

Minister Zwelini Mkhize Notes to Media Eastern Cape Coronavirus Response

7 June 2020

Following a Ministerial and Presidential visit to the Western Cape this past week to address South Africa's 65% COVID-19 burden in the province, we now turn our attention to Eastern Cape.

The Eastern Cape has similar numbers to Gauteng but it has recorded the second highest mortality numbers and its proximity and interconnectedness with the Western Cape makes the province especially vulnerable.

In addition there is an increase in infection rate amongst health care workers both in the public and private sectors. As at 6 June the Eastern Cape had recorded 258 COVID-19 positive HCW's and 14 COVID-19 related deaths.

The Minister of Health will be returning to the Eastern Cape later this week whilst the Deputy Minister will go to the Western Cape to continue Ministerial oversight there. We have been engaging the MEC and the DG constantly and we receive daily situation analyses of the Provinces outbreak.

The province is dividing up the hotspots into subdistricts to facilitate a strong community based response. Decentralisation is particularly important for rural areas, to ensure they are adequately capacitated and empowered to successfully manage the epidemic locally. The MEC travelled the length and breadth of the province this past week assessing readiness of facilities in the various districts

On the last Ministerial visit some issues were identified and we intervened in the following:

Acute Shortage of PPE:

On 21 April 2020, Minister Zweli Mkhize, requested that the province be supported by a national team comprising Mr Wayne Ramkrishna (Malaria, Vectorborne and Zoonotic Diseases), Dr Kerrigan McCarthy (NICD), Mr Mzimasi Neti (NICD) and Mr Darren Muganhiri (NICD) On the same day, 21 April 2020, emergency supply was delivered to East London by the national team. A second batch was despatched from National on 22 April 2020 which was couriered to East London.

The team members from the NICD worked with the contact tracing and community screening teams while Mr Ramkrishna worked with the Finance, Clinical Management, Infection Prevention and Control (IPC) as well as the Occupational Health and Safety (OHS) team to assess the PPE needs in the Eastern Cape (EC) province.

A stock audit was done and as at 8 May it was established that there was enough stock for 4 weeks in the province and it was a matter of ensuring the stock was equitably distributed across provinces.

A fast track mechanism was built into the procurement systems and agreement was put in place for more frequent reporting from the stock visibility system (SVS)

A 6 month needs modeling was done and presented to the Premier of the province.

National Department of Health updated its Occupational Health and Infection Prevention and Control guidelines to facilitate rational use of PPE.

Human Resources

20 members of the Cuban Brigade were sent to bolster the response, particularly community based response
840 additional nurses have been employed
We are in constant dialogue with health care workers and their unions on labour issues

Testing Capacity

We are clearing the testing backlog in the various centres:

In Port Elizabeth the backlog has been reduced from 13 000 to 5106, by Monday it should be around 4000 then by next week completely cleared. Heat lysis extraction of RNA has been a key innovation to increase turnover. Another machine is being sent to Port Elizabeth.

Umthatha backlog is currently at 8000 and we expect that to be cleared in the next few weeks as well.

East London is still a challenge because there is no resident pathologist. The Gene- Xpert does not require a pathologist to interpret and so that is what is being used in EL however there has been a shortage of kits. This week central office will be increasing the number of kits being sent to East London. NHLS is also looking into sending other testing modalities that don't require pathologists.

There will be intervention to be more targeted in the testing approach

Interprovincial issues

There are many essential seasonal workers who travel to the Western Cape and back between the provinces.

Both the provinces have been proactive in conducting road side screenings. The Western Cape now has a co-ordinated programme of screening and assessing seasonal travelers before they leave to go home to EC.

The two Premiers have briefed the Minister that Eastern Cape and Western Cape hold regular meetings to discuss ways to better manage the impact of inter-provincial movement to the spread of COVID-19.

For Further Queries

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