



# **NORTH WEST DEPARTMENT OF HEALTH**

## **READINESS TO MANAGE COVID 19 PANDEMIC**

**24 April 2020**



# CONTENT

<b>1. Purpose</b>	<b>5.9. Quarantine facilities</b>
<b>2. Background</b>	<b>5.10. Quarantine admissions</b>
<b>3. SA Response</b>	<b>5.11. Seasonal Influenza</b>
<b>4. NW Response</b>	<b>6. Extended Lock down</b>
<b>5. Progress</b>	<b>7. Surge facilities</b>
<b>5.1. Summary of cases</b>	<b>8. General challenges</b>
<b>5.2. PPEs</b>	<b>9. Remedial Actions</b>
<b>5.3. Hospital Beds</b>	<b>10. Budget</b>
<b>5.4. Hospital admissions</b>	<b>11. Expenditure</b>
<b>5.5. Mass screening</b>	<b>12. Conclusion</b>
<b>5.7. COVID-19 Testing</b>	

# PURPOSE

The intent of this Presentation is to present to the Hon. MEC, progress made by the NWDOH in response to COVID-19, to highlight challenges and recommendations for extended lock down and departmental preparedness to manage under surge situation



# BACKGROUND

- The world community of nations is in the middle of a response to Corona Virus (COVID – 19) pandemic
- Coronaviruses are a family of viruses that cause disease in animals. COVID 19 that changed to a form transmissible from animals to human beings is currently transmitted from human to human (WHO,31Dec 2019)
- This virus is transmitted from person to person through in small droplets from nose and mouth, by direct contact or on surfaces we touch, or when an infected person coughs or sneezes



# BACKGROUND *continued*

- The new virus COVID-19, that originated in China has now spread to more than 180 countries and territories since late January
- The coronavirus pandemic has seen more than 2,900 000 confirmed cases and more that 202 000 deaths worldwide as @ 26 April 2020
- Efforts to prevent this pneumonia- illness, has led to multiple shut downs in many cities, wide spread travel ban and shaken financial markets
- The virus has proven difficult to contain because many who have it, experience mild to no symptoms at all (WHO)

# SA Response

- 15 March , President declared a National State of Disaster in terms of section 23(1)(b) of the Disaster Management Act,2002 (Act No. 57 of 2002)
- 26 March , the President announced a National Lock-Down
- 9 April – Extension of Coronavirus COVID-19 lockdown to the end of April
- The response /Lock Down strategy is made of three parts
  - Intensified public health response to slow down infections
  - Comprehensive package of economic support to assist business and individuals affected by COVID-19 pandemic
  - Increased social support to protect the poor and vulnerable households

# SA Response

- Approach based on three principles
  - Social distancing
  - Restriction of movement
  - Hand washing (stringent basic hygiene)
- The disease progression was slowed down
- SA was commended by WHO

# NW Response

- Disaster Management Centre activated (All Gov Departments , municipalities and COGTA as the lead
- Development of a Provincial Plan
- Implementation of Presidential directives



# NWDoH Response (Disaster Management Plan)

- Provision of PPEs to personnel
- Health promotion, prevention and communication
- COVI-19 screening
- Transporting patients and COVID-19 suspects in appropriate modality to relevant level of care and quarantine facilities
- Quarantine of all eligible persons
- Examinations and laboratory confirmation of COVID-19
- Isolation and treatment of persons
- Surveillance and contact tracing
- Collaboration with all relevant stakeholders
- Monitoring and evaluation





# PROGRESS





# COVID-19 STATISTICS IN RSA

24-04-2020

**Unknown: 0**

**Confirmed cases: 4 220**

**Tests conducted: 152 390**

**Deaths: 79**

Province	Deaths	Recoveries
Eastern Cape	6	19
Free State	5	76
Gauteng	8	843
KwaZulu-Natal	29	241
Limpopo	1	24
Mpumalanga	0	15
North West	0	13
Northern Cape	0	6
Western Cape	30	236





# NORTH WEST PROVINCE COVID-19 STATISTICS

**Total: 28**

**Dr Ruth Segomotsi Mompati  
District Municipality**

**1**

Bloemhof

**Ngaka Modiri Molema  
District Municipality**

**2**

Mahikeng

**Bojanala Platinum  
District Municipality**

**19**

13 Rustenburg  
4 Hartebeespoort  
2 Brits

**Dr Kenneth Kaunda  
District Municipality**

**5**

4 Klerksdorp  
1 Potchefstroom

**Tested: 520**

**Result pending: 86**

**Recovered: 14**

**Critical: 0**

**Deaths: 0**

**Unallocated: 1**

**SUNDAY  
26  
APRIL 2020**



**health**

Department:  
**Health**  
North West Province  
REPUBLIC OF SOUTH AFRICA



North West Department of Health



@NorthWestDOH



# Summary of cases as @ 25 April 2020

DISTRICT	Total Cases	Location	Recoveries Total = 14
<b>Bojanala</b>	22 (19 confirmed) 1 confirmed case unallocated	Rustenburg sub-district = 11 @ Tlhabane, Geelhout and Mooi-nooi(1)  Madibeng= 9 @ Haartebees and Brits  Moretele Sub District = 1 @	11
<b>Dr Keeneth Kaunda</b>	5 cases	Matlosana = 2 Tlokwe = 3	2
<b>Ngaka Modiri Molema</b>	2	Mahikeng =2	1
<b>Dr RSM</b>	1	Vryburg	0



# Health Professionals with COVID-19

NAME	ADDRESS	CELL NUMBER	AGE	OCCUPATION	PLACE OF WORK		No. of Contacts	CURRENT STATUS
					Public	Private		
Ms Karien Oosthuizen	133 Rissik street Potchefstroom or Villa Louw Anne complex Ballie Park Potchefstroom	073 148 8888	26 Yrs	Physiotherapist		Potchefstroom		Diagnosed with mild disease on 24 March. Self-isolated. Now recovered
Dr Gustav Pienaar	48 Monica Avenue Flamwood	082821675 7	51 yrs	Specialist Gynaecologist		Klerksdorp- Anncron		diagnosed on 9 April with mild symptoms, initially treated in Life Anncron hospital and now in-home isolation till 23 April. Asymptomatic now
Dr Arnold Mangala	Flat I4, Mmabatho Palms Hotel, Mmabatho	082784328 7	53yrs	Urologist		Mahikeng - Victoria Hospital		diagnosed on 29 March 2020 On self-isolation at home
Dr Johanna Ellana Landman  (Woks in Gauteng Province)	5 Hawk Eagle drive Xanadu, Hartebeespoort	083410281 8	24 yrs	Medical Intern	Kalafong Hospital – Gauteng Province			Sore throat, cough, malaise, no travel history, but brother in law went to Germany but with no symptoms. Self-isolated and recovered and back on duty in Gauteng province



# Summary of cases

## BOJANALA DISTRICT

<b>1</b>	40 years female had no travel history. In contact with International clients at the United Nations at work. Presented with sore throat , dry cough and shortness of breath and confirmed positive on the 20 March 2020 . Recovered
<b>2</b>	45 years female had no history of travel, no known contact but attended a funeral in Mabopane on the 15th March . Presented with cough, sore throat, chest pain and confirmed positive on the 25 March. Recovered
<b>3</b>	A 24 years female with no travel history, but brother in law went to Germany but with no symptoms. Presented with Sore throat, cough, malaise and confirmed positive on the 21 March 2020. Recovered.
<b>4</b>	A 39 year old female with no travel history, Went to Pretoria university between the 4th to 6th March 2020. Presented with sore throat, dry cough and confirmed positive on the 20 March 2020. Recovered

# Summary of cases

## BOJANALA DISTRICT

5	A 25 year old male had had travelled to Mpumalanga and Gauteng then back to Sibanye mine. Presented with cough and sore throat and confirmed positive on the 25 March 2020. Was clinically unstable and was referred to Klerksdorp hospital on 26 <sup>th</sup> March. Recovered
6	A 40 years old male, an a close contact of a confirmed case of Covid 19 (wife). He is a known hypertensive, presented at his GP complaining of headache and body weakness, no fever, no cough nor difficulty in breathing,. He was admitted for 3 days at Medicare hospital Rustenburg, tests done and among others COVID-19, got better and discharged before getting back the test results. Confirmed COVID-19 on the 25 March 2020. Readmitted . Recovered.
7	71 years old male, tested positive at Lancet in Brits. No additional notes. Recovery test results pending
8	A 29 year old male, had a history of being visited by friends from the Netherlands between 9th to 20th March 2020Presented on the 24th March 2020 with fever, difficulty in breathing, shivers, general body malaise.





# Summary of cases

## BOJANALA DISTRICT

<b>9</b>	A 38 year old male and a known diabetic presented at Tlhabane CHC with Cough, shortness of breath, fever since the 29th March . Had no history of contact with confirmed or suspected case, but employed as Taxi operator, routes include OR Tambo Airport .Confirmed COVID-19 positive on the 08 April 2020. Admitted at Job Shimankana Tabane hospital and transferred to Klerksdorp treatment centre. In ICU. Nine staff members who came into contact with this patient are under quarantine.
<b>10</b>	55 year old male. Presented with sore throat, fatigue, dull headache, chills on and off for a week. Travelled to the US but returned back on the 15th February, but also travelled to Cape Town and was exposed to the Danish tourists when in Cape Town, the weekend of the 8th March . Confirmed COVID-19 on the 25 March 2020. Self Isolated and tested tested negative on 8 <sup>th</sup> April 2020. Recovered
<b>11</b>	A 19 year old female presented with Cough, chills, sore throat, headaches and nausea which started on 21/03/2020. No history of travelling . Tested COVID-19 positive on the 21 March 2020. Under self isolation



# Summary of cases

## BOJANALA DISTRICT

12	A 43 year old female ,presented with persistent cough for 10 days, malaise, no fever, no sore throat. She is a pilot and last flight from Nigeria to SA on the 23rd March. Flights grounded and she moved to a family farmhouse, staying alone. Tested COVID-19 on the 09 April 2020. On self isolation
13	42 year old female. Presented Cough, sore throat, fatigue on and off for 2 weeks plus , wife to confirmed COVID case admitted at Klerksdorp treatment centre. She tried to isolate, but had to take care of husband when he got too sick.
14	A 51 year old male. Works for UN, returned back from Iraq on 11/03/2020, running nose a week after return, no fever
15	45 year old female. She did not travel but was in contact with a confirmed confirmed Covid-19 case who came from USA. She presented with cough, sorethroat, shortness of breath and diarrhoea which started 9 days before consultation.
16	56 year old male. Patient is a pilot at COMAIR, His wife works at at George Mukhari Hospital with two colleagues that tested positive for Covid-19. He presented with fever for 24 hours before consultation.



# Summary of cases in Bojanala

17	67 year old female. Presented with Chest pains, not feeling well, fever, runny stomach x3 days, bloody stools on the following day, Collapsed at Medicross, Known Cardiac patient with history of Triple bypass Surgery, no history of travel or contact, only Brits and Rustenburg for food, Spar, Pick n Pay, Chest pains, not feeling well, fever, runny stomach x3 days, bloody stools on the following day, Collapsed at Medicross, Known Cardiac patient with history of Triple bypass Surgery, no history of travel or contact, only Brits and Rustenburg for food, Spar, Pick n Pay,
18	64 year old male. Asymptomatic, no history of travel outside country nor contact with a confirmed or suspected case. But works for a security company and travelled to other sites regularly and comes into contact with employees
19	41 year old male. Sore throat for 2 days with recurring left shoulder back pain, no history of travelling except shopping before lockdown
20	67 year old female blind patient who presented with Chest pain for 2 days, no history of travel or contact with known case, known hypertensive on Rx. Admitted at Peglarae hospital on 23 April
21	7 year old male. A contact of known Covid-19 positive case (both parents). Was admitted at the Quarantine site, swab taken on 21/04/2020, and results received 24/04/2020, positive. He is asymptomatic
22	Information pending



# Summary of cases

## DR KENNETH KAUNDA

1	A 24 years old German male confirmed positive on the 21 March. Out of the Province. Recovered
5	A 26 years female, a therapist for athletes. Had no travel history. Confirmed positive on 19 March 2020. Was on self isolation. Recovered
3	A 29 year old female. Had an international travel to UK. Presented with dry cough and fever. Confirmed positive on the 03 April 2020. Admitted with mild cough and awaiting recovery test results
4	47 Old male . A Sun city employee . Confirmed positive on the 07 of April 2020. Admitted at Ancron Hospital.



# Summary of cases cont.....

## DR KENNETH KAUNDA

- |          |  |
|----------|--|
| <b>5</b> | A 51 year old male O&G specialist working in three private hospitals. Attended a conference on he 03 March 2020 in Cape Town, Confirmed positive on the 09 April 2020. Presently isolated in Anncron Hospital. |
|----------|--|



# Summary of cases cont.....

NGAKA MODIRI MOLEMA	
1	Travelled Spain, Turkey, France and local transmission. Confirmed COVID-19 positive on the 23 March 2020. Was on self isolation. Recovered
2	A 55 year old Urologist. Confirmed positive on the 29 March 2020.



# Summary of cases cont.....

## DR RUTH SEGOMOTSI MOMPATI

- |   |   |
|---|---|
| 1 | A 21 year old female has a history of contact at Bloemfontein church conference. Was on self isolation in Bloemhof. Violated the isolation rules and went to Free State. Was traced back and isolated for three days in RSM . Recovery test was done and came out positive. The patient was referred and admitted for isolation in Tshepong Hospital. A repeat test was done and still came out positive. A patient is asymptomatic and under self isolation at the farm in |
|---|---|



# Personal Protective Equipments (PPEs)

PPEs	Bojanala	Dr KK	NMM	RSM	TOTAL
Aprons	146 900	552 89	96 900	33 800	332 889
Coveralls	95	173	1 166	215	1 649
Gowns	0	267	280	600	1 147
Sanitizer	241	4 312	3 936	937	9 426
Disinfectant	25 552	32 309	6 275	14 722	78 858
I/Red Therm	23	10	06	14	53
Googled and Visors	320	510	5	133	968
Glove,exam	238 700	234 250	282 750	124 270	879 970
Glove,surg	36 950	159 050	24 225	59 969	280 194
Respiratory,N95	3 115	8 554	14 410	8 277	34 356
Masks	5 750	16 350	3000	6 480	31 570





## Hospital Beds @23/04

Beds	State	Private	Totals
ICU	54	<del>117</del> 135	<del>171</del> 189
High Care	<del>18</del> 19	<del>28</del> 48	<del>46</del> 67
Isolation	294 ( Incl. 15 BPH & WH)	225	519
Hospital Beds	<del>5056</del> 5065 (Incl.1257 of BPH & WH)	<del>1-660</del> 1700	<del>6-716</del> 6765
Ventilators	<del>56</del> 59	74	<del>130</del> 133



# COVID-19 Hospital beds by Districts

District	Standard COVID Beds	High Care beds	ICU Beds	Additional Beds
Dr Kenneth Kaunda	370 395	20 31	29 81	<p>Phase 1 involved creation of extra beds in the following Hospitals:</p> <ul style="list-style-type: none"> <li>JST to convert ward 1 into <b>42</b> 16 ICU/HC beds (70%). Furthermore W13 to be converted into 10 HC beds.</li> <li>Klerksdorp to convert XDR into 20 ICU beds (35%).</li> <li>MPH to convert ward 2 into 12 ICU beds</li> </ul> <p>Phase 2 involves procurement <b>as</b> of additional beds as follows:</p> <p>Wesvaal – 270 – <b>Done facility under Dept</b>  Duff Scott – 100 – <b>Done to activate when needed</b>  Bleskop – 120 – <b>Business plan to be approved</b>  Old Vryburg Hospital, George Stegman Hospital and Gelukspan(1 Ward) Hospital to be converted to isolation facilities( <b>IDTS assessments done</b>)</p>
Bojanala	57	5 25	20 74	
Dr Ruth Segomotsi Mompoti	2 29	4 2	0 6	
Ngaka Modiri Molema	6 22	7 9	6 28 (P23)	
<b>TOTAL</b>	<b>435 503</b>	<b>33 67</b>	<b>55 189</b>	

# Hospital admissions (26<sup>th</sup> April)

District	No. Hospitalised		No. in ICU		No. Recovered		No. of Deaths	
	Private	Public	Private	Public	Private	Public	Private	Public
NMM	0	0	0	0	1	0	0	0
Dr KK	0	1	0	0	1	0	0	0
Bojanala	2	3	0	0	9	2	0	0
DR RSM	0	0	0	0	0	0	0	0
PROV	5		0		13		0	



# MASS SCREENING @ 24 April 2020

INDICATOR	PROVINCE	BOJANALA	Dr KK	Dr RSM	NMM
Community screening	893 608	359 386	221 851	132 668	179 703
Referrals	334	121	26	12	175



# COVID-19 TESTING @ 25 April 2020

DISTRICT	TOTAL NUMBER OF TESTS CONDUCTED	TOTAL NUMBER POSITIVE CASES	Total No. Negative Cases	Results Pending	Comment
NMM	114	2	75	37	Pending Tests are still being processed.
Dr KK	192	5	154	33	
Bojanala	164	19 (22 on record)	131	12	
DR RSM	41	1	36	4	Laboratory capacity increased
Other Tests (District not specified)	9	Nil	9		All 5 Mobile testing vehicles allocated to the province are on-site. No onsite testing yet
Total Provincial	520	28 confirmed 1 confirmed case is unallocated  with 30 on record	405	86	NW COVID-19 Surveillance Tool (NWCST) is implemented and linked to National Database managed by the CSIR.



# Contacts Tracing @ 25 April 2020

District	No. Of Tracers	No. of Contacts identified	No Of Contacts Traced	% traced	Comments
NMM	45	46	46	100%	Performance is fairly well across all the Districts. The Dept. is in process of appointing 500 tracers and getting additional 300 tracers through SA Red Cross Society.
Dr KK	67	132	129	97.7%	
Bojanala	72	300	279	93%	
DR RSM	22	19	19	100%	
PROV	206	<b>497</b>	<b>473</b>	95%	



# QUARANTINE FACILITIES

- The following departments have been working together to identify and prepare quarantine sites and facilities for the homeless:
  - Public Works and Roads
  - Department of Health
  - Department of Social Development
  - Department of Economic Development, Environment, Conservation and Tourism
  - Department of Agriculture and Rural Development
  - Municipalities
- Subsequently the following facilities were identified to be suitable for quarantine and isolation sites for COVID 19 pandemic



# Summary of Quarantine sites

DISTRICT	Total (Both Public and Private)	STATE OF READINESS	NO OF BEDS	NOT READY	COMMENT
Ngaka Modiri Molema	7	5	81 beds	2	One need minor maintenance, water & electricity. Another one has financial issues
Bojanala	7	07	354	0	Royal Marang Resort identified for use by Health Care Workers involved in COVID 19 response
Dr Ruth Segomotsi Mompati	3	2	72	1	No back up generator & Inconsistent water supply.
Dr Kenneth Kauda	5	4	217	1	Under renovation
<b>TOTAL</b>		<b>12</b>	<b>478</b>	<b>4</b>	





# Quarantine facility admissions

Site Name	District	State of readiness	Expected Date of Readiness	No. of Beds	Admissions by 26 April	No. of admissions (cumulative)	No. Discharged
Bakgatla Golden Leopard Resorts)	Bojanala	Ready.		36	23	23	
Kgaswane		Ready		14	0	0	
Manyane Game Lodge Golden Leopard Resorts)		Ready		12	0	0	
Orion Safari Hotel (Private)		Ready		50	4	39	35 (34 tested negative and 1 possitive)
Sundown Range		Ready		90	0	0	
Discipleship		Ready		30	0	0	
Royal Marang		Ready (Free for health professionals nursing COVID-19 pts)		110	0	0	
Mafikeng Hotel School	NMM	Ready		13	13	13	



# Quarantine sites admissions cont....

Site Name		State of readiness	Expected Date of Readiness	No. of Beds	Admissions by 26 April	No. of admissions (cumulative)	No. Discharged
Madikwe River Lodge	NMM	Not ready – Owner stating financial issues	Not known	16	0		
Cookes Lake		Ready		10	11 (3 year child)		
Kobo Segole		Ready		29	29		
Lewatle guest House		Ready		29	2		
Potch Dam	KK	Not Ready (Under Renovation)		114	0		
Clementia lodge		Ready		10	0		
Thaba Tshwene game farm				43	0		
White House guest house				28	0		
Marryland guest house				22	0		



# Quarantine sites admissions cont.....

Site Name	State of readiness	Expected Date of Readiness	No. of Beds	Admissions by 26 April	No. of admissions (cumulative)	No. Discharged
Christiana All Seasons Resort Hotel	Ready		46	28	45	17
Taung Hotel School	Not Ready (No back-up generator Inconsistent water supply)	Not known	33	0	0	
Molopo Inn	Ready		26	17		



# Seasonal influenza

- NWDOH has developed a plan to address the risk posed by the upcoming seasonal influenza.
- Health care workers, people whose immune systems is compromised eg the elderly, pregnant women, people with chronic illness, to get flu vaccine before the start of the winter season.
- 17 000 vaccines received
- Distribution (35% Boj,30%NMM, Dr RSM 20% and 15% Dr KK)
- Additional 10 000 has been ordered



# Seasonal influenza vaccination

District	Quantities received	No. Health Care workers	Areas		
Bojanala		1 140	Kgetleng 187 Koster Hosp 62 Moses Kotane – 260 Moses Kotane Hospital – 100 Madieng – 174 Brits Hospital – 65 Rusternburg sub -36 Moretele- 162 JST – 80 District EMS -14		
Dr KK					



# Seasonal influenza vaccination

District	Quantities received	No. Health Care workers	Areas		
NMM					
Dr RSM					



# Extended Lockdown Plans

- With understanding of COVID-19 pandemic in the Province, there are critical actions that the Department will undertake and that include the following:
- Mass screening and mobile testing targeting all hot spots, high density and rural sub-districts, elderly ,people with disabilities, mining industry including refineries, other government departments and parastatals, school going children
- Provision of cloth masks for All TB patients, public and all referrals
- Work place interventions : Decongestion, rostering of staff, work from home for identified employees, creative technology for virtual meetings

# Surge Facilities

- Because corona can spread rapidly through a population, it can overwhelm even the best resourced health system within a matter of a week
- We need to be prepared for any exponential increase i.e. enough quarantine facilities, hospital beds, ICU beds, ventilators, PPEs and medication for those deserving





# Interventions to address COVID 19 Surge

District	Key interventions			
Bojanala	Increased hospital beds	Increased intensive care facilities	Field/High Volume hospitals	Expansion of quarantine facilities
	120 beds activated for Bleskop hospital  25 bed ward dedicated at each of 3 public hospitals in Bojanala Quarantine sites admissions	45 beds activated at Bleskop hospital 12 Beds activated at JST 40 beds activated at La Femme hosp	Establishment of 300 bed field hospital at JST (Mina Van Der Merwe hall and additional tent) and Ben Marais Hall in Rustenburg CBD	-Activation of quarantine at Bakgatla and Manyane Gate Resorts -Use of Mine hostels at Bleskop, Swartlip, Royal Bafokeng Platinum mine and Impala mines (1200 beds combined)



# Interventions to address COVID 19 surge

District	Key interventions			
Dr Kenneth Kaunda	Increased hospital beds	Increased intensive care facilities	Field/High Volume hospitals	Expansion of quarantine facilities



# Interventions to address COVID 19 surge

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Dr RSM	Increased hospital beds	Increased intensive care facilities	Field/High Volume hospitals	Expansion of quarantine facilities



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Dr RSM	Increased hospital beds	Increased intensive care facilities	Field/High Volume hospitals	Expansion of quarantine facilities



# General Challenges

- Rapidly escalating numbers of COVID-19 cases especially in Bojanala
- Changes in the weather with winter approaching that may intensify the outbreak
- Companies running out of essential supplies
- People not complying to Lock-down
- Lack of specific treatment and vaccine
- Conflicting social and cultural practices that may promote transmission
- Low testing rate



## General Challenges cont.....

- Hospitals not distributing PPEs per District (PHC) needs.  
Disadvantaging PHC
- Some health care workers refusing influenza vaccination

# Remedial Actions

## Strategies for Testing improvement including

- implementation of amended screening tool that has lower threshold for testing
- Intensification of active community screening and testing through yard to yard interventions including all persons in the yard including backyard dwellers.
- Testing of all contacts admitted at quarantine sites
- Intensification of screening and referral for testing at all road blocks
- Structured screening and testing of vulnerable groups such as the elderly at old age homes
- Structured Screening and testing of frontline workers at health facilities and community level
- Consolidation of screening and testing data from large volume sites such as the mining industry in which screening of employees is done twice per day
- Improved testing capacity by NHLS through introduction of new testing techniques using geneXpert technology





# Remedial Actions

- PPEs for PHC to be distributed directly to Sub District pharmaceutical Depots
- Additional private quarantine sites as the need emerge in the absence of space at public facilities



# Additional budget request for emerging needs

Item	details	Estimated cost (rand)
Additional quarantine facilities	Rental of non clinical facilities from private sector and other government departments to provide 5000 additional beds for quarantine	7,000,000
Additional Holding sites	Rental /renovation of unused private hospitals (Wesvaal, Bleskop and Victoria) to provide additional <b>500 holding beds</b>	50,000,000
Additional treatment sites	Resourcing of all five regional and tertiary hospitals to provide <b>300 treatment beds</b>	20,000,000
Additional resources for protectives supplies	Additional resources for protectives supplies including sanitizers, tissues and clean water to communities	100,000,000
Additional transport	Additional 30 stable patient transport vehicles- 1 sedan and 1 fourteen seater (2 per district)	25,000,000
Equipment	Equipping additional identified sites	20,000,000
<b>TOTAL</b>		<b>215,007,000</b>





# Expenditure





# Conclusion





**THANK YOU**  
**FOR YOUR CONTRIBUTION**  
**TOWARDS HEALTH SYSTEM**  
**STRENGTHENING!**

