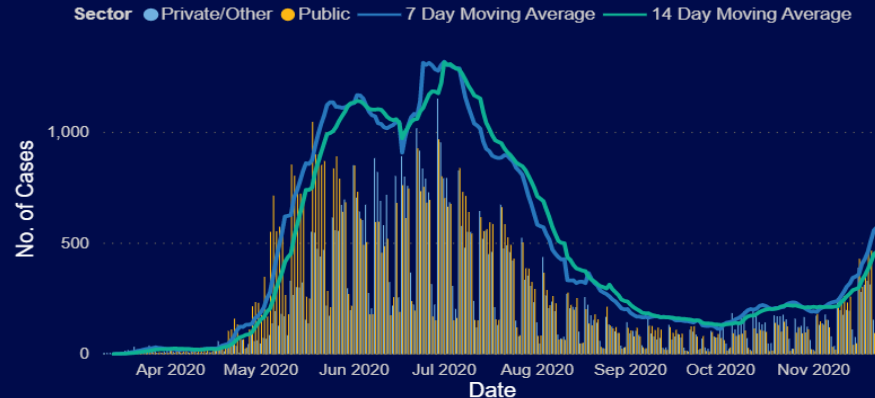
No. of Cases, 7 Day Moving Average and 14 Day Moving Average by Date and Sector

Health Impact Assessment
WC Department of Health
Last Updated:
(Blank)



Select District, Subdistrict:

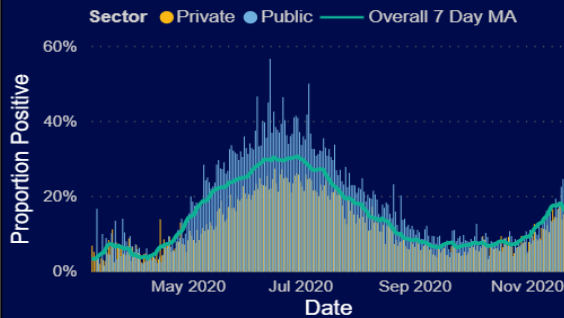
- ☒ Cape Winelands
- ☒ Central Karoo
- ☒ City of Cape Town
 - ☒ Eastern
 - ☒ Khayelitsha
 - ☒ Klipfontein
 - ☒ Mitchells Plain
 - ☒ Northern
 - ☒ Southern
 - ☒ Tygerberg
 - ☒ Western
- ☒ Garden Route
- ☒ Overberg
- ☒ West Coast



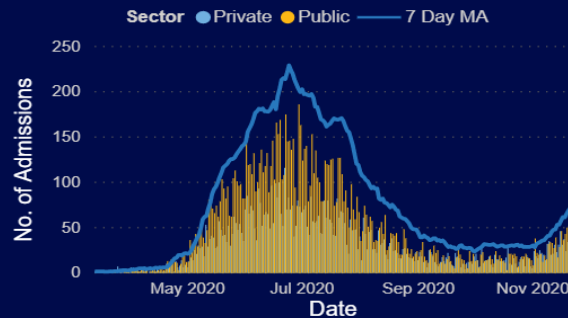
3/10/2020

11/24/2020

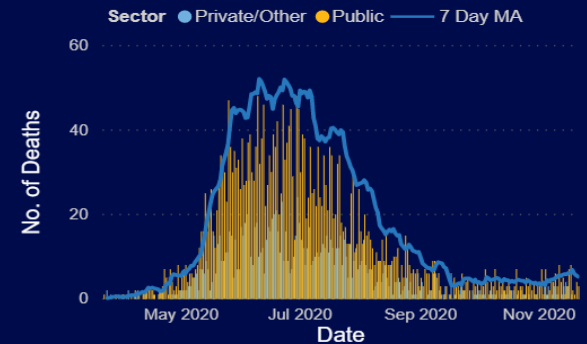
Proportion Positive and Overall 7 Day MA by Date and Sector



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

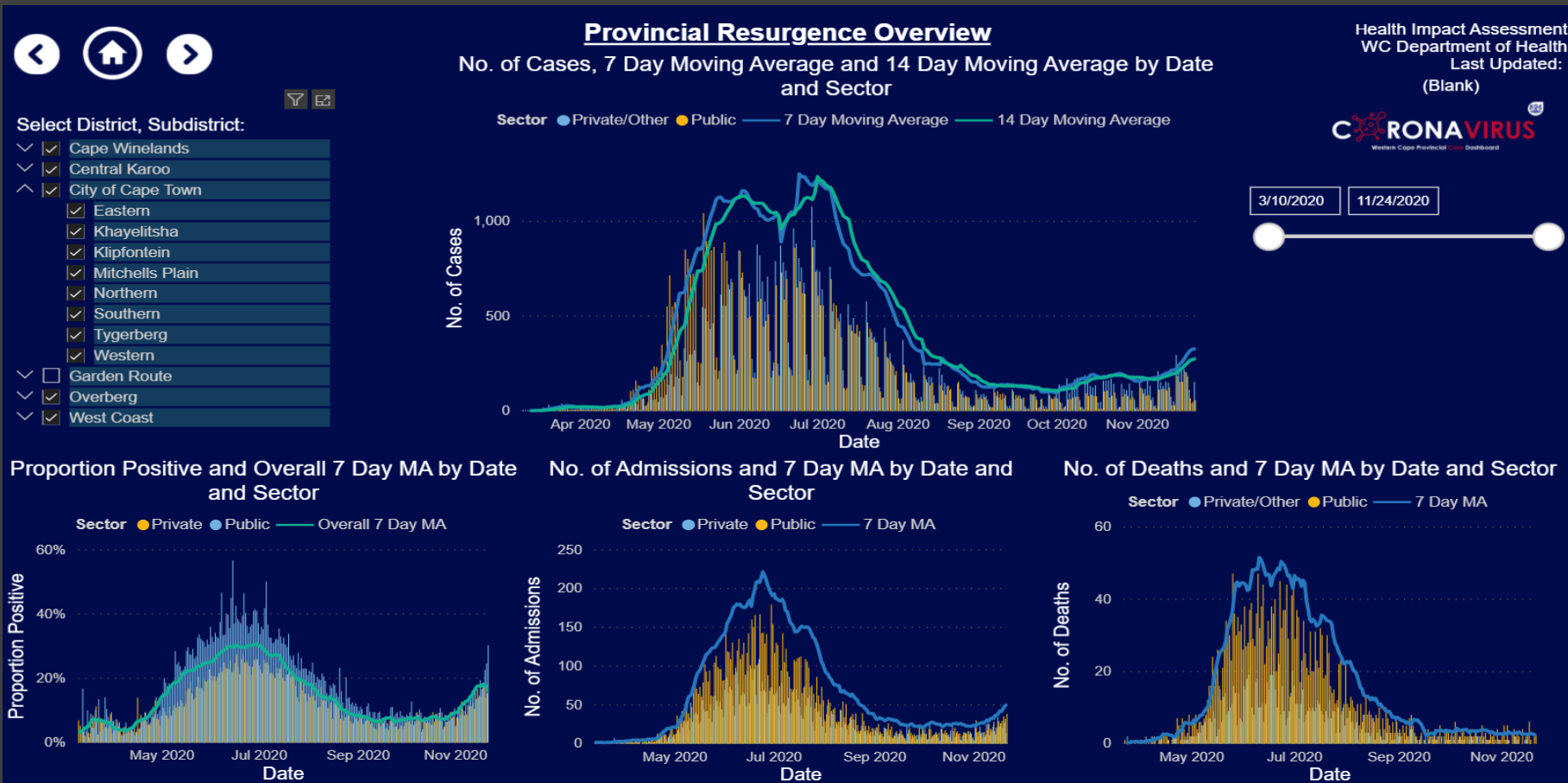


No. of Deaths and 7 Day MA by Date and Sector



Provincial Overview

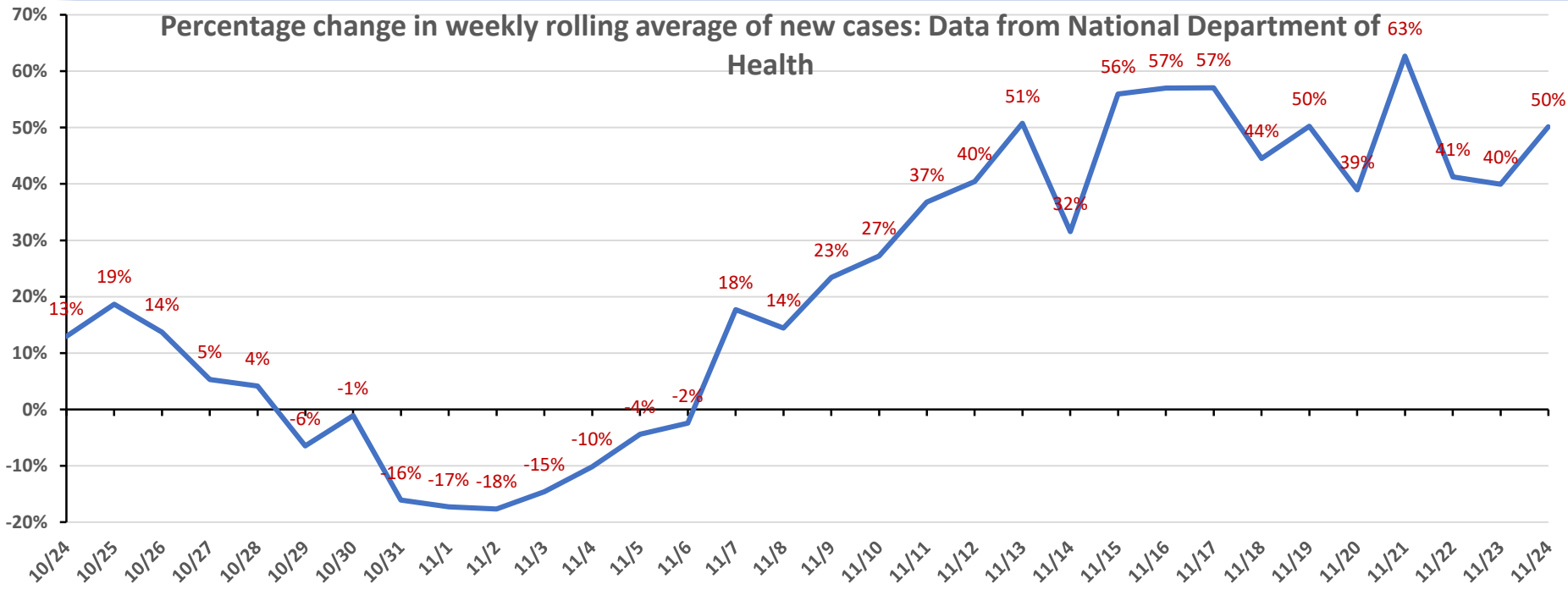
- The COVID-19 cases in the province has shown a steady increase since October.
- More concerning is that both hospitalisations and test proportion positive have also increased.
- The proportion positive tests is now at 16%. This is comparable to early May 2020 when we were in the ascending part of the first wave.



Provincial Overview without Garden Route

- If we remove the Garden Route cases, we see that the Provincial case numbers and hospitalisation are still headed in an upward direction.
- Even with Garden Route removed, the cases and hospitalisations are at the same levels as May 2020, indicating an **established resurgence** in the Western Cape.

Growth in cases based on NDoH reported case numbers



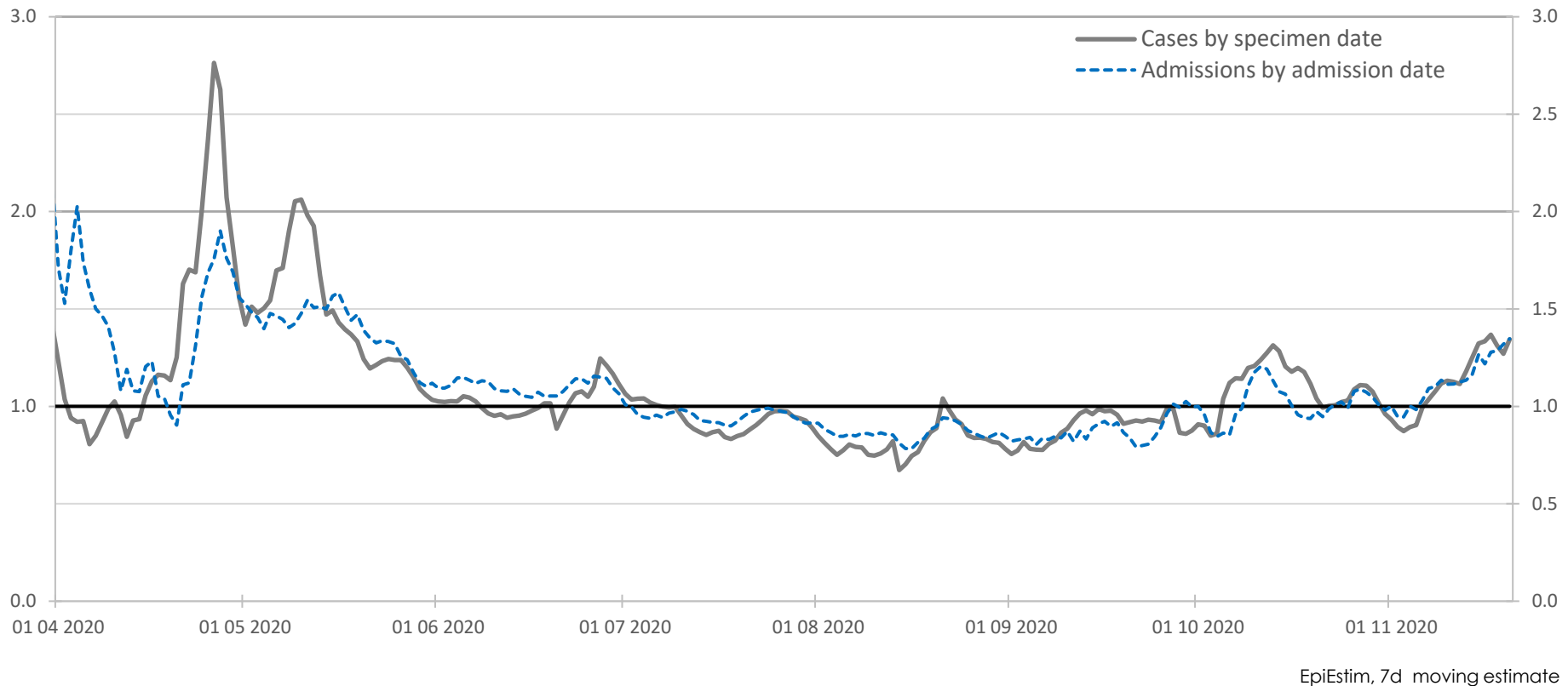
WC daily report- 17 November 2020: New COVID-19 cases in the last 7 days= 2987

WC daily report- 24 November 2020: New COVID-19 cases in the last 7 days= 4543

Percentage change = 52.1%

- Using NDOH data , we see that the percentage change in weekly average of new cases is **50%**.
- If we look at the Western Cape Data from the daily report, the percentage change in the weekly average of new cases is **52.1%**.
- The increase is primarily due to the resurgence in the Garden Route and the Metro.

$R_t \approx 1.35$ based on cases or admissions



R_t has been above 1 for the better part of October and November. Increases in cases are off a larger and larger base, resulting now in greater absolute increases in cases week-on-week

Re-establishing community transmission in spite of previous decline in infections

An R_t below 1 can rise above 1 if there is:

1) *Increased transmission efficiency:*

- Proximity, masks, hand hygiene, environment (weather, indoor/outdoor)

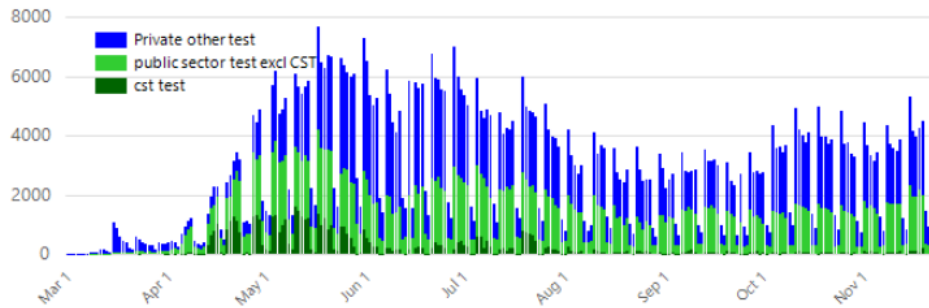
2) *Increased contact between those infectious and those susceptible:*

- Mobility
- Gatherings
- Transport
- Etc.

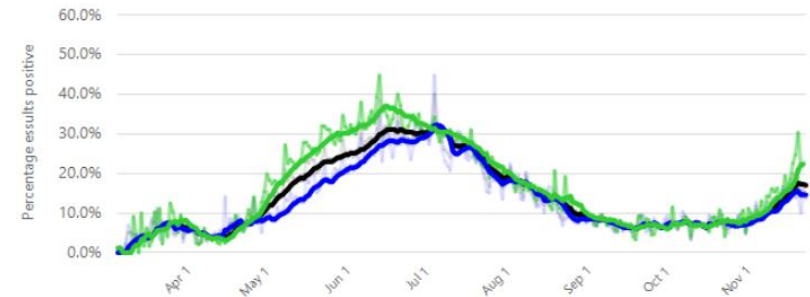
Even though the proportion of the WC population who have been infected (based on serology) is relatively high in global terms, and the resulting immunity likely contributed to the prior decline in transmission, small changes in the above factors can facilitate resumption of community transmission.

Testing and more recent case numbers

Numbers of tests done

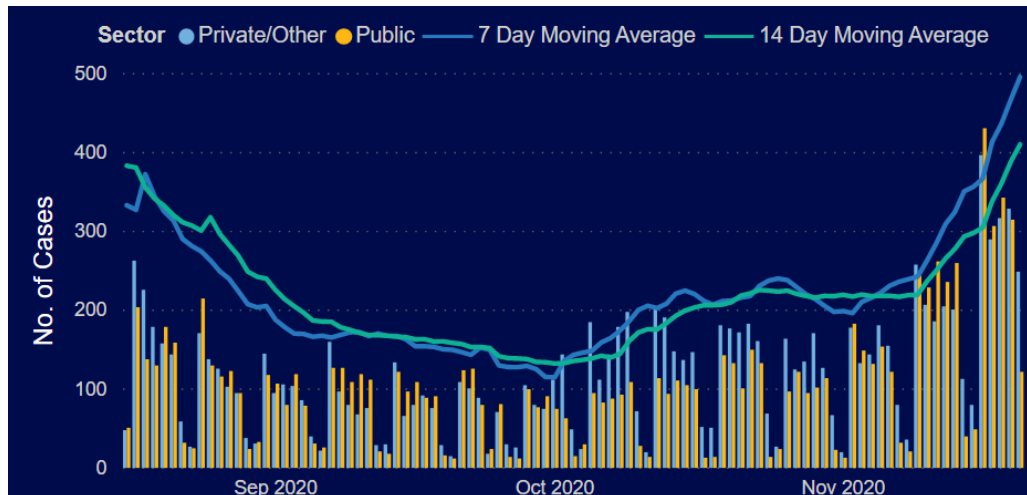


Test positivity over time

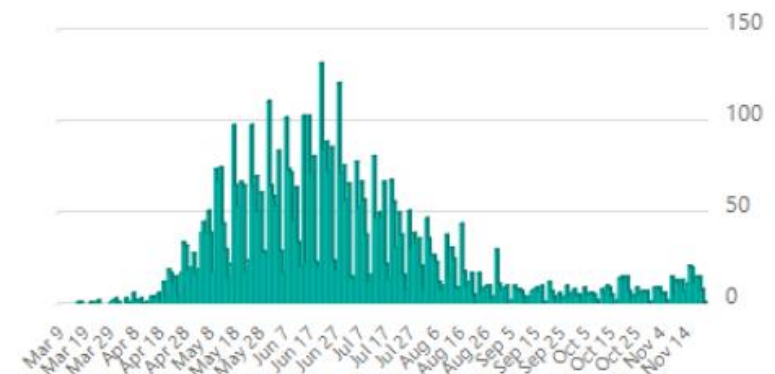


The increase in cases is not due to increased testing as test positivity has gone up while testing numbers have not.

Daily cases by specimen date



Cases over time in Health Care Workers



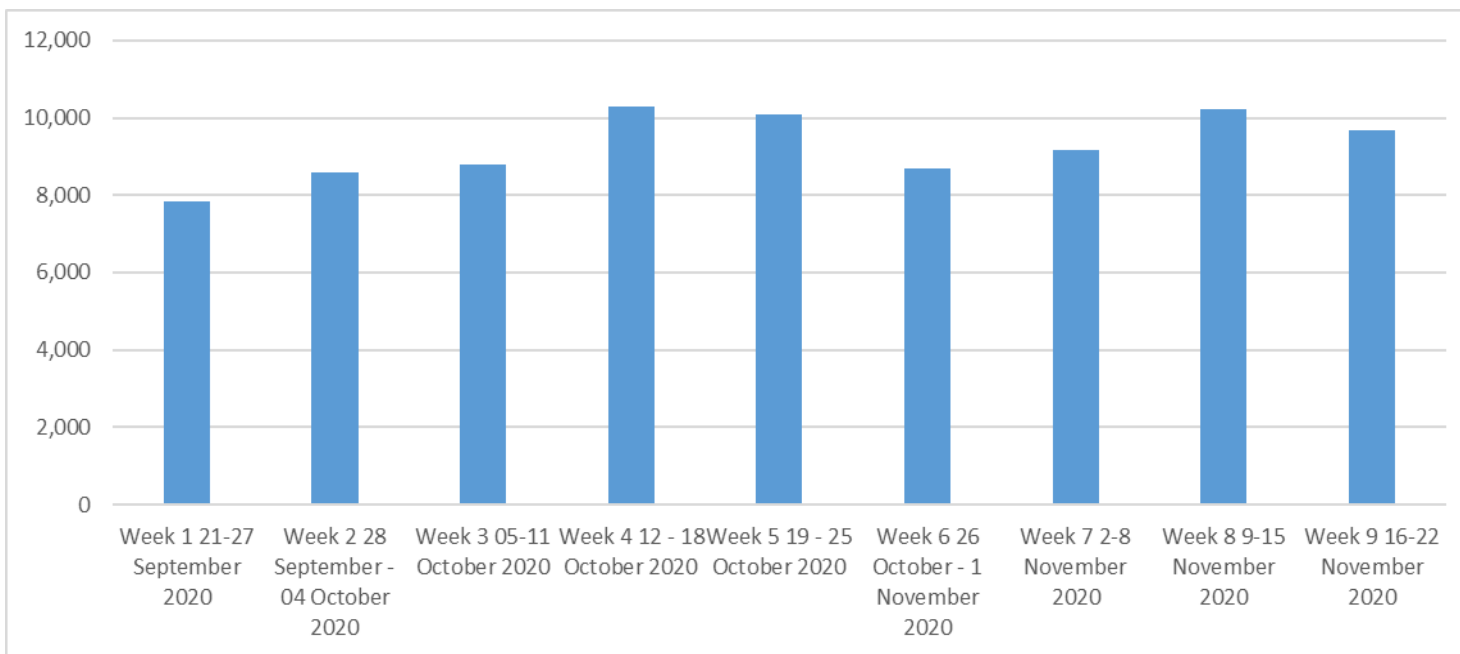
In early October, the increase in cases was greater in those tested in the private sector, but there are now more public sector cases. More HCWs have been infected recently.

Update on testing

1. Despite the expanded testing criteria the lab turn-around times have been maintained. We will monitor the turn-around times carefully in order to determine the impact of the expanded testing criteria.
2. NHLS has started using the antigen testing for use in outbreaks in conjunction with the PCR testing.
3. The testing and surveillance team is continuously reviewing the testing criteria and will advise should further revisions be required.
4. On average, the public and private sectors are doing about 10 000 tests per week in each sector.

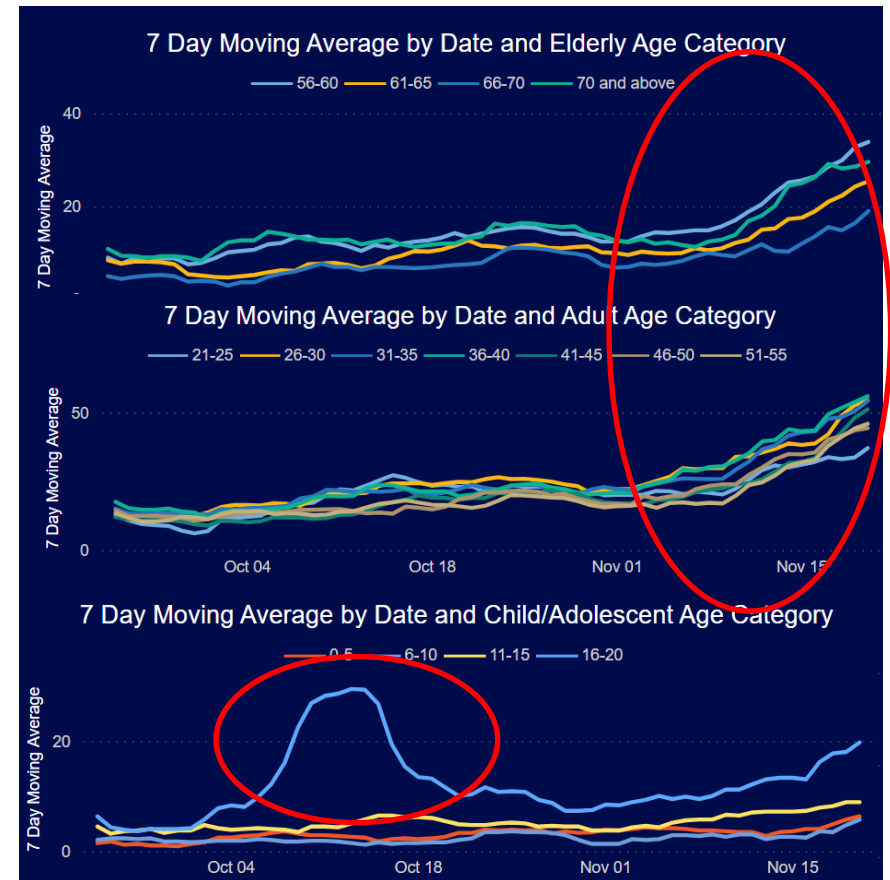
Total Number of Public Sector Tests Done

TOTAL NUMBER OF TESTS DONE	
Week	Total
Week 1 21-27 September 2020	7,827
Week 2 28 September - 04 October 2020	8,599
Week 3 05-11 October 2020	8,779
Week 4 12 - 18 October 2020	10,298
Week 5 19 - 25 October 2020	10,081
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	9,677
TOTAL	83,331



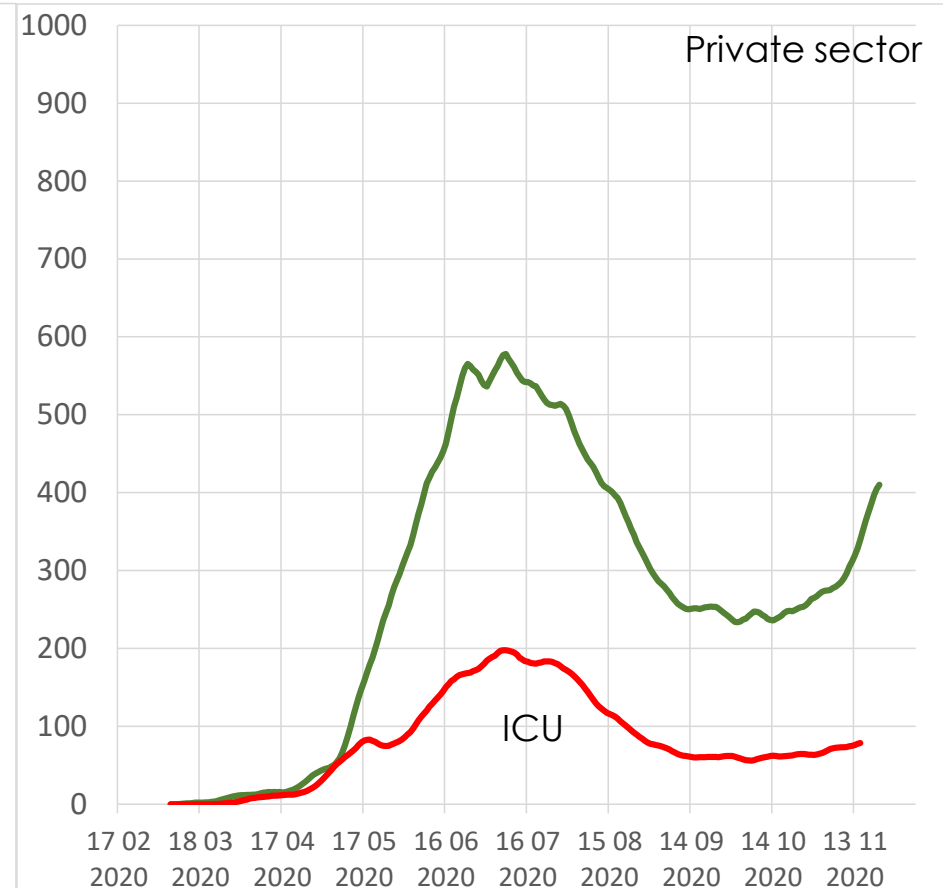
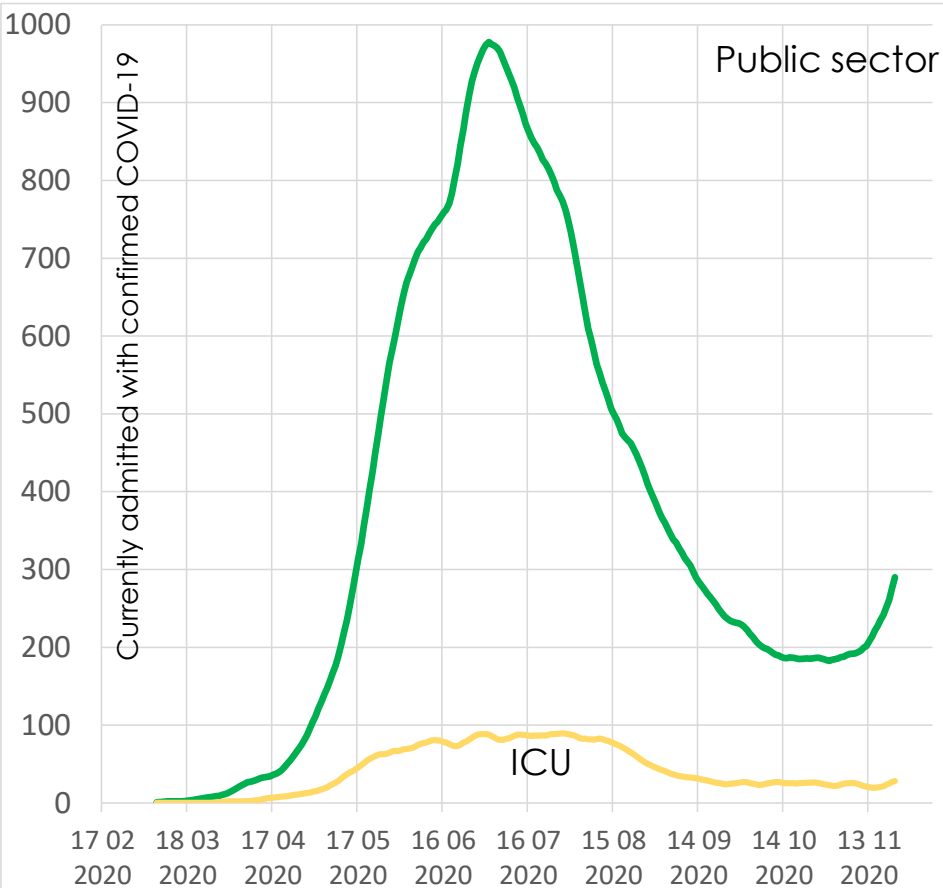
Cases by age over time

Age	Week																																														
	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45	46	47														
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The clusters a few weeks ago were in younger adults but the age distribution of cases is now closer to that seen earlier in the year when case numbers were high.

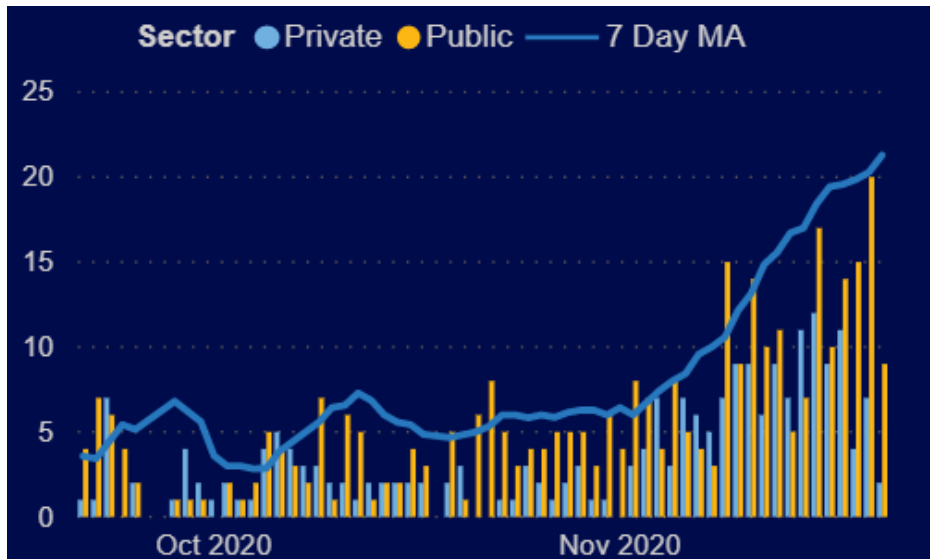
Hospitalisation



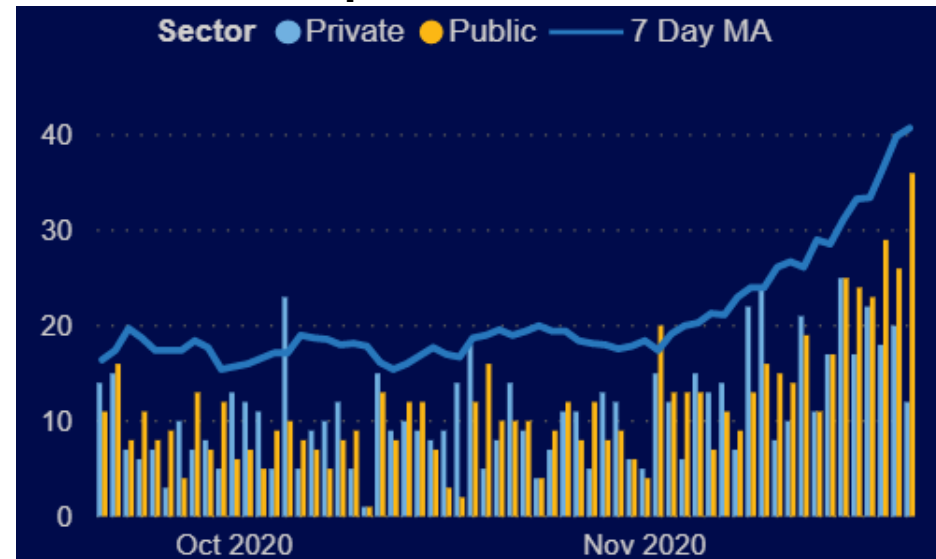
Lines are not stacked. PUIs excluded

Daily new admissions by geographic area since 21 Sep

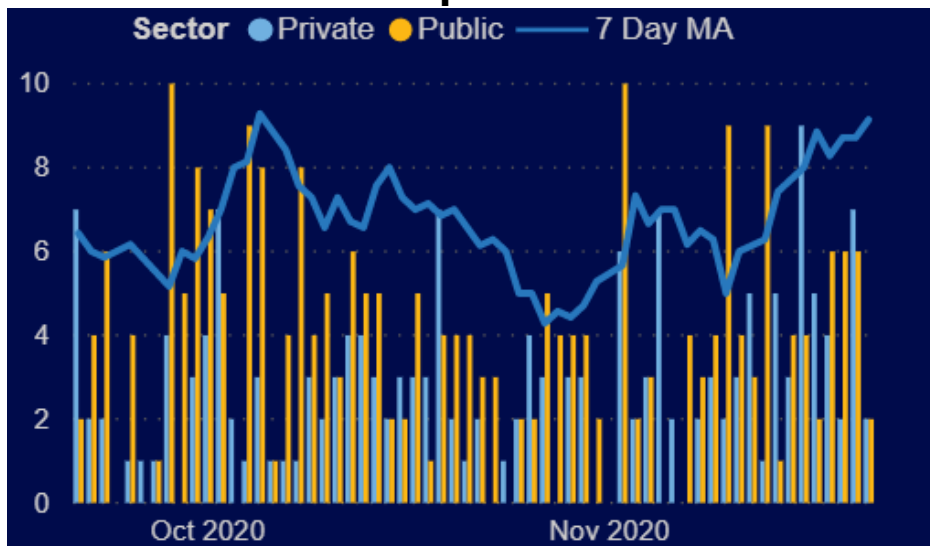
Garden Route



Cape Town Metro



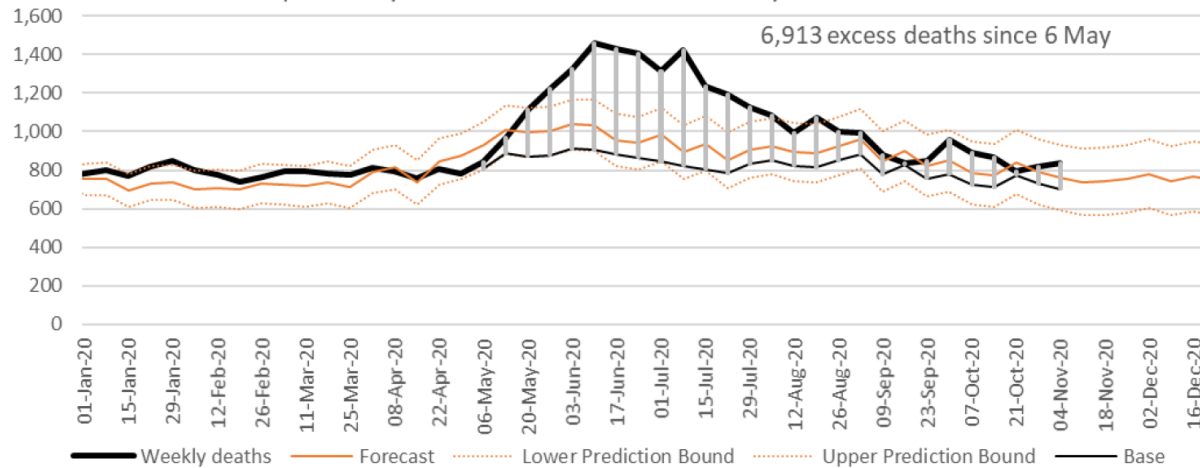
Rest of province



Marked increase in daily hospital admissions since 1 Nov in both Garden Route (>3 x more) & Cape Town Metro (>2 x more)

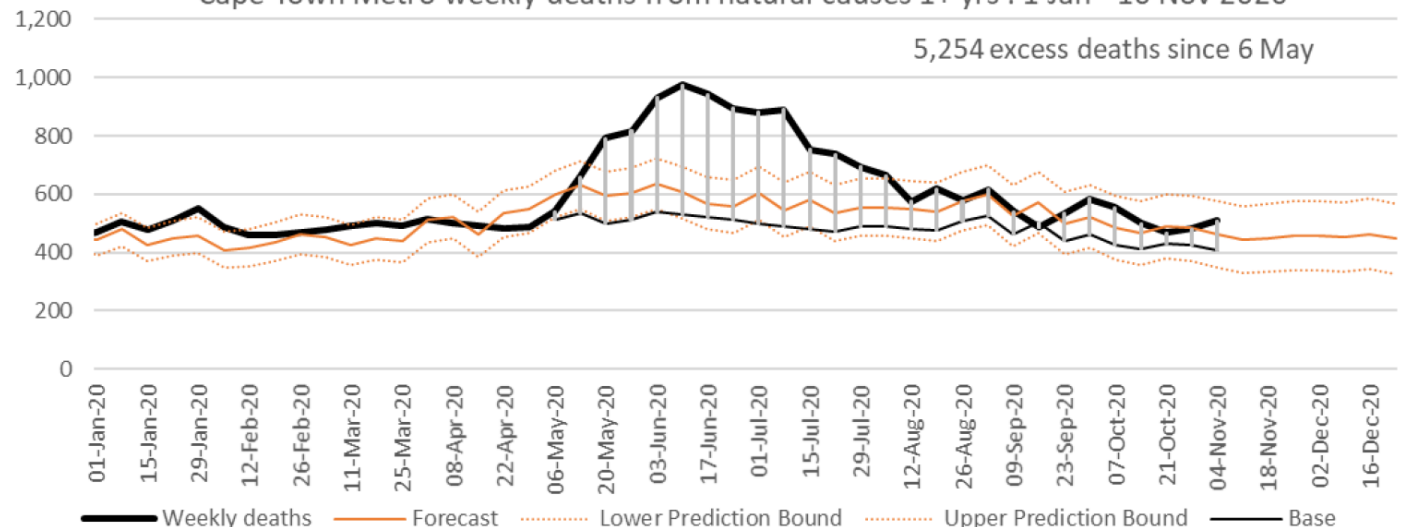
Excess mortality

Western Cape weekly deaths from natural causes 1+ years : 1 Jan - 10 Nov 2020



We expect COVID-19 related deaths to increase again in coming weeks, given the lag from infection to death. For now the excess deaths track or slightly exceed those ascertained by the health services to be COVID-19 related

Cape Town Metro weekly deaths from natural causes 1+ yrs : 1 Jan - 10 Nov 2020



Surveillance & Response Update – District trends

24 November
2020

Surveillance Huddle Report

- Excluding
Garden Route

Surveillance Huddle 24 November 2020

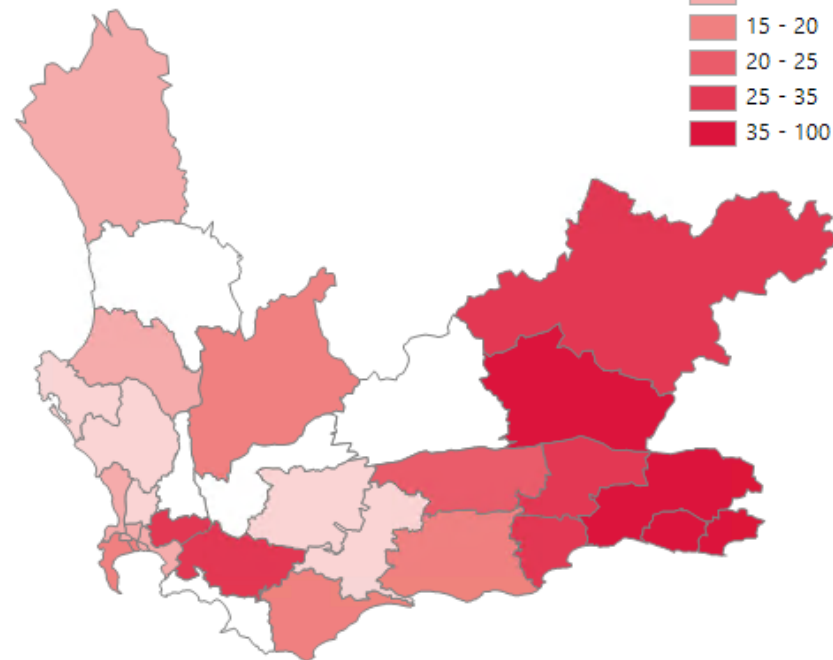
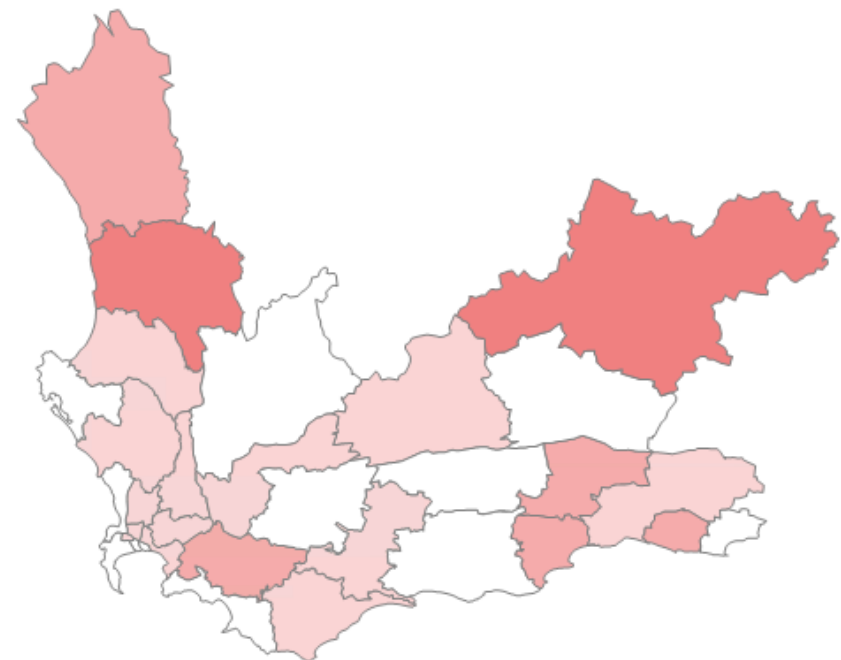
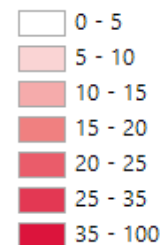
1. Central Karoo: 3 new cases in Prince Albert, including 2 staff members at Prince Albert Hospital. Quite a few WCG:H staff affected across districts in the Central Karoo. 1 staff member in Nelspoort; 3 in Beaufort West. Attendance at a funeral has led to several cases.
2. Overberg: experiencing cases across the subdistricts. Reports of individuals refusing to get tested and therefore spreading of COVID-19 to colleagues when go to work etc. Theewaterskloof remains major concern - 4 cases at the Caledon district office, Still largely household clusters. Cases are not adhering to isolation and quarantine - attending funerals, going shopping etc. The Overberg team are working closely with law enforcement and disaster management. In Swellendam and Overstrand, law enforcement assisting by fining individuals not adhering to I&Q (possibly helping).
3. Cape Winelands: Witzenberg low numbers, no clusters. Stellenbosch experiencing an increase in active cases with a cluster at Stellenbosch Hospital (4 staff - 2 admin, 2 clinical). Drakenstein has 51 active cases, no clusters identified. No clusters in Breede Valley. In Langeberg there are 25 active cases with a big drive to include environmental health practitioners and other stakeholders to raise community awareness e.g. loud hailing, active contact tracing team, collaboration with SAPS in each town. Also reporting a lack of adherence to the COVID-19 regulations.
4. West Coast: 154 active cases across the district; fairly stable. Only concern is a farm in Bergriver with 2 new cases - remain vigilant for an outbreak/cluster.
5. KMPSS: not much new to add from yesterday's feedback - generalized community transmission. Noted that about 2 weeks ago staff reported lack of IPC at malls in Mitchells Plain and now wonder whether the increase in cases could be related. The centre management and Shoprite stores were contacted to re-iterate importance of the necessary measures. The team reflected on the support of law enforcement during the 1st surge.
6. SWSS: increase in cases continue. Concerned regarding the positivity rates at facilities, especially the large testing sites with positivity rates >10%. Annie reflected on the large number of admissions across private and public sector hospitals, including Brackengate. The Milnerton, Parklands, Du Noon area remains a concern. New areas of concern include Atlantis, Langa and the Grassy Park/Lotus River/Pelican Park area.
7. KESS: Nothing new to report. Noted the ongoing instances of repeat tests - one positive, one negative, and refusing to I&Q. A case in Khayelitsha attended a funeral in the Eastern Cape - 15 contacts in the taxi. However, not forthcoming with contacts, and continues to work.
8. The team noted that in several parts of the Metro, crowds refuse to obey law enforcement.
9. NTSS: 3 old age homes have reported cases - most were diagnosed on admission to hospital and asymptomatic. These long term care facilities have been visited by environmental health - protocols are in place and rooms decontaminated. UWC - a residence with a case under control.

Test positivity over time and by subdistrict

13-18 September
6.8% of tests were positive

6 days to 23 November
22.2% of tests were positive

% positive





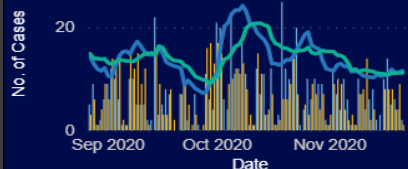
8/27/2020

11/24/2020

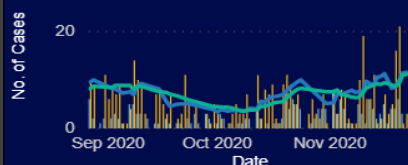
Rural Resurgence Overview

Health Impact Assessment
WC Department of Health
Last Updated:
Tuesday, 24 November 2020

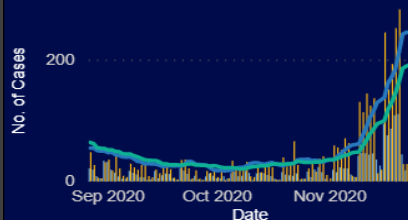
West Coast



Overberg

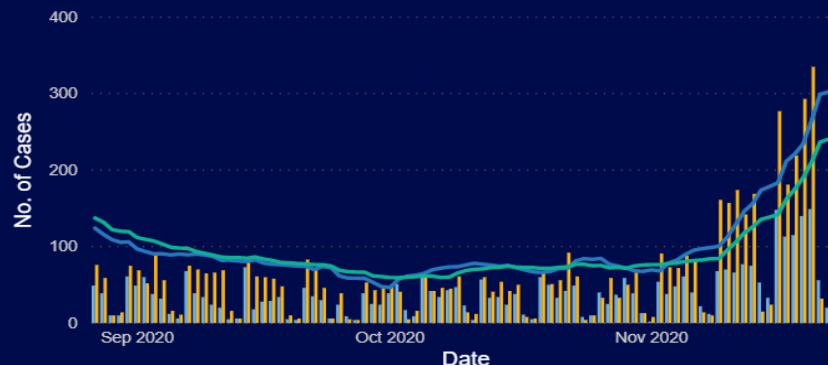


Garden Route

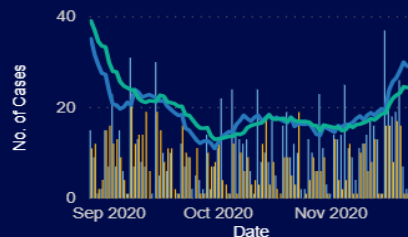


Rural Overview: No. of Cases with 7 and 14 Day MA by Date and by sector

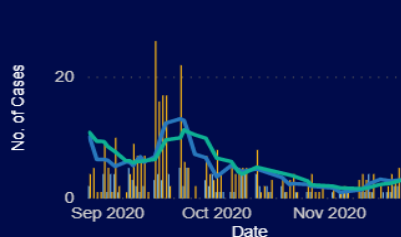
Sector ● Private/Other ● Public — 7 Day Moving Average — 14 Day Moving Average



Cape Winelands

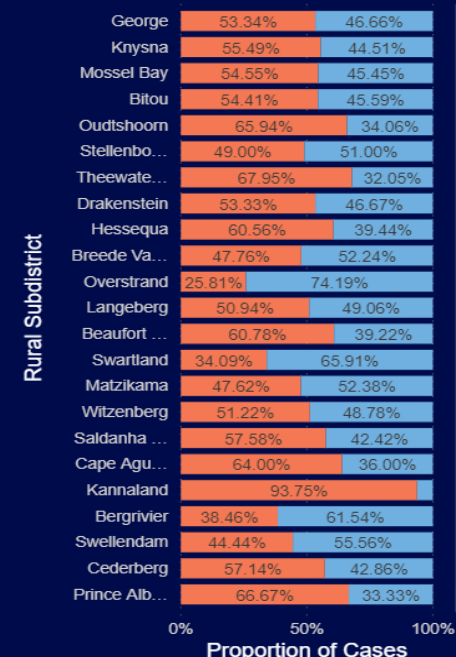


Central Karoo



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

● <7 days ago ● 7-14 days ago



Rural Overview

- Rural shows a sharp increase in cases since early November.
- The increase is driven by **the Garden Route resurgence**.
- The West Coast appears to be stable, but the Cape Winelands is starting to show early signs of increasing case numbers.



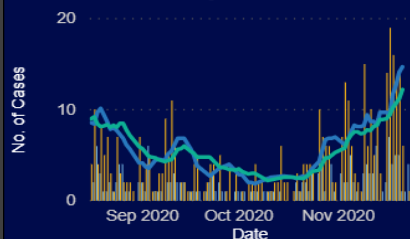
8/16/2020

11/24/2020

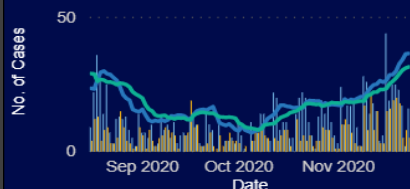
Metro Resurgence Overview

Health Impact Assessment
WC Department of Health
Last Updated:
Tuesday, 24 November 2020
Southern

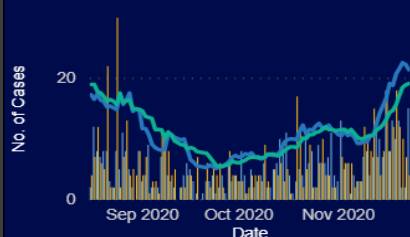
Khayelitsha



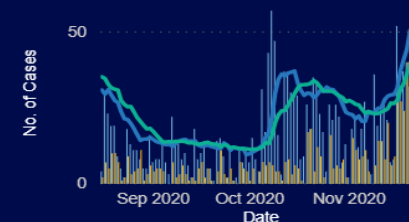
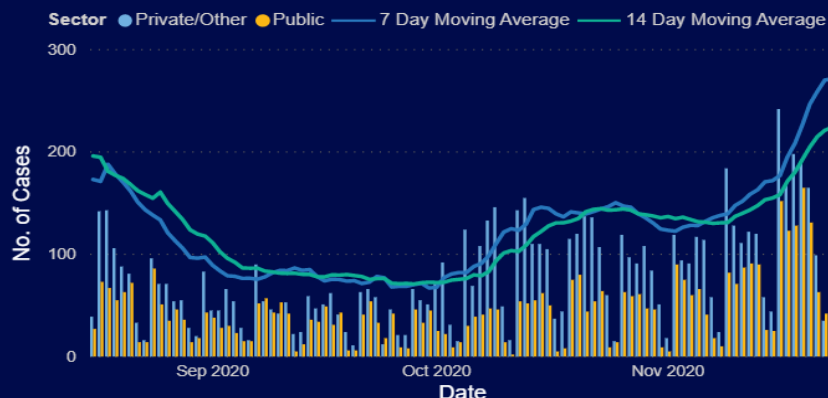
Eastern



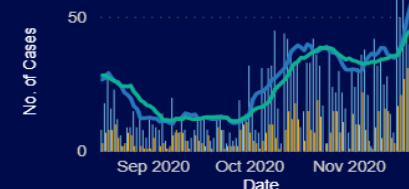
Klipfontein



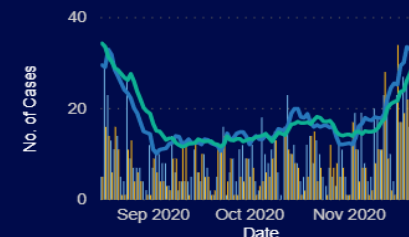
Metro Overview: No. of Cases with 7 and 14 Day MA by Date and by sector



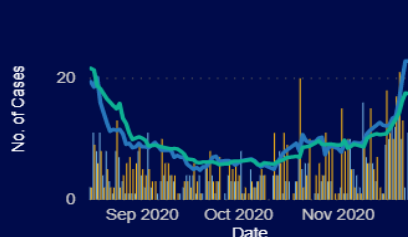
Western



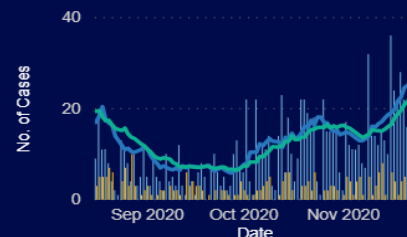
Tygerberg



Mitchells Plain



Northern



Metro Overview

- The cases in the Metro first started increasing in October. Since November, there has been a sharp increase in cases.
- Unlike Rural, the Metro case load is not driven by a single geographic area. Every sub-district in the Metro is showing increasing cases.
- Even more concerning is that the cases are not linked to a particular event, but are widespread, across the Metro, suggesting sustained community transmission, **hence an established resurgence.**

Triangulating with wastewater – Cape Town Metro

SAMRC COVID- 19 AND WASTEWATER EARLY WARNING SYSTEM

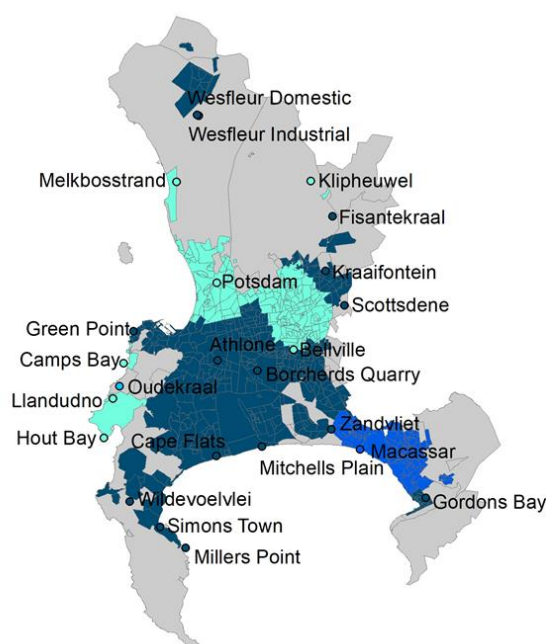
WEEK 46
update

City of Cape Town – expanded to 24 wastewater treatment plants

Week 46 - 9 November 2020 - RNA copies/ml



Week 47 - 16 November 2020 - RNA copies/ml



Generally increased levels of SARS-CoV-2 RNA in wastewater across the City compared to last week especially
Wesfleur (Atlantis)
Athlone
Cape Flats
Borcherds Quarry*
Wildevoevlei
Macassar
Gordons Bay

*May be due to change in sampling day

***Note:** RNA copies categories adjusted weekly, according to the inter quartile range.

Legend

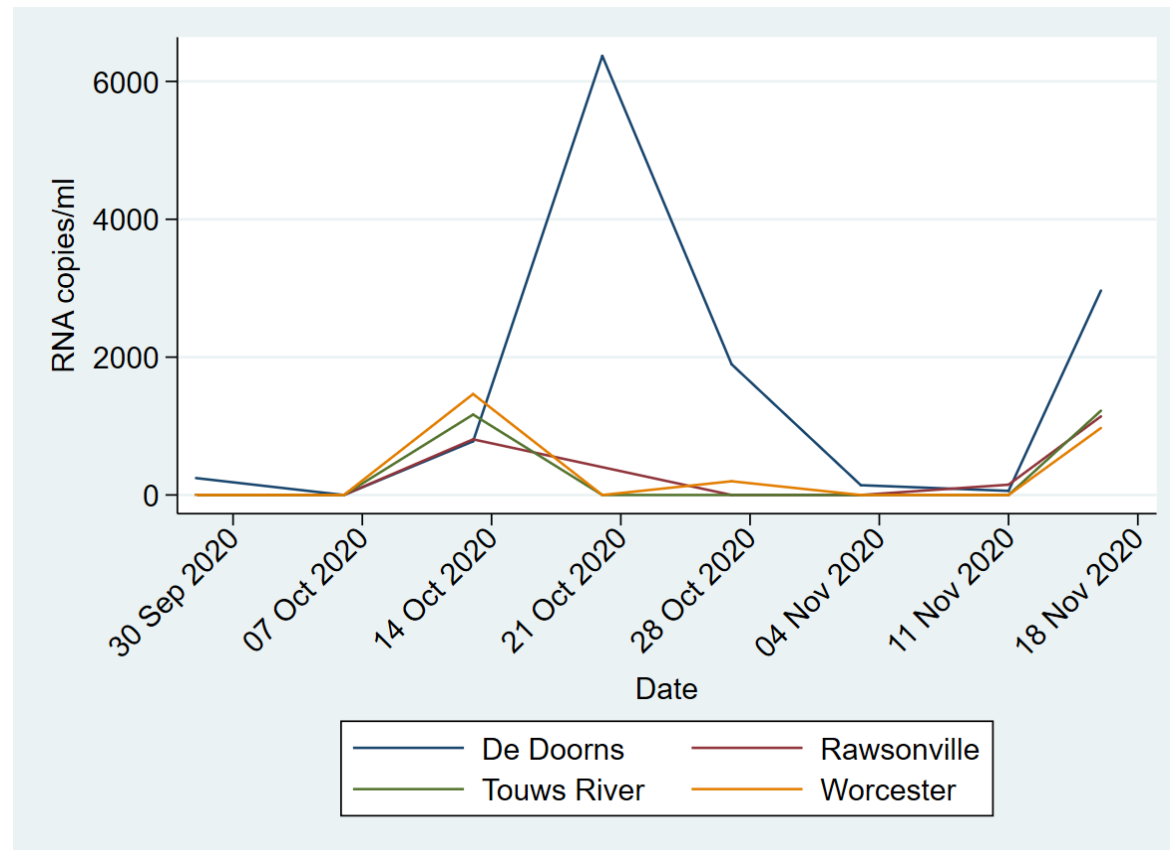
Categories

1 - 0 - 250
2 - 251 - 500
3 - 501 - 750
4 - ≥ 751
n/a - not sampled

SAMRC COVID- 19 AND WASTEWATER EARLY WARNING SYSTEM

Week 46
update

Breede Valley Municipality – 4 wastewater treatment plants



Increase in SARS-CoV-2 RNA in all wastewater treatment plants in Breede Valley especially De Doorns

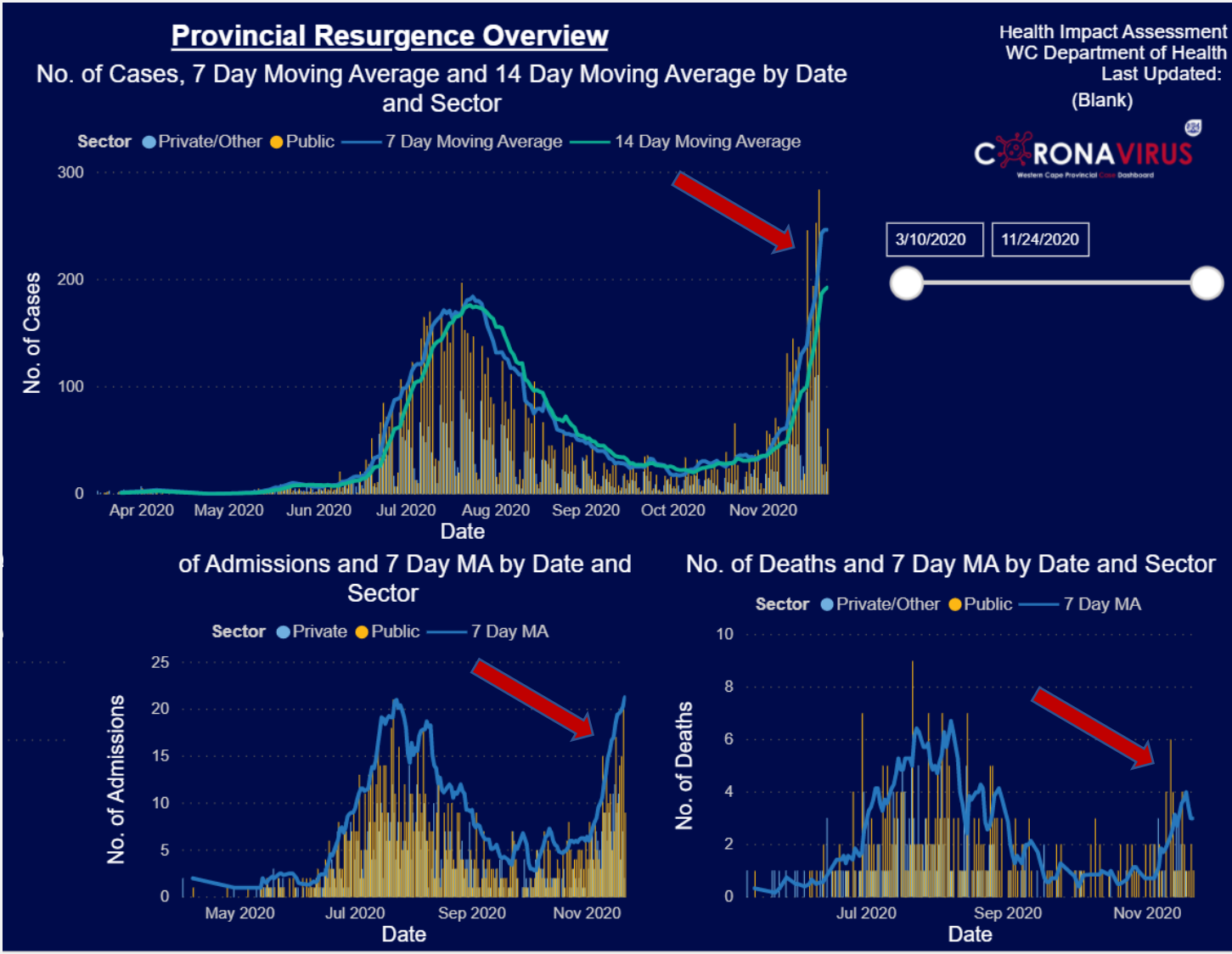
Surveillance & Response Update – Garden Route

The Garden Route Overview

The Garden Route is experiencing an **established resurgence**.

On the 23 November 2020, both George and Knysna recorded the highest ever number of new COVID-19 cases- exceeding the peak of the first wave.

In addition to an increase in cases, hospitalisation have clearly increased, and deaths appear to have increased as well.





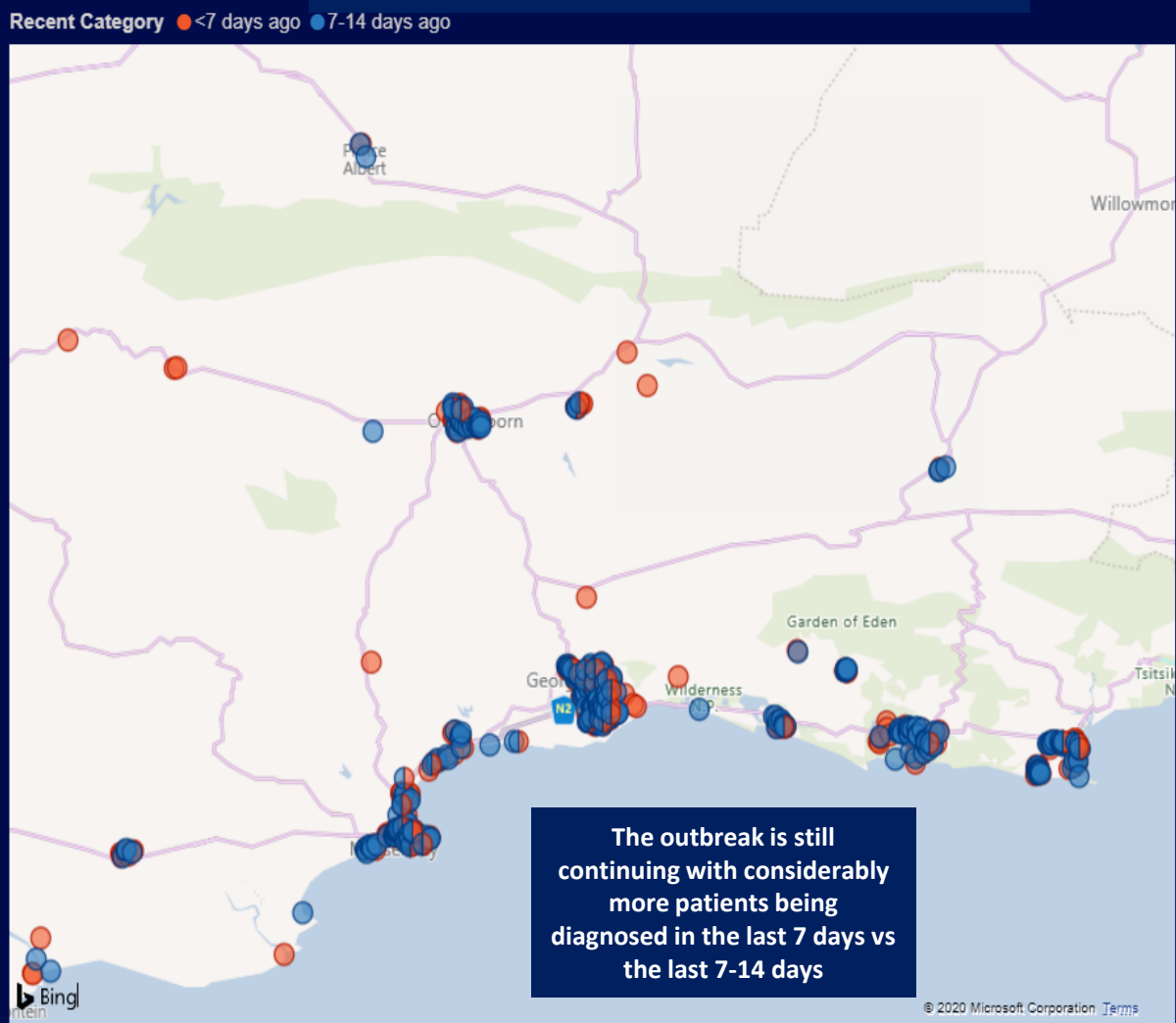
Overview of the Garden Route Towns and Suburbs contributing to the outbreak



Health Impact Assessment
WC Department of Health
Last Updated:
Tuesday, 24 November 2020



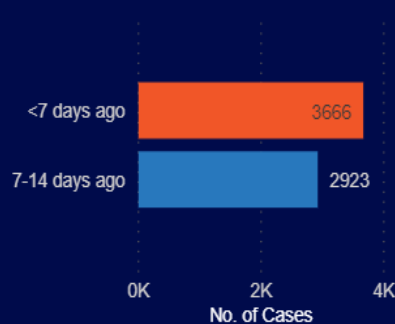
No. of Cases by Age and Recent Category



Select District, Subdistrict:

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

No. of Cases by Recent Category



Garden Route 24 November 2020 : New Cases

Hessequa – 3

Mossel Bay-
57

George – 190

Knysna/Bitou
– 178

Kannaland –
10

Oudtshoorn -
8

Garden Route: Containment Strategy

- Surveillance using available data and on the ground knowledge. Daily district surveillance huddles.
- Intensified screening, testing and contact tracing.
- Communication campaign using social media to encourage positive behaviour
- Increasing hospital capacity.
- Start COVID-19 Antigen testing.
- Multisectoral response including health, local government, law enforcement, education, private sector etc.

24 November 2020

Surveillance Huddle Report

Garden Route

Garden Route Districts Daily Huddle

24 Nov 2020

Hessequa

1. 2 new cases from Albertinia (same household) & X1 from Heidelberg
2. Five were asymptomatic that were having gastroscopies at the hospital; four were school children from different schools
3. Active cases 34
4. NHLS TAT: No improvement
5. Hospital: 3 pos patients and 2 PUI's
6. X1 Death in George hospital
7. System going well at moment despite high new numbers

Mossel Bay

1. 57 new patients (NHLS: 36 Private: 21)
2. No specific age group
3. Asla (new: 7 (Total: 87) and Kwanonqaba (new: 4 (Total: 64)
4. Doing about 196 tests per day
5. NHLS TAT: Improvement (outstanding: 23/11/2020)
6. 392 active patients
7. 578 contacts in monitoring
8. PUI: 196
9. Private hosp: 30 pos cases (4 Ventilator/13 Oxygen 13 room air)
10. 1 death in Mossel Bay hospital (06:00)
11. Correctional Services: X2 new employees (Total employees pos: 8)
12. Wes-Kamp: 65
13. CST: CHW's support with contact tracing, screening at hospital, Household screening. Will start next week with CST in ASLA, Alma
14. Team coping but under pressure

George

1. 190 new patients (Themba: 59 Conville: 30 Pacaltsdorp: 20) (highest ever on a day)
2. Active cases: 828
3. 0-deaths
4. George Hosp: 50, George Mediclinic: 34 (Ventilator: 11 High Flow: 11), Harry Comay Hosp: 18 (Oxygen bottles ordered)
5. NHLS TAT: improvement
6. Tuiniqua old age home outbreak: 6 staff members and 7 residents (visit done)
7. Boerdery: 6 workers pos. (To discuss with employer/employees what direct contact means)
8. Rosemoor service centre: X1 death in George hospital (own house)/ 1 positive case yesterday
9. Team coping but under pressure
10. Sub district tracing team will be strengthened

24 November 2020

Surveillance Huddle Report

Garden Route

Knysna/Bitou

1. 178 new patients (highest ever on a day)
2. 268 tests
3. NHLS TAT: improved since yesterday
4. Active cases: Knysna: 270 and BITOU: 150 (Mixture of pvt and nhls)
5. Age group: 20-60yr
6. New cases are widely distributed
7. CST focused on hotspot areas. Kranshoek & Sedgfield completed. Still busy in Craggs. Hornlee (on hold due to 7 CHW's positive/quarantine)
8. Correctional Services: employees: 1 positive and 7 in quarantine
9. Knysna hospital: 18 (pos) from which High Flow: 2, PUI's: 6
10. 4 deaths: State: 2 Private: 2 (from Eastern Cape)
11. Staff member: 5 positive, 12 Quarantine
12. Contact tracing team under pressure. Plan to send WA/SMS to close contacts in 3 languages if not able to cope.
13. EHP 's will support during weekends

Kannaland

1. 10 patients tested pos: Calitzdorp: 5 Zoar: 4 Ladismith: 1
2. Ladismith hospital: 1
3. Active patients: 14
4. Lab TAT: 24 -36 hour (Pending results: 25)
5. Team coping

Oudtshoorn

1. 8 new patients
2. Oudtshoorn Hospital: 7 (Pos: 5 PUI: 2) Medi-clinic: 4 positive patients
3. Active cases: 107
4. PUI's: 45
5. Lab TAT: improved (30 results pending)
6. Death: 1
7. Team coping

General

1. Lab TAT improved in all sub districts, except for Hessequa
2. Meeting with private hospitals: very busy in Plett, Knysna, George and Mossel bay; Oudtshoorn has capacity



Concluding remarks

- The Garden Route is experiencing an established resurgence
- The outbreak is present in all sub-districts, but numbers in Kannaland and Oudtshoorn are low presently.
- The outbreak is leading to considerably high positive proportions in public sector facilities and patients across the district.
- This is translating into higher admissions for the district .Private hospitals in the Garden Route are under pressure and are asking for assistance from the public sector.
- The public sector have started plans to increase bed capacity in the Garden Route.

Update on the recovery and reset strategy & acute service platform response



Health System Recovery and Reset Strategy

1. **Continue to be vigilant and manage COVID-19, with agility:**
 - a) **Surveillance and outbreak response – daily surveillance huddles**
 - b) **Change behaviours to contain the spread - via JOCs & Hotspots & WoSA**
 - c) **Scale up health platform capacity, as needed – scaled plan, with trigger points**
2. **Re-introduce comprehensive health services, in a different way:**
 - a) Prioritise the most essential and highest impact activities
 - 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 a **evidence-informed, data-led** approach
 - b) Move towards key system levers for UHC, e.g. strategic purchasing
 - c) Adaptive governance and leadership for resilience, with focus on our people

COVID Containment Strategy

1. Surveillance and outbreak response:

- a) The **surveillance strategy** is being implemented
- b) The **daily huddles** are functioning well
- c) **Call centre** and **case management capacity** essential
- d) Focus on **the most vulnerable** to avert mortality

2. Change behaviours to contain the spread:

- a) Need **strong and bold central public messaging** and **targeted local messaging**
- b) Co-ordinated **Provincial, District and local JOC enforcement**, lead by EHPs & Law Enforcement
- c) Need **strong community voices** and involvement
- d) Need to explore **local restrictions**

3. Scale up health platform capacity:


- a) Local teams putting **contingency plans** in place in **each geographic area** (Garden Route and Metro first)
- b) Defined **trigger points** for **step-wise escalation** of inter-mediate, acute and critical care access
- c) Co-ordinated **centralised** and **decentralised governance**

Making safe behaviour choices – managing the risks

#StaySafeMoveForward

MAKE SAFER CHOICES

We're all eager to get back to our pre-Covid-19 lives.
Managing the risks can help us get there faster.




Think about ventilation. Ensure the venue you are at has its windows open. If they don't, ask them to open the windows.



#StaySafeMoveForward

MAKE SAFER CHOICES

We're all eager to get back to our pre-Covid-19 lives.
Managing the risks can help us get there faster.



Think about the higher risks of being indoors. Make sure doors and windows are open, keep your mask up, and keep a safe distance.



#StaySafeMoveForward

MAKE SAFER CHOICES

We're all eager to get back to our pre-Covid-19 lives.
Managing the risks can help us get there faster.



Avoid crowds and confined spaces. Remember that masks, a safe distance and good ventilation will lower the risk of spread.



#StaySafeMoveForward

MAKE SAFER CHOICES

We're all eager to get back to our pre-Covid-19 lives.
Managing the risks can help us get there faster.



Think about the smart choice – **Inviting people over? Keep your gathering small and outdoors**



Acute service platform – general comments

1. Currently **904 Covid patients** in our acute hospitals (**431** in **public** hospitals & **473** in **private** hospitals)
2. Hospitalisations have **begun increasing sharply** whilst we still maintain the capacity to manage **comprehensive** clinical (**non-COVID**) **services**.
3. The **metro hospitals** are running at an average **occupancy rate of 78%** whilst **rural hospitals** are running at an average occupancy rate of **79 %**.
4. **COVID & PUI cases** make up **6% of hospital admissions** in the **metro** and **7% of hospital admissions** in the **rural areas** (both increasing daily).
5. The **Hospital of Hope** (Brackengate) has **109 patients** (877 admissions to date), and **Sonstraal** has **5 patients** (19 TB patients).
6. The **oxygen utilisation** remains stable (**34.08 %** of available capacity) and the **mass fatality centre** has admitted 422 bodies to date (**currently 9**).

METROPOLE ACUTE CARE AVAILABILITY & UTILISATION

	Operational Beds	Filled Beds	Available Beds	BUR %
TBH - Tygerberg Hospital	1,256	963	293	77%
GSH - Groote Schuur Hospital	825	614	211	74%
RXH - Red Cross War Memorial Children's Hospital	195	171	24	88%
NSH - New Somerset Hospital	330	268	62	81%
ERH - Eerste River Hospital	185	134	51	72%
FBH - False Bay Hospital	76	52	24	68%
HHH - Helderberg Hospital	196	143	53	73%
KHA - Khayelitsha Hospital	341	326	15	96%
KBH - Karl Bremer Hospital	360	262	98	73%
MPH - Mitchells Plain Hospital	426	331	95	78%
VHW - Victoria Hospital	182	146	36	80%
WFH - Wesfleur Hospital	58	31	27	53%
Totals	4,430	3,441	989	78%

Operational Beds = Beds that are Equipped and Staffed

Bed Utilisation Rate = % Operational Beds Occupied

OCCUPANCY IN METRO ACUTE CARE PLATFORM IS 78%, COVID 6%

Conclusions

Concluding remarks

1. We should confirm that the **increase in cases in specific geographic areas (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 of cases.
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 COVID capacity** as required, in response to increase cases.
6. It is essential to ensure a **strong focus on surveillance and containment** for the next **18-24 months**, while we deal with the **challenges of the recovery plan**, in the face of significant **upcoming budget challenges**.

Thank you