



**Western Cape
Government**

Health

Digital Press Conference

Health Update

S Kariem

24 February 2021

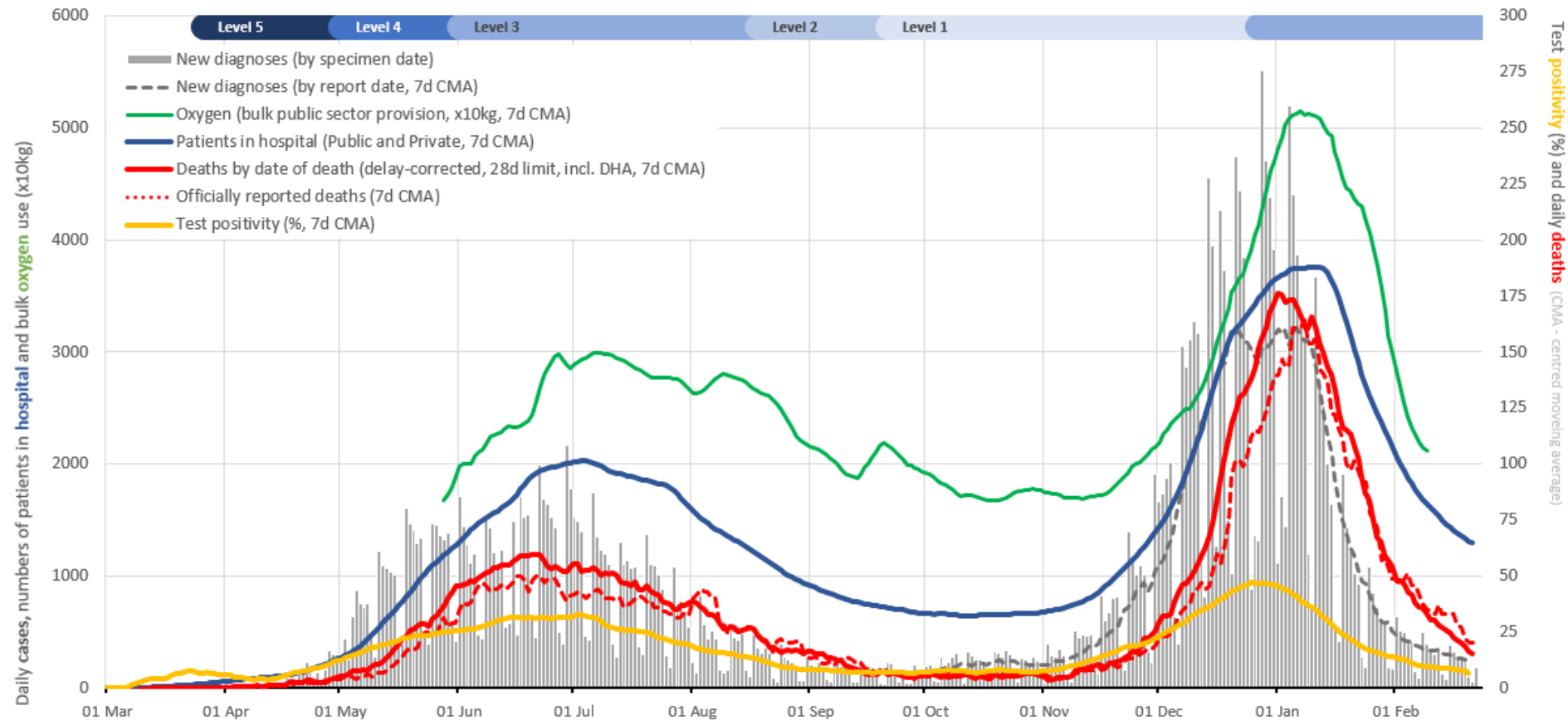
Overview

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

Surveillance & Response Update

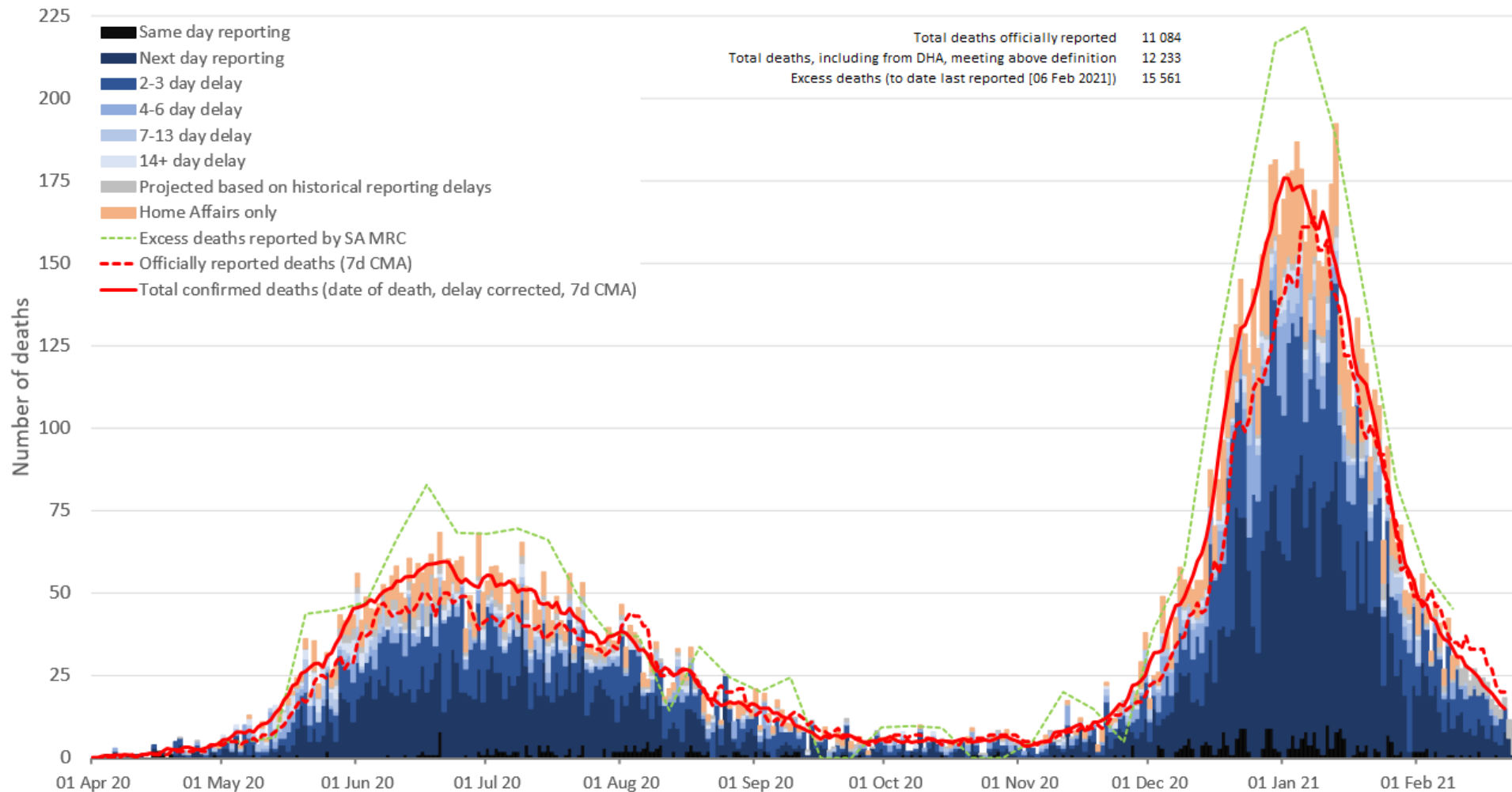


Integrated testing, case, hospitalisation and mortality trends



Mortality by date of death

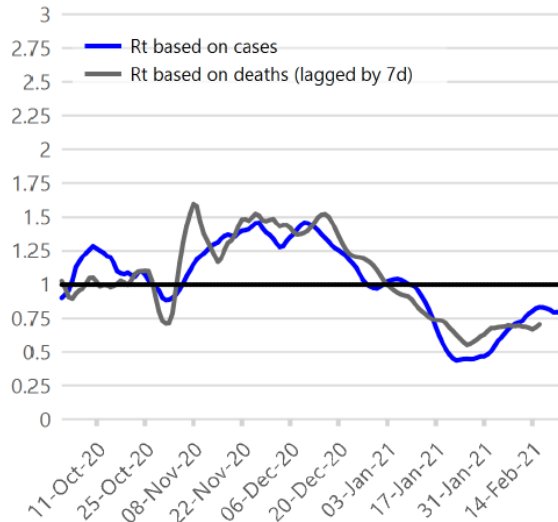
Mortality in patients with laboratory-confirmed SARS-CoV-2, by delay to reporting*
(within 28 days of diagnosis or 14 days of discharge, by date of death, excluding non-natural deaths on population register)



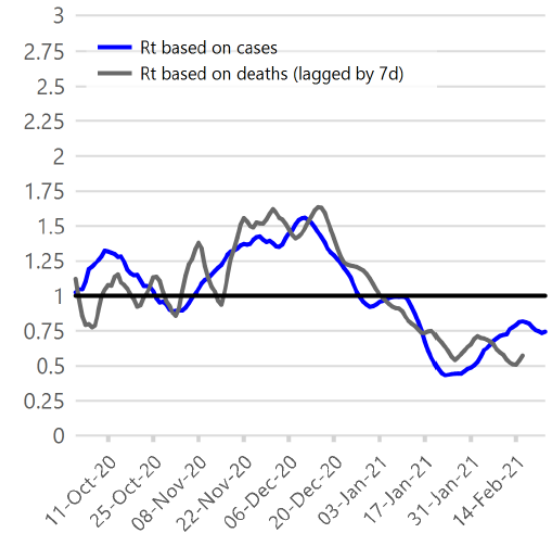
* Excludes deaths in those with undiagnosed COVID-19, in patients with clinical diagnoses in spite of absent or false negative SARS-CoV-2 test results, and in those without recorded ID numbers dying at home or in ambulatory or emergency room care; CMA - centred moving average

Current reproduction number

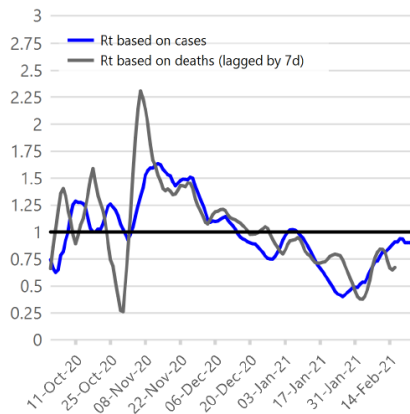
Province



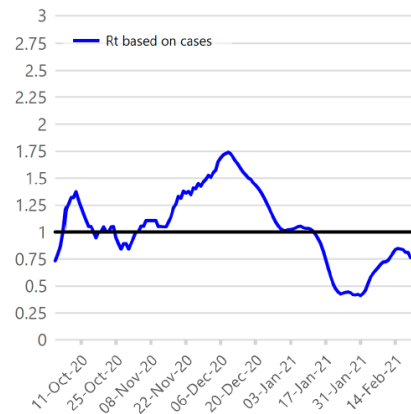
Metro



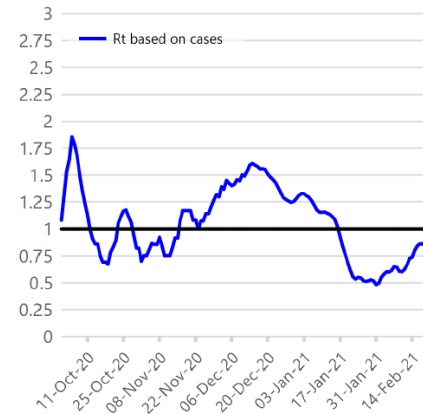
Garden route



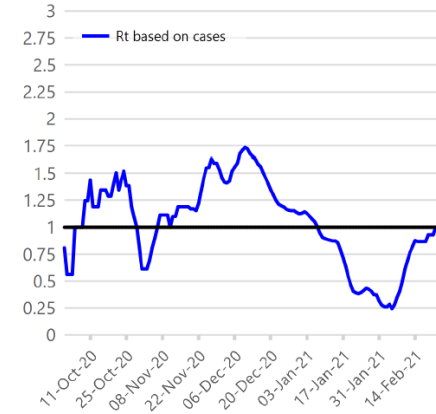
Cape Winelands



West Coast



Overberg



Provincial Resurgence Overview

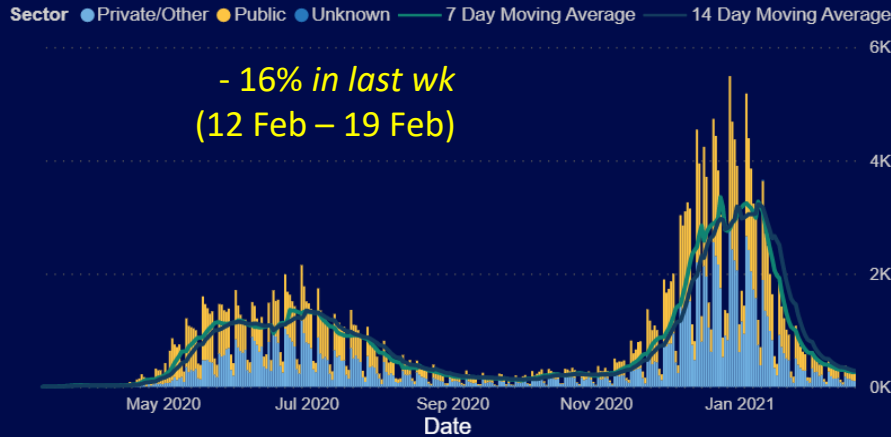
Health Impact Assessment
WC Department of Health
Last Updated: ...
Tuesday, 23 February 2021



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



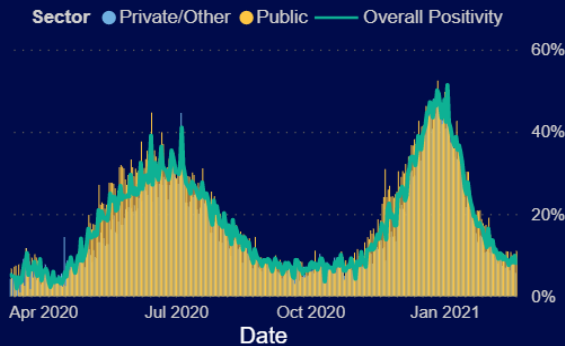
Date of Diagnosis

3/10/2020 2/19/2021

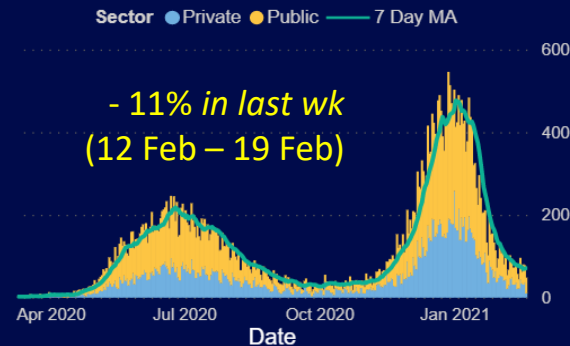
Date of Death

3/27/2020 2/16/2021

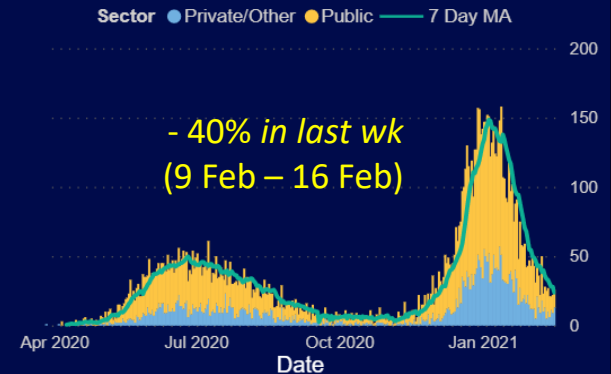
Proportion Positive and Overall Positivity by Date and Sector



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



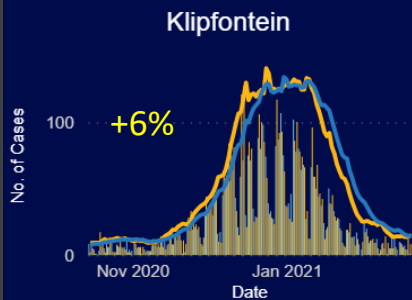
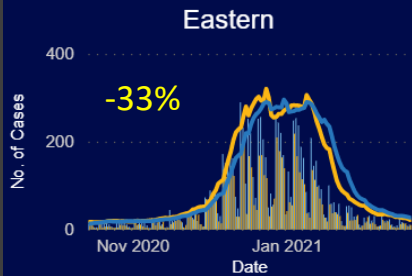
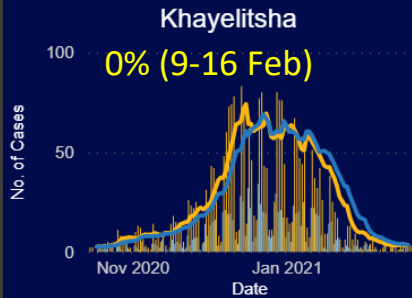
No. of Deaths and 7 Day MA by Date and Sector



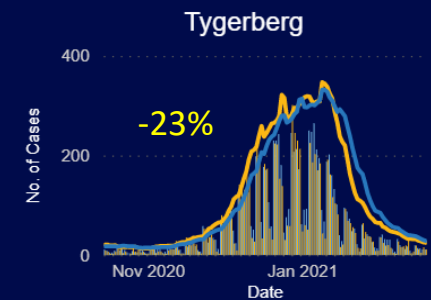
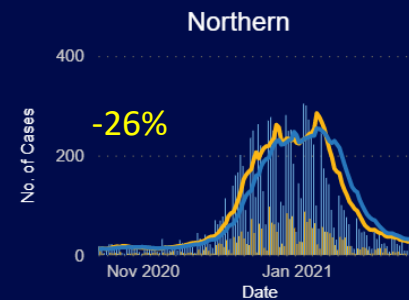
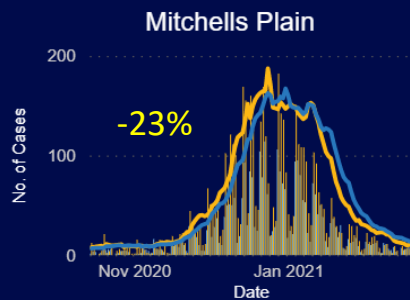
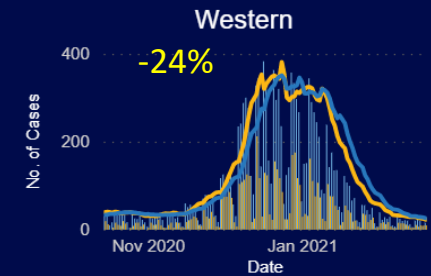
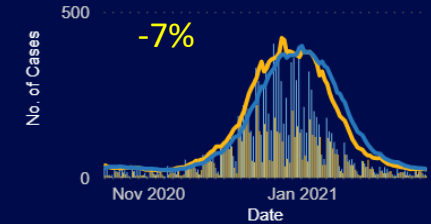
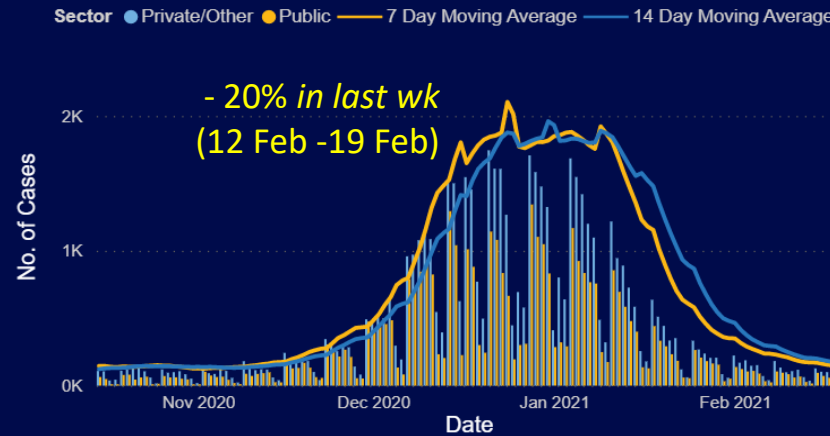
Provincial Overview

- For the sixth consecutive week, COVID-19 cases across the Western Cape have declined.
- Using 7 day moving averages, confirmed cases have declined a further 16%, while admissions and deaths have dropped by 11% and 40% respectively.
- The proportion positive has dropped further to 8% on 19 February 2021

Metro Resurgence Overview



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



Metro Overview

- Cases in the Metro decreased by a further 20% from 12 February 2021 to 19 February 2021.
- All sub-districts show a decrease in cases except Klipfontein which showed a slight increase in cases.



3/10/2020

2/19/2021

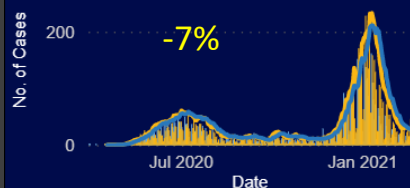
Rural Resurgence Overview

Health Impact Assessment
WC Department of Health

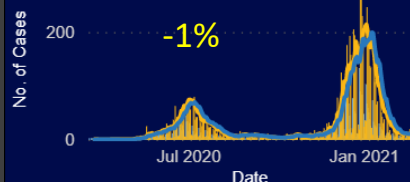
Last Updated:

Tuesday, 23 February 2021

West Coast



Overberg

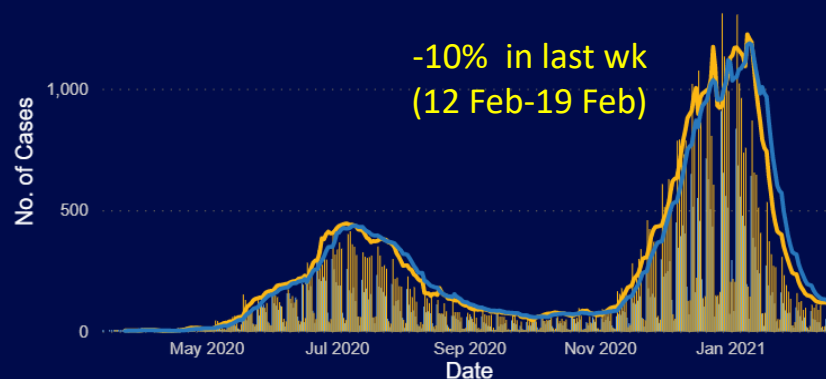


Garden Route

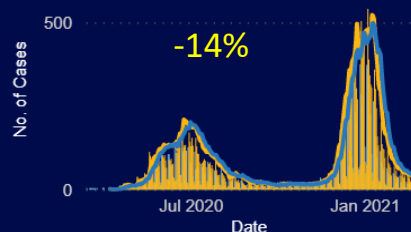


Rural Overview: No. of Cases with 7 and 14 Day MA by Date and sector

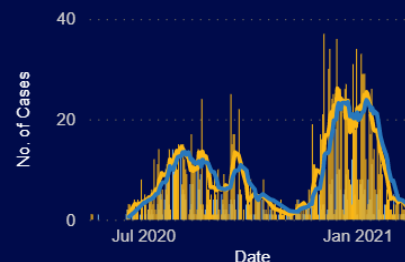
Sector ● Private/Other ● Public — 7 Day Moving Average — 14 Day Moving Average



Cape Winelands

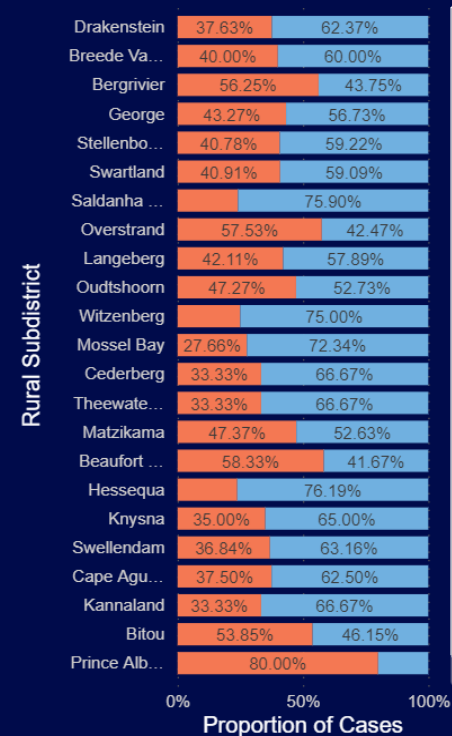


Central Karoo



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

● <7 days ago ● 7-14 days ago



Rural Overview

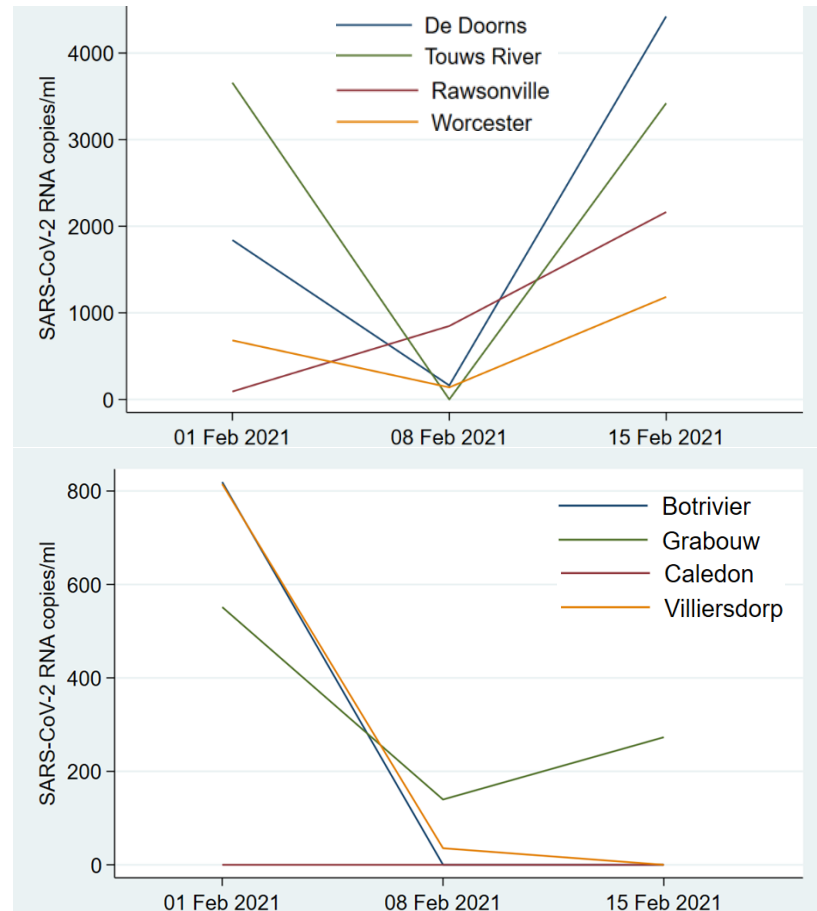
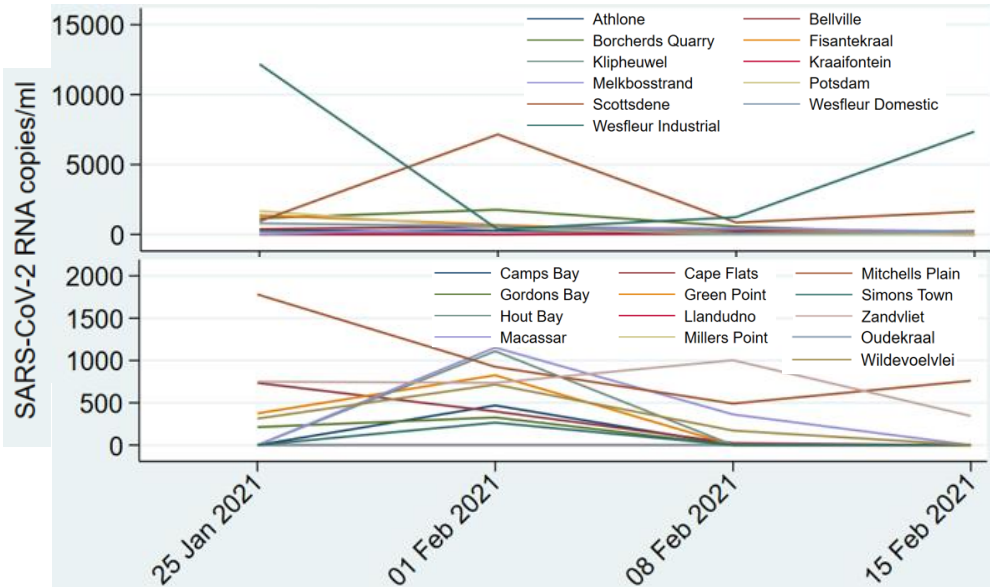
Cases in Rural have declined by 10%, with all the districts showing decreasing case numbers.

Triangulating with wastewater

SAMRC COVID- 19 AND WASTEWATER EARLY WARNING SYSTEM

WEEK 7
2021

City of Cape Town, Breede Valley AND Overberg



Note different axes for different graphs to accommodate low SARS-CoV-2 values

The health platform COVID response

Acute service platform – general comments

1. Currently **1316 COVID patients** in our acute hospitals (**758** in **public** hospitals & **558** in **private** hospitals). This **excludes PUIs** and **cases in specialised hospital** settings.
2. COVID **hospitalisations** have continued **to decline**; there has however been a increase in **trauma cases**
3. The **Metro hospitals** have an average **occupancy rate** of **86%**; **George** drainage area hospitals at **52%**; **Paarl** drainage area hospitals at **68%** & **Worcester** drainage area hospitals at **64%**.
4. Occupancies in COVID beds show **Metro** hospitals at **20%**; **George** drainage area hospitals at **14%**; **Paarl** drainage area hospitals at **26%**; **Worcester** drainage area hospitals at **24%**.
5. **COVID & PUI cases** currently make up **9%** of all available acute general hospital capacity in both Metro and Rural Regional Hospital drainage areas.
6. **COVID inter-mediate care** - the **Hospital of Hope** (Brackengate) currently has **33** patients (3 212 cumulative patients), **Freesia & Ward 99** has **13** patients, **Mitchell Plain hospital of hope** has **25** patients and **Sonstraal** currently has **7** patients.
7. The Metro **mass fatality centre** has capacity for **240 bodies**; currently **9 decedents (cumulative total of 1333 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 23/02/2021

Drainage Area	Operational Beds	Filled Beds	BUR %	COVID BUR %	% Covid patients	Designated Covid Beds(General Wards)	Designated Covid Beds(Critical Care)
Cape Town /Metro	5 054	4 327	86%	20%	7%	18%	49%
George	913	476	52%	14%	9%	13%	29%
Paarl	940	640	68%	26%	11%	24%	133%
Worcester	783	501	64%	24%	18%	24%	30%
SubTotal WCDOH	7 690	5 944	77%	20%	9%	19%	45%

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

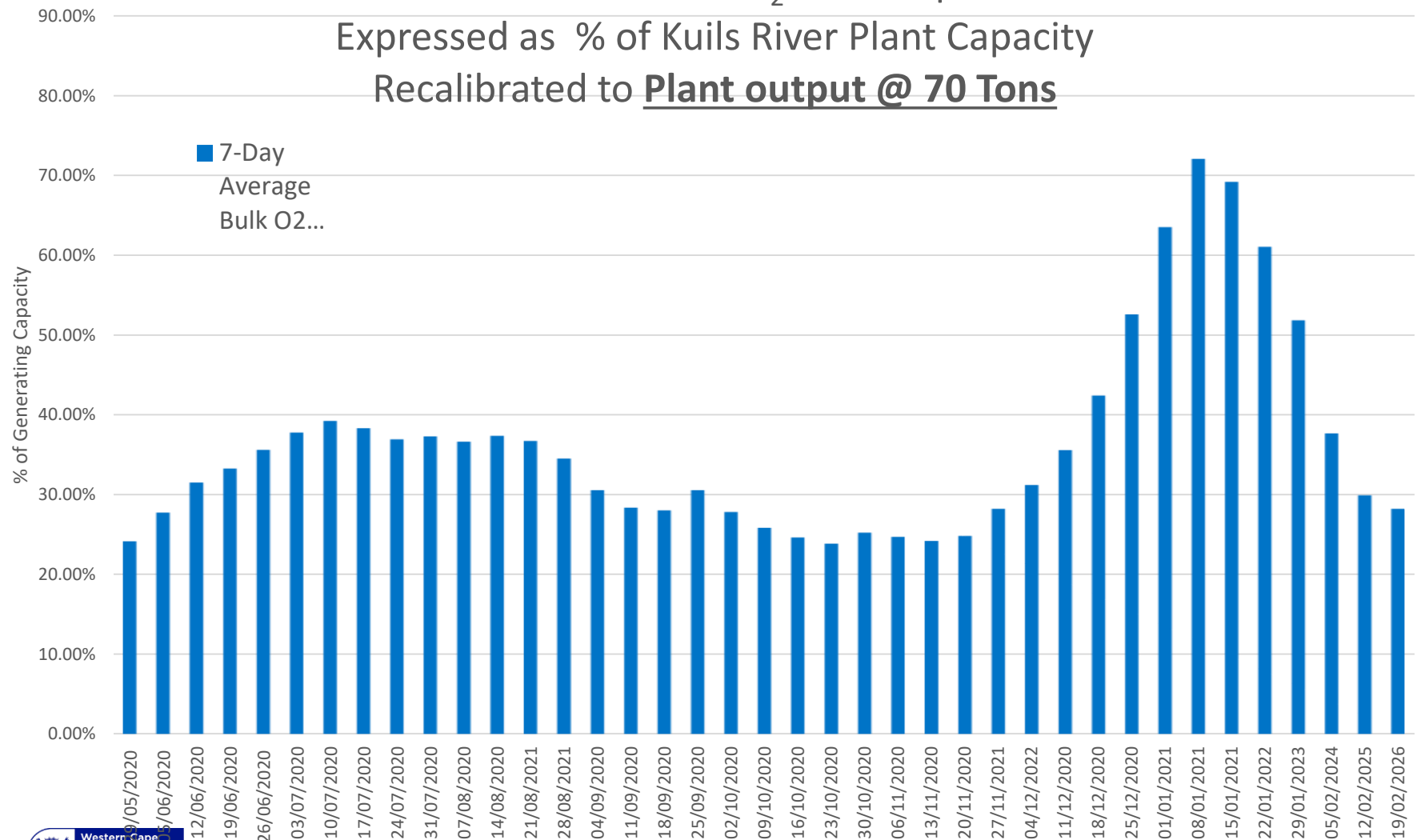
Operational Bed = an inpatient bed available for inpatient use that is staffed and equipped.

Daily oxygen consumption over past month – tons/day

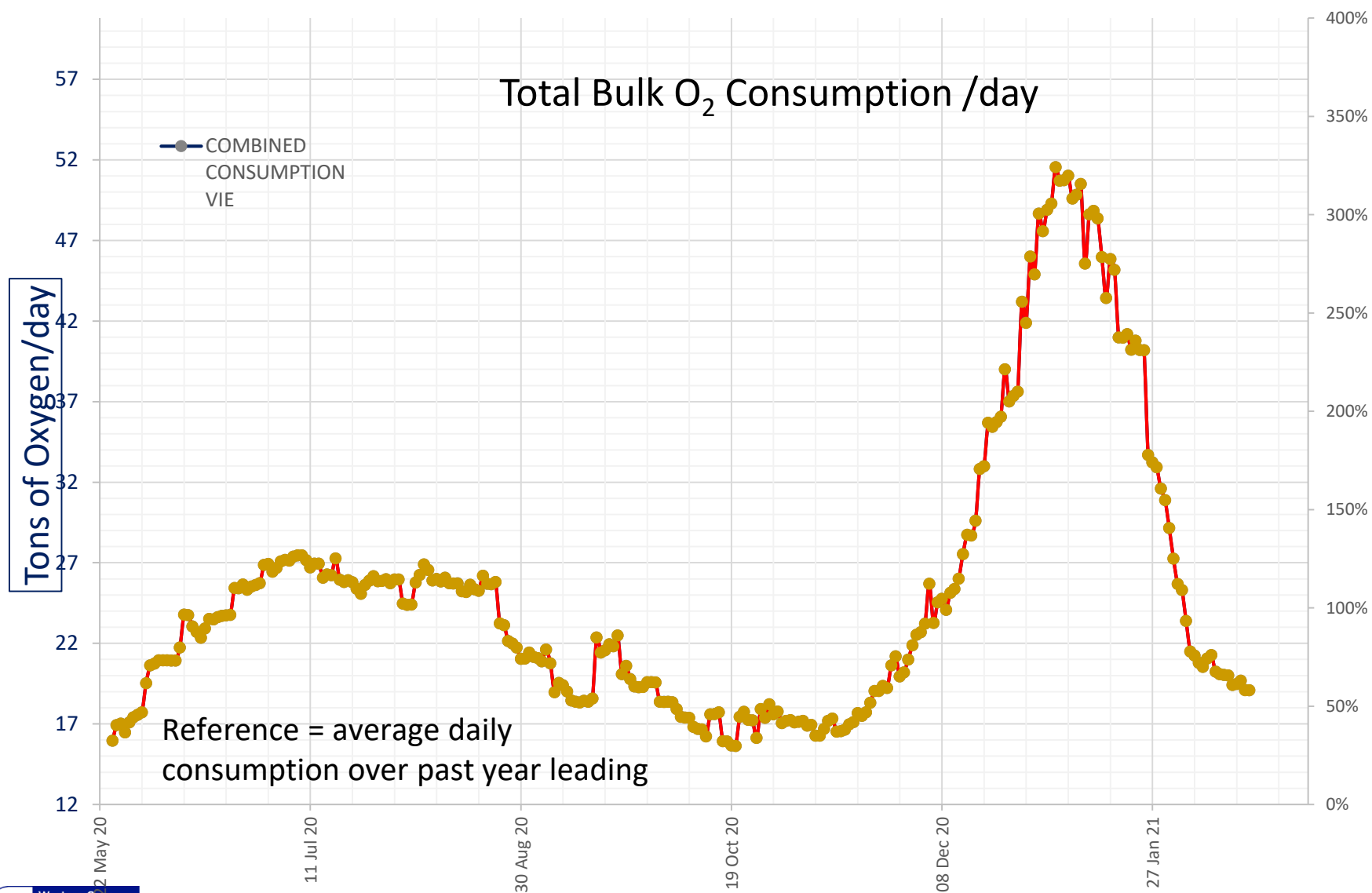
WCGH: Total Bulk O₂ Consumption

Expressed as % of Kuils River Plant Capacity

Recalibrated to Plant output @ 70 Tons



Public Sector oxygen consumption trend - tons/day



Oxygen utilisation – general comments

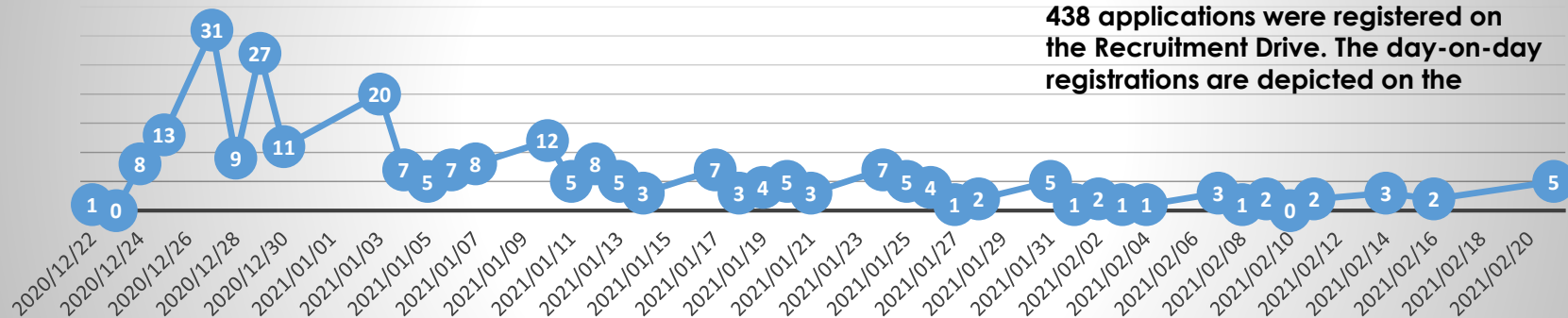
1. The combined oxygen utilisation in the Western Cape Public and private hospital sectors is **37.35 tons/day** (after **a peak of >80 tons/day**)
2. The **combined public- private** utilisation is now **below the maximal production capacity** of **70 tons/day** at the Afrox Western Cape plant.
3. The public sector **daily bulk oxygen** consumption is **28.21%** of the Kuilsriver plant for the 7 day period ending 5st February (compared to **81.69%** for the period ending 15th January at our peak oxygen consumption).
4. The department's **total bulk oxygen** consumption has reduced to around **19.28** tons daily when compared to **51 tons** daily in the first week of January.
5. The Western Cape now have **4 bulk oxygen tankers** allocated for the daily delivery of oxygen supplies during this week.
6. 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

Number of new entries on the Recruitment Drive

Up until 21 December 2020, a total of 438 applications were registered on the Recruitment Drive. The day-on-day registrations are depicted on the



Category of HCW	Possibly Available	Appointed on PERSAL
MO	153	22
Enrolled Nurse(EN)	101	13
Enrolled Nursing Auxiliary (ENA)	117	17
Not Indicated	32	5
Professional Nurse	125	56
Professional Nurse with Specialty	38	8
	566	121

Institutions have made 68 Offers to the following categories of staff:

OSD-Category Rank	Filled	Reserved Posts	Grand Total
Allied Health	23	2	25
Doctors	75		75
Nursing	775	64	839
Pharmacists	5	0	5
Pharmacists-Assistant	10	0	10
Social Workers	6	0	6
Admin and Related	150	2	152
Grand Total	1044	68	1112

There are currently 1044 filled posts across the platform for additional COVID posts, 68 offers are pending finalization which will bring the total to 1112. Of the 687 Recruitment Drive applicants, 121 has thus far been appointed on PERSAL. The balance of which 566 are possibly available for appointment.

DEPARTMENTAL OVERVIEW HEALTHCARE WORKERS INFECTED WITH COVID-19



Totals as at 24 Feb 2021

Cumulative Infections

8,812

-



8,628

-



119

=

Active Cases

65

Doctors



798

Nurses



3,957

Radiographers



108

Pharmacists



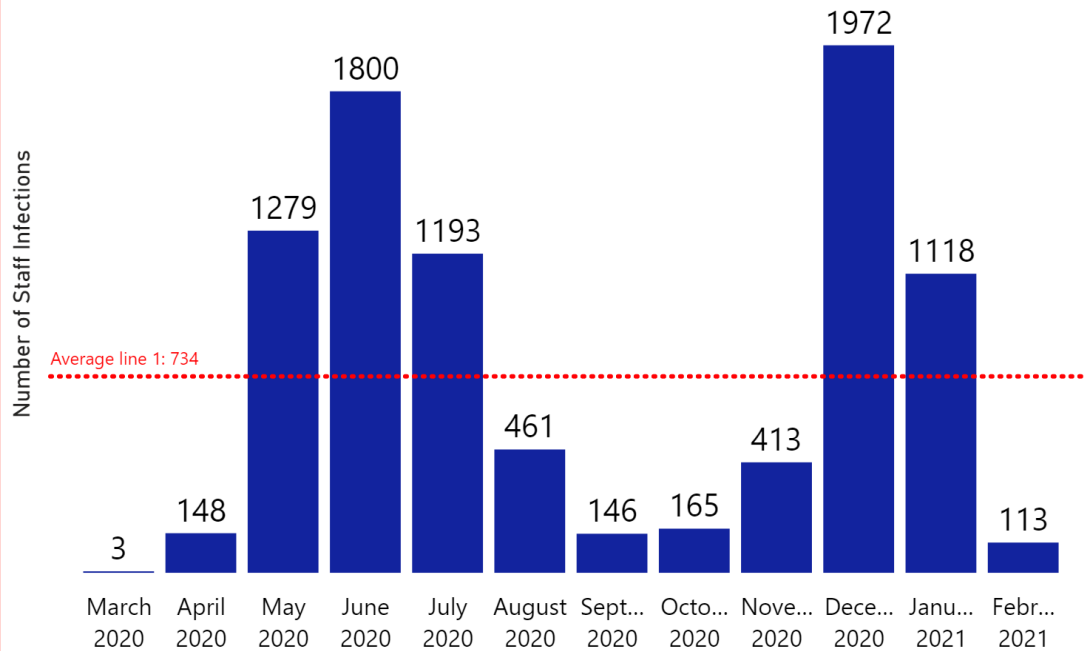
82

Other
Categories

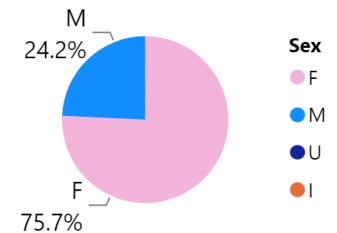


3,867

Healthcare Workers Infections by Month



Gender Distribution by Sex



DEPARTMENTAL OVERVIEW

HEALTHCARE WORKERS INFECTED WITH COVID-19 -DAILY TRENDS

Totals as at 24 Feb 2021

Cumulative Infections

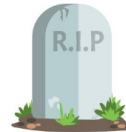
8,812

-



8,628

-



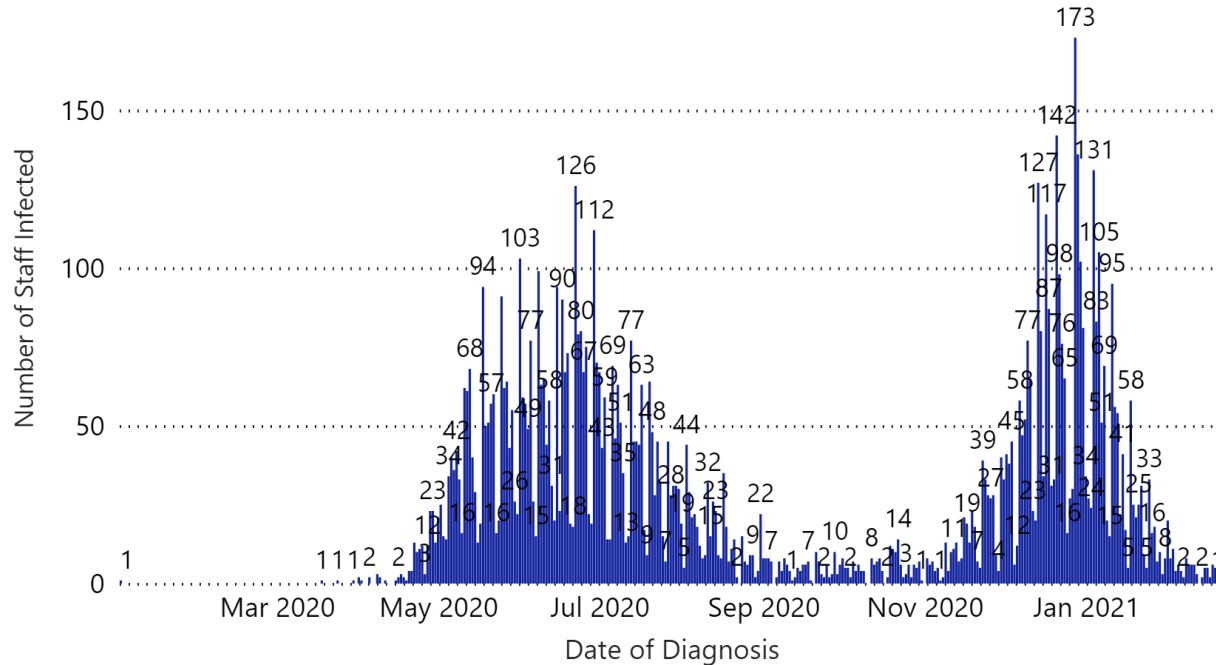
119

=

Active Cases

65

Daily Staff Infection Trends



Doctors



9

Nurses



20

Radiographers



1

Pharmacists



1

Other
Categories



34

DEPARTMENTAL OVERVIEW HEALTHCARE WORKERS MORTALITY DUE TO COVID-19

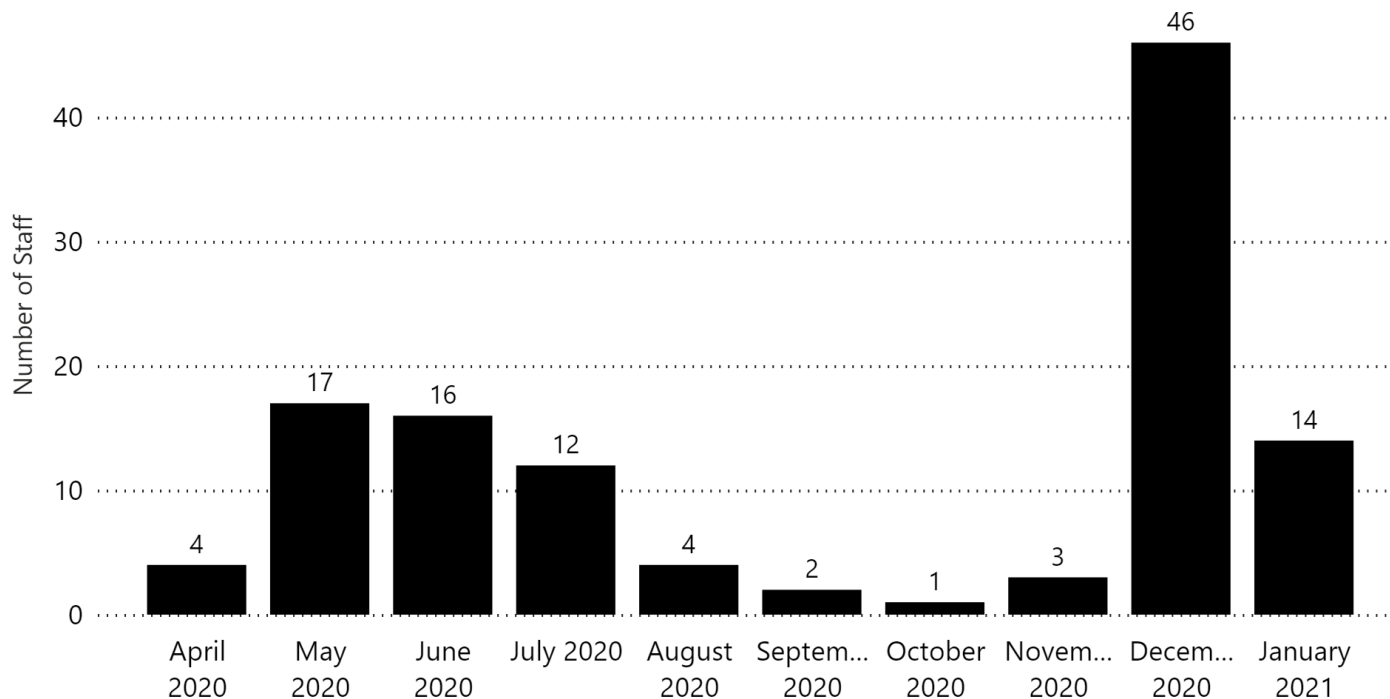


Totals as at 24 Feb 2021



= 119

STAFF MORTALITY TRENDS DUE TO COVID-19



Doctors



2

Nurses



54

Radiographers



(Blank)

Pharmacists



(Blank)

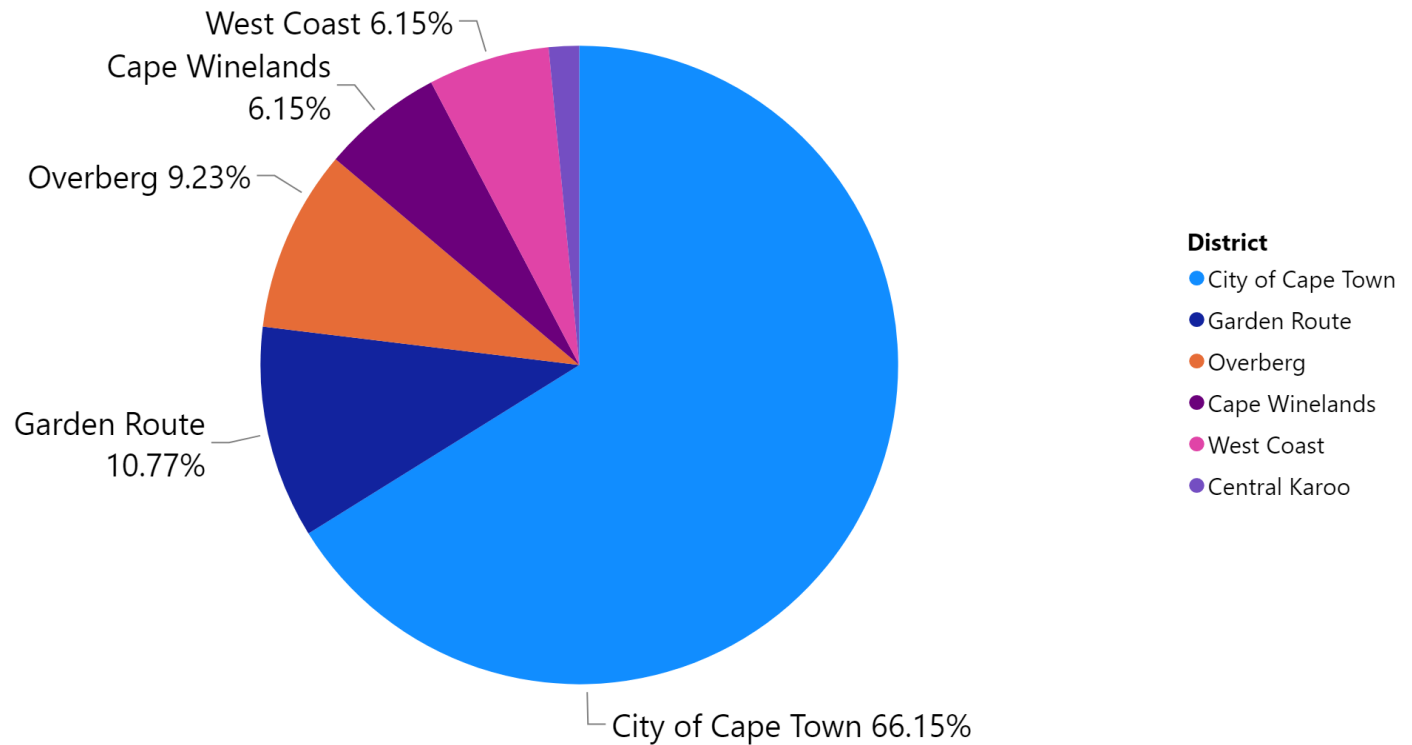
Other Categories



63

DISTRIBUTION OF ACTIVE CASES PER DISTRICT

District	Staff Infected
Cape Winelands	4
Central Karoo	1
City of Cape Town	43
Garden Route	7
Overberg	6
West Coast	4
Total	65



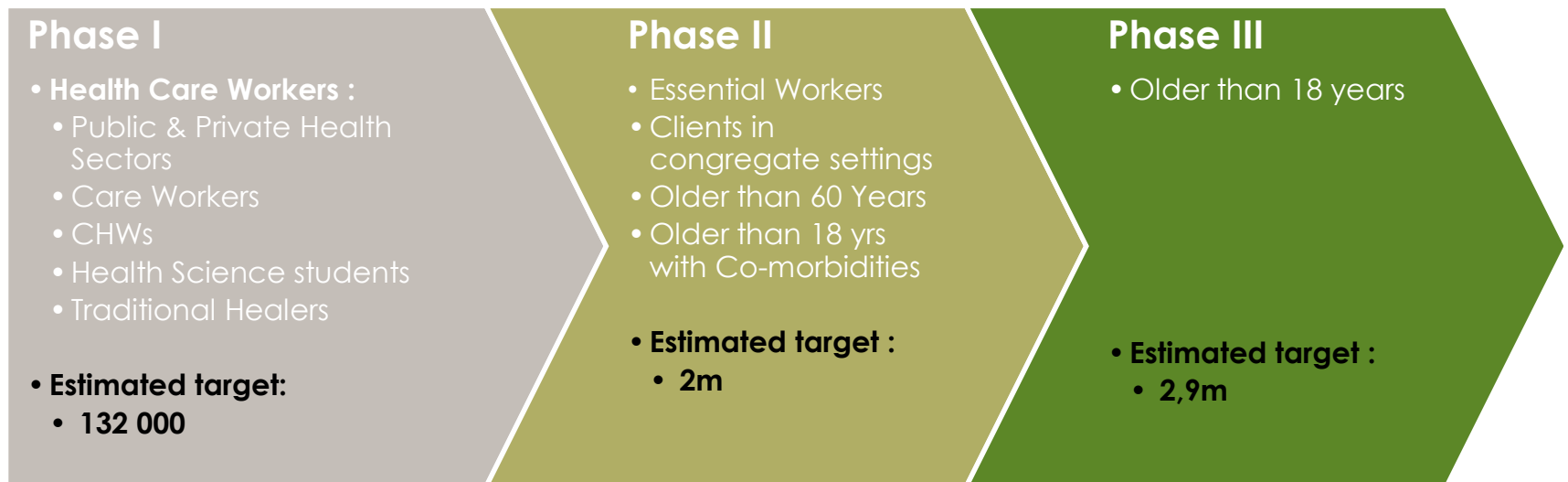
Vaccine Implementation update

Vaccination Programme Launch

1. The launch took place at **Khayelitsha District Hospital** on the **17 Feb from 14:00** where President Cyril Ramaphosa and Minister Zweli Mkhize were among the first South Africans to receive the vaccine.
2. **GSH and TBH** commenced vaccinations on the same day as the launch.



Vaccine update: Phases and Prioritisation Groups



Vaccine update: Prioritisation for Phase 1 for J&J Vaccine

Phase I

- **Health Care Workers :**
 - Public & Private Health Sectors
 - Care Workers
 - CHWs
 - Health Science students
 - Traditional Healers
- **Estimated target:**
 - 132 000

Limited doses of the J&J vaccine has been secured as part of the Sisonke Programme.

The J&J Vaccine will be arriving in **four tranches over 8 weeks.**

The **first tranche**, received on 17 February 2021, contained **13 160 doses** for private and public sectors.

It is anticipated that we will be able to cover **40% of health care workers** over the 8 week period.



Sequencing (1)

The following sequencing principles will be applied in the Western Cape:

- a) The principle of **equitable access is supported**.
- b) The TBH and GSH sites be seen as Metro East and Metro West sites
- c) Given the small no of doses in first round, the **immediate sub district of Tygerberg, and Southern/ or Western be focussed** upon to ensure pragmatic quantum of doses per facility, and not too thinly scattered across too many facilities. **This will enable access to staff at these facilities from acute hospitals to EMS and PHC both within WCGH as well as the COCT.**
- d) We have developed a vaccine roll out plan for the next 8 weeks to ensure that we cover all the geographic areas of the province

Sequencing (2)

- e) The **number of doses will be allocated pro rata to the number of staff at identified facilities** within the defined sub district.
- f) From the pro rata allocated doses to a facility, **a further prioritisation needs to happen within facilities**. The following approach / factors could be considered:
- individual vulnerability by **age**
 - **individual vulnerability by co morbidities** if data is available and can be fairly applied
 - **risk of exposure by category of staff (patient facing vs. non patient facing)** as suggested by the Expert Advisory Committee I.e. nurses, doctors etc.
 - **criticality of setting within facility** - critical care, Covid wards, ECs, Theatres etc.

Vaccine update: Electronic Data System

- **Electronic Vaccine Data System (EVDS):**

- Staff are being encouraged to complete the **self-enrolment** process on EVDS
- This process will replace the traditional patient folder to maintain an **electronic patient record** for the COVID-19 Vaccine roll-out only
- Paper-based systems are in place to serve as a **back-up system** only
- **Consent** will form part of EVDS & this includes the additional consent for the J&J vaccine

Vaccine update: Enrolment Process for J&J Vaccine

**STEP
1**

Staff wanting to be vaccinated MUST register on the EVDS

**STEP
2**

Registered staff will receive a voucher via SMS

**STEP
3**

Upon receiving the voucher, staff must inform their manager

**STEP
4**

The manager will then determine whether the staff member falls within the most at-risk category and book the vaccination date and site (if applicable)

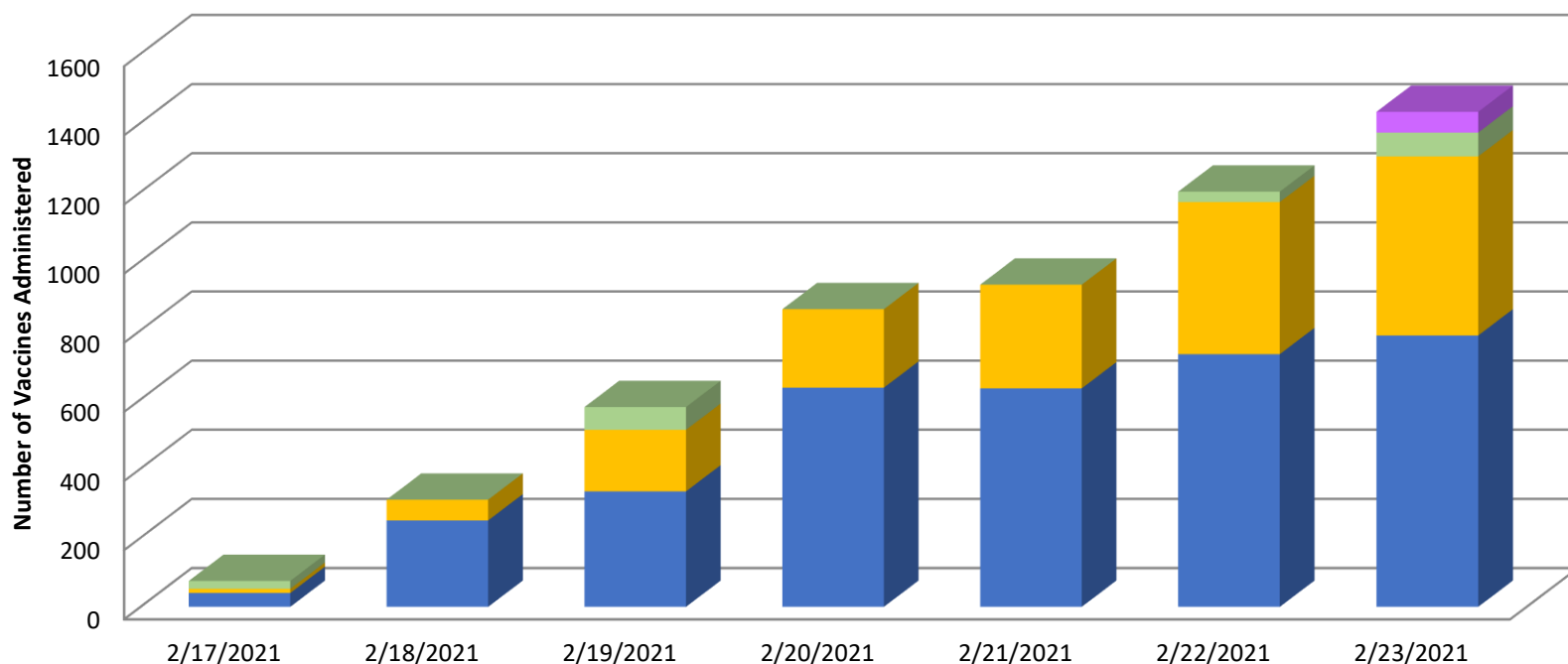
**STEP
5**

The staff member will then be informed of the date and site for the vaccination to be administered



Vaccine uptake: 17 – 23 February 2021

**Number of Covid-19 Vaccinations done per site:
17 - 23 February 2021 = 5389**



	2/17/2021	2/18/2021	2/19/2021	2/20/2021	2/21/2021	2/22/2021	2/23/2021
KBH							60
KDH	23	0	66	0	0	30	69
TGH	12	60	178	227	300	440	518
GSH	40	250	334	634	632	731	785

Roll-out Sites for J&J Vaccine

Tranche 1 (17 February to 02 March)

- Groote Schuur Hospital
- Tygerberg Hospital
- Khayelitsha District Hospital
- Karl Bremer Hospital

Tranche 2 (02 to 16 March)

- Groote Schuur Hospital
- Tygerberg Hospital
- Khayelitsha District Hospital
- Mitchell's Plain District Hospital
- George Hospital
- Worcester Hospital
- Paarl Hospital

Tranche 3 (17 to 30 March)

- Helderberg Hospital
- Ceres Hospital
- Hermanus Hospital
- Caledon Hospital
- West Coast District (Bergriver, Cederberg, Swartland, Saldanha, Matzikama)
- Central Karoo District (B/West, Laingsburg, Prince Albert)
- Garden Route (Hessequa, Kannaland, Oudtshoorn)

Roll-out of J&J Vaccine

1. The number of vaccination sites will be increased from **four sites in tranche 1** to **seven sites in tranche 2**, with **seven more sites** coming on board in **tranche 3**.
2. **Tranche 4** of the J&J allocation will be utilised to conduct mop-up vaccination activities for healthcare workers.
3. Whilst vaccination sites will be established at designated facilities, these sites will service the **geographic catchment area** attached to the respective sites and **outreach** vaccination activities will be conducted in the **rural** districts.
4. We will **review the sites regularly** considering all the logistics in establishing a site and may revise the list from time to time; but will ensure that we cover all areas.
5. **Vaccine cards** have been printed and are being delivered to sites by CMD.

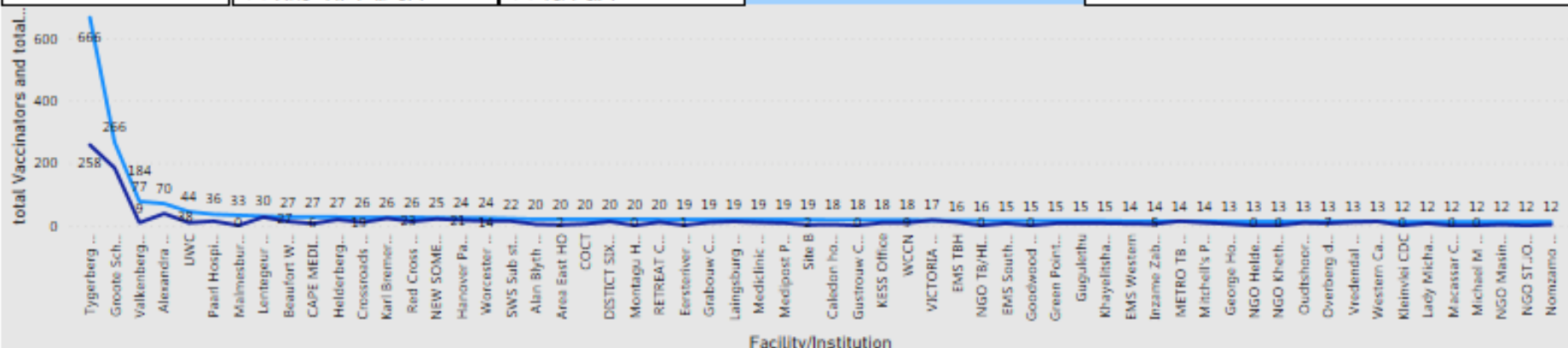
Vaccine update:

Ongoing processes beyond the J&J Vaccine

1. **Master Facility List** (Vaccination Sites) is finalised and sites are being amended and will remain an ongoing process.
2. **Vaccinator training** is ongoing with **1444** vaccinators trained to date.
3. Adequate **PPE** will be available for further rollout of Covid-19 vaccines in the province.
4. Minus **70 degree storage capacity for Pfizer vaccine** in the province confirmed with for up to **450 000 vials** of vaccines.
5. **Site Readiness Pack** has been finalised to assist vaccination sites as they come online.

Vaccinator Database

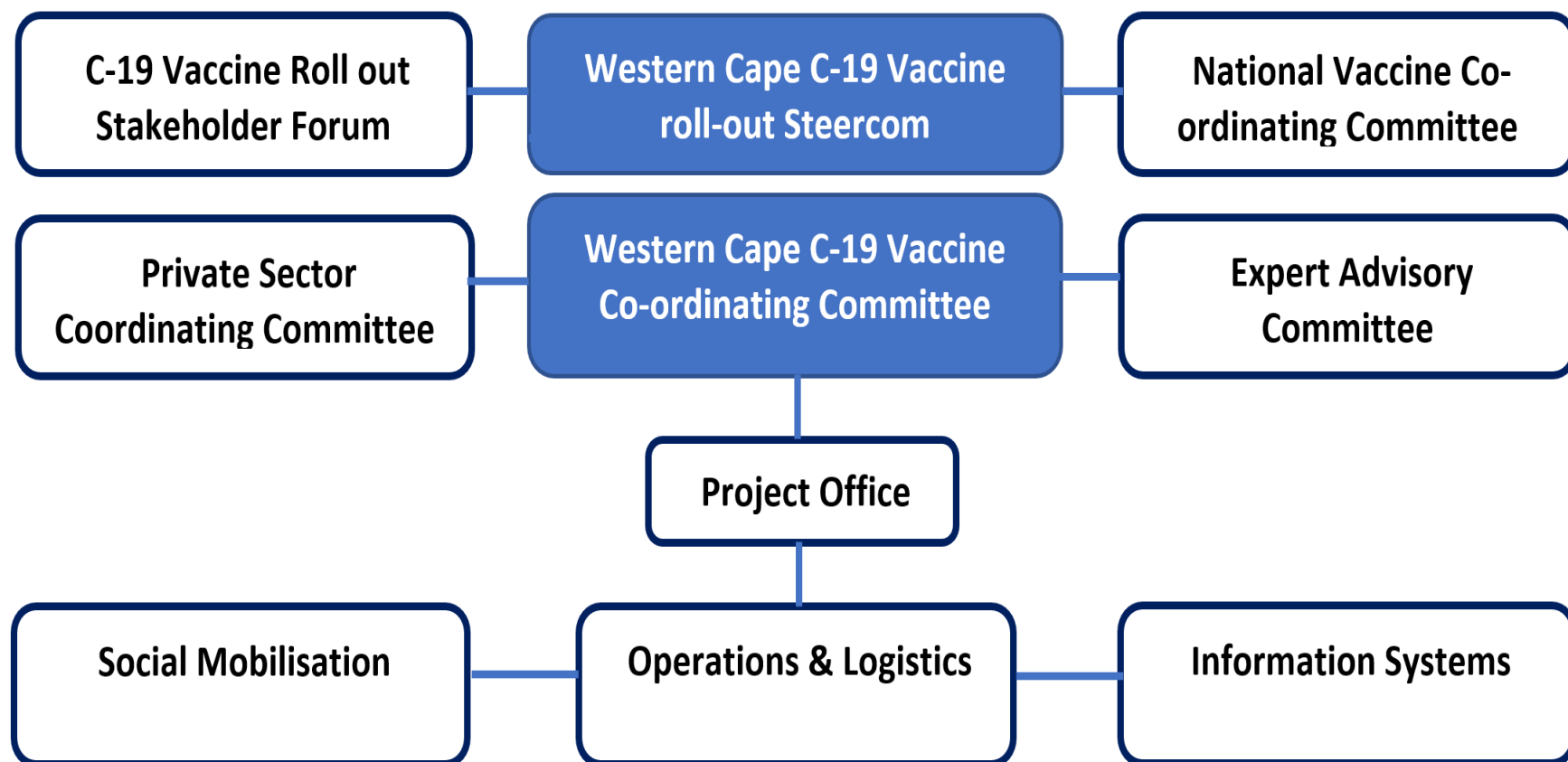
Group	District	Facility/Institution			
<input type="checkbox"/> Cape Metro <input type="checkbox"/> CDU <input type="checkbox"/> City of Cape Town <input type="checkbox"/> College of Emergency... <input type="checkbox"/> DCS <input type="checkbox"/> Metro Health Services <input type="checkbox"/> NHLS <input type="checkbox"/> NHS - KESS <input type="checkbox"/> People Management <input type="checkbox"/> PHARMACY SERVICES... <input type="checkbox"/> PRIVATE <input type="checkbox"/> Rural Health Services <input type="checkbox"/> Universities	<input type="checkbox"/> Cape Metro <input type="checkbox"/> Cape Winelands <input type="checkbox"/> CDU <input type="checkbox"/> Central Karoo <input type="checkbox"/> CoCT <input type="checkbox"/> CoCT Area Central <input type="checkbox"/> CoCT Area East <input type="checkbox"/> CoCT Area North <input type="checkbox"/> CoCT Area North SDO <input type="checkbox"/> CoCT Area South <input type="checkbox"/> CoCT Comprehensive PPHC <input type="checkbox"/> CoCT Training <input type="checkbox"/> College of Emergency Care <input type="checkbox"/> CPUT <input type="checkbox"/> DCS <input type="checkbox"/> Garden Route <input type="checkbox"/> MHS - KESS	<input type="checkbox"/> Aan-het-Pad Clinic <input type="checkbox"/> Abalone Factory <input type="checkbox"/> ACVV <input type="checkbox"/> Admin Building <input type="checkbox"/> Adriaanse Clinic <input type="checkbox"/> Alan Blyth Hospital <input type="checkbox"/> Albertinia Clinic <input type="checkbox"/> Alexandra Hospital <input type="checkbox"/> Alma CDC & Group <input type="checkbox"/> Alphen Clinic <input type="checkbox"/> Amalienstein Clinic <input type="checkbox"/> Annie Brown Clinic <input type="checkbox"/> Aquarius Health Covid Fl... <input type="checkbox"/> Area Central HO <input type="checkbox"/> Area East HO <input type="checkbox"/> Area North HO <input type="checkbox"/> Area South HO	<div>3562</div> <div>total Vaccinators</div>		
			<div>1444</div> <div>total Trained</div>		
			<div>347</div> <div>Doctors</div>		
			<div>1532</div> <div>Nurses</div>		
			<div>694</div> <div>Other</div>		
			identified so far		
			<div>404</div> <div>Pharmacists/EMS/Educator</div>		
			<div>302</div> <div>Supervisor/ Manager</div>		



Challenges Experienced During Phase 1

1. **The impact on time that study conditions have on throughput time:**
 - a) **Syringe Filling time** resulted in delays at some sites - the need for more GCP pharmacists addressed by ongoing training
 - b) The natural disposition to use a **paper-based system**. Vaccinators and Site supervisors were soon challenged with back-capturing and the shift to EVDS required rapid change management.
 - c) **IT hardware will need to be strengthened as** we go to scale with EVDS
2. **Delays in SMSs (via the EVDS system)** inviting HCWs to consent to the J&J vaccine and the subsequent e-voucher – **resulted in delays in accessing vaccine, (resolved now)**
3. **Non-HCWs are registering as HCWs (via the EVDS system)** and they are arriving at sites with **e-vouchers. To mitigate this risk we will be requesting HCWs to produce proof**
4. **Booking system for private GPs (via the EVDS system)** should be better aligned to public sector planning and processes.

Revised Governance arrangements for Phase II roll out



Governance arrangements

1. Given the nature of this multi stakeholder effort, a two tiered structure is recommended at provincial level:

- A small steering committee that provides the stewardship to this process
- A broader reference group (stakeholder forum) that is more inclusive that provides oversight and advice.

2. The steering committee will comprise the ff:

- HOD: Health (Chair) - supported by exco, CD: ECSS, Comms
- IEC rep - COCT
- Business - Private Health sector
- Local Govt rep - DOTP
- Provincial Treasury
- *Religious fraternity rep*
- *Organised labour rep*
- *Civil society rep*

Preparation for Phase II

1. The focus will be on scaled up planning and organization for phase II.
2. A more widely representative stakeholder forum will also be set up.
3. The COCT has been engaged to be part of the process as well as pooling of resources to strengthen project office capability to support the roll out programme.
4. The private sector will be similarly engaged.

Vaccine sourcing strategy

Sourcing Framework

1. Has the proposed vaccine been approved by SAHPRA / Has SAHPRA approved vaccine for Emergency Use Authorization for Vaccines?
2. What contractual arrangements have been made with the National Government in terms of liability, costing and vetting approvals? Please supply contract.
3. Has the vaccine been tested against the South African (SA) variant of the virus?
4. Has efficacy against the SA variant been demonstrated during clinical trials, and if so, provide details. Has a dossier been submitted to SAHPRA for registration of the vaccine in South Africa?

Direct Acquisition

1. Requests had been sent to suppliers who responded the Premiers call. Due date to supply information to the Department is 24 February 2021
2. Once received all information will be evaluated by Sourcing Team

Vaccine sourcing strategy

Donations

1. Cash donations are preferred and once received will be channeled through the revenue fund in accordance with the existing donations framework
2. As a result of regularity requirements donation of vaccine stock will not be accepted

Partnerships

1. Partnerships with the private sector will be pursued; this will be particularly helpful the vaccine roll out strategy.
2. There is already an existing forum that is used for the engagement with the private sector

Staff Readiness: Poll Results Covid 19 Vaccine Options 23 February 2021



Western Cape
Government

Health

Staff Readiness: Vaccine Options Rapid Poll Results

Number of respondents at the time of Report: **135**

2. Age

[More Details](#)

18-29	11
30-39	44
40-49	45
50-59	27
60+	8

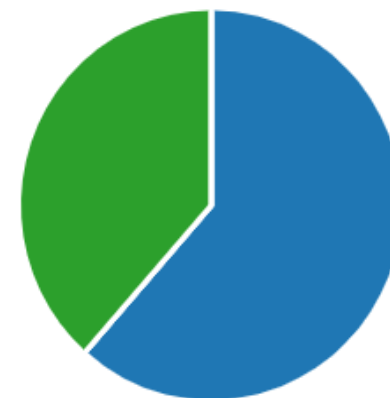


3. Are you a frontline worker? (Direct Contact with clients/public/patients)

[More Details](#)

 **Insights**

Yes (WCGH)	83
Yes (CoCT)	0
Other (WCGH)	52
Other (CoCT)	0

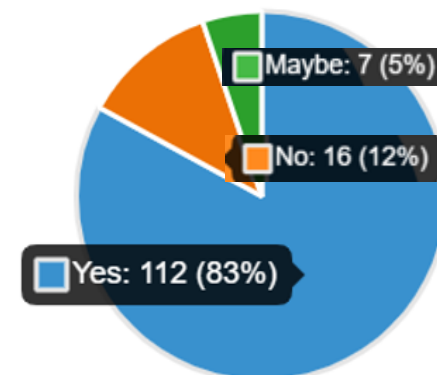


Staff Readiness continued...

4. If you were offered the COVID 19 vaccine would you take it?

[More Details](#)

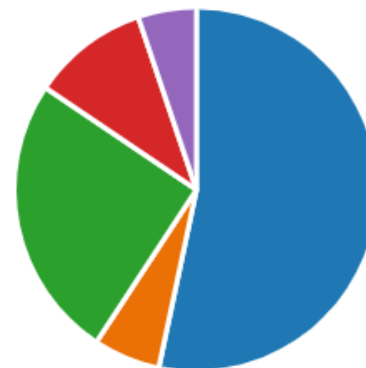
● Yes	112
● No	16
● Maybe	7



5. If you are likely to take the vaccine, which option would you prefer?

[More Details](#)

● Johnson & Johnson (Sisonke)	72
● Pfizer	8
● I dont have a preference and ...	34
● N/A	14
● Other	7



What determined your preference?

Johnson & Johnson (Sisonke)

- Manufactured in SA
- Only 1 shot require
- Best option for current strain
- The President have accepted to be vaccinated so that helped with believing in the vaccine
- Data being presented via Health Communications and news.

Other: Moderna/

- It's more widely trusted internationally

Pfizer

- Research published shows better efficacy against our strain
- The percentage of efficacy of Pfizer is higher than Johnson & Johnson
- Not a trial drug
- Available data and the number of vaccinations already happening across the world using Pfizer

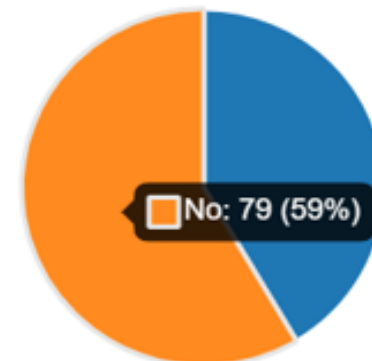
Not specific preference and will accept whichever is offered

- Anything is better than nothing
- Desperate need for any immunity advantage any vaccine can offer
- Scientific evidence

Information about the COVID 19 Vaccine

7. Do you require more information about the COVID 19 vaccine?

[More Details](#)



MORE INFORMATION REQUIRE :

- Data & research information , Efficacy & more data available esp. with regards to variant in SA
- The safety and efficiency information regarding this vaccine
- Side effects
- Information / confirmation that vaccine is safe to use with existing health conditions

Communication COVID-19 vaccine rollout strategy



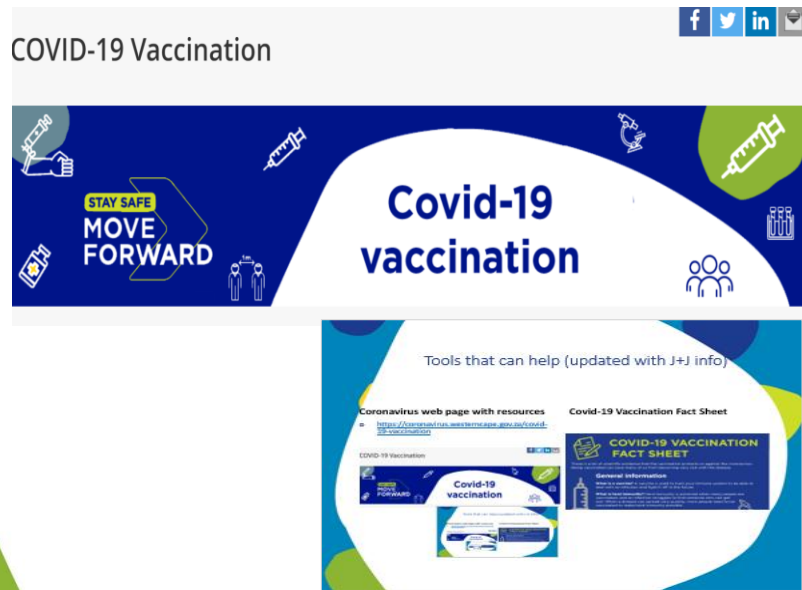
Western Cape
Government

Health

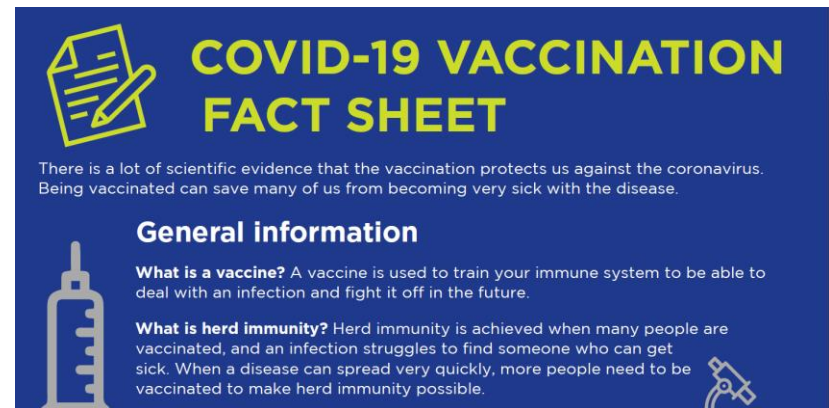
Tools that can help (updated with J+J info)

Coronavirus web page with resources

- <https://coronavirus.westerncape.gov.za/covid-19-vaccination>



Covid-19 Vaccination Fact Sheet



Updated staff comms

Direct staff and public to central point for info

COVID-19 Vaccination Website is LIVE!

Access vital information and resources about COVID-19 vaccination at WCGH to make informed decisions and help stop the spread of misinformation, fear and fake news.

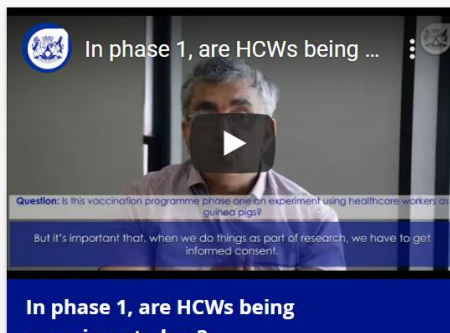
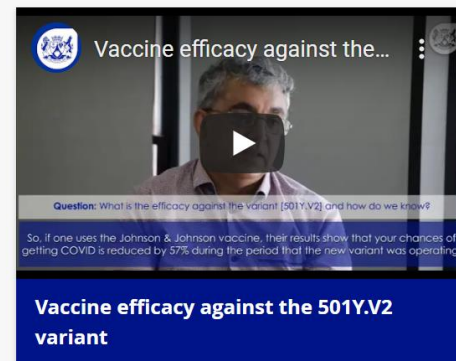
[Visit the site](#)

Get responses to questions relating to the COVID-19 vaccination from public health specialist, Professor Hassan Mahomed, in our latest Q&A video series.

Watch a range of videos from healthcare workers and hear WHY they WILL get VACCINATED.

Please note: this site is updated regularly as content changes arise.

Tools: Q+A on video (16 questions)



Tools: Adding more voices – reasons for vaccination - encouragement



Vaccines help your body fig...

Vaccines help your body fight deadly viruses

Nurse Leonie Muggels from Mitchells Plain Hospital encourages communities and colleagues take the vaccines to protect themselves and their loved ones.



Karel Wildschut getting vac...

Karel Wildschut getting vaccinated abroad.

Karel Wildschut, originally from Macassar and now living in Cambridge, explains the process of getting vaccinated abroad.



Getting vaccinated to boost ...

Getting vaccinated to boost her immune system

Beaunez Coerecius is adamant that she'll get her vaccination against Covid-19 to boost her immune system and protect herself and others against serious disease.



Get the vaccine to save lives



Asekhona protecting those ...



Nosiphiwo Runeli, Kwanokut...

Aligning/adding Sisonke material

Just had the COVID-19 vaccine?

Side effects are common. Here's what to look out for.



Arm is sore or red at the injection site



Fever/chills



Headache



Fatigue



Muscle aches



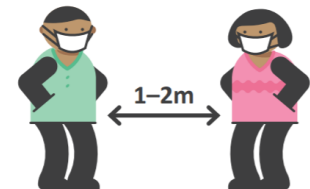
Nausea

- Side effects can start around 6 hours after the vaccine, peak at 24 hours and resolve in 2-3 days.
- If you need to, treat pain and fever with paracetamol.

Allergy is rare
Perhaps you will

Don't forget COVID-19 prevention!

- Wear a mask in public.
- Keep apart from others outside your home as much as possible.
- Avoid crowds and confined spaces – have small gatherings outside.
- As a healthcare worker, continue to wear standard PPE at work.



We are not safe until we are all safe.



Concluding remarks

1. The **2nd wave has subsided** in the Western Cape, with a **clear and consistent** decline in **cases, hospitalisation and deaths**.
2. Our **local teams** remain on **high alert for surveillance & response** to localised clusters, **especially for the vulnerable**.
3. We should remain vigilant and continue to **adhere to protective behaviours to reduce new cases** – while restrictions are lifted in a phased manner, and the **real prospect of a 3rd wave**.
4. Our **health care workers have faced** significant **mental and emotional strain**. We continue an **intentional process** of **grieving and healing**.
5. We are **implementing the roll out of the J+J vaccine** rapidly and will scale this in the coming weeks

Conclusions

Concluding remarks

1. The **2nd wave has subsided** in the Western Cape, with a **clear and consistent** decline in **cases, hospitalisation and deaths**.
2. Our **local teams** remain on **high alert for surveillance & response** to localised clusters, **especially for the vulnerable**.
3. We should remain vigilant and continue to **adhere to protective behaviours to reduce new cases** – while restrictions are lifted in a phased manner, and the **real prospect of a 3rd wave**.
4. Our **health care workers have faced** significant **mental and emotional strain**. We continue an **intentional process** of **grieving and healing**.
5. The **emerging evidence of vaccine efficacy** against **501Y.V2** will impact on **vaccine availability** over the coming months.
6. We should gear up the **implementation of vaccines** as the **key drive against COVID** over the coming months.

Thank you