



health

Department:
Health
REPUBLIC OF SOUTH AFRICA



INTERNAL MEMO – CURRENT CRISIS IN THE SOUTH AFRICAN HEALTH SECTOR

Date:	24 June 2021		
To:	Acting Minister Mmamoloko Kubayi-Ngubane Honourable Acting Minister of Health	From:	Ministerial Advisory Committee (MAC) on COVID-19

**RE: CURRENT CRISIS IN THE SOUTH AFRICAN HEALTH SECTOR RESULTING
FROM THE THIRD WAVE OF SARS-COV-2 INFECTIONS**

Dear Honourable Acting Minister,

The Ministerial Advisory Committee (MAC) on COVID-19 requests an urgent meeting with you to discuss the current crisis in the health sector which has resulted from the third wave of SARS-CoV-2 infections. While this crisis is most acutely felt in Gauteng, other provinces are already under pressure and all will be affected in a short period of time. We face the very real prospect of all provinces being heavily impacted at the same time, with dire consequences for our ability to respond effectively. Overwhelmed health facilities will, inevitably, result in increased numbers of deaths from COVID-19. Urgent, co-ordinated action is thus needed.

The MAC on COVID-19 is sure that you have been well-briefed on the statistics and the trends related to the pandemic that are apparent across South Africa. However, we are concerned that the urgency of the situation is not appreciated, and that the necessary measures have not yet been put into operation to effectively respond to this crisis. Two advisories to this effect were submitted in the past two months, advising on steps to be taken to prepare facilities for and to minimise and mitigate the anticipated third wave in South Africa – the MAC on COVID-19 Third Wave Advisories from 31 March 2021 and 10 June 2021.

To underscore our point, we wish to draw your attention to the following observations from senior clinicians and members of the Medical Advisory Committee at Chris Hani Baragwanath Academic Hospital (CHBAH) in Gauteng:

- CHBAH has experienced a marked increase in patient load as a direct result of the closure of Charlotte Maxeke Johannesburg Academic Hospital (CMJAH). For example, the trauma cases have increased by 30-50%. Waiting times for a bed in the COVID-19 intensive care unit have increased to 48-72 hours. However, the CHBAH budget has not been adjusted and supplies of pharmaceuticals and other consumables are being exhausted. There are serious concerns about the sustainability of supply under these conditions.

- As a result, CHBAH has been unable to implement its planned surge response process of repurposing beds for COVID-19. As the number of COVID-19 patients requiring admission has increased during the third wave, patients have had to be treated in the Accident and Emergency department. These areas are now seeing increasing numbers of acutely ill patients requiring urgent oxygen therapy. As no increase in staffing has been possible, staff fatigue and burnout is unavoidable. For example, critical care staff are having to cover both the non-COVID-19 and COVID-19 Intensive Care Units at CHBAH. Poor clinical outcomes are an inevitable result of this unbearable pressure.
- Further, the Alternative Building Technology (ABT) structure at Jubilee Hospital and CHBAH have been forced to open without proper planning, and without the required support services, such as pharmacy, radiology, operating theatre, and acute admission receiving area. The staffing of the ABT wards is insufficient to manage COVID-19 patients. Nurses from CHBAH are staffing one of the 25-bed wards. Fatigue, burnout, shortage of staff, increased staff: patient ratios and acuity levels are impacting on the quality of care delivered.
- Critically, the staff at CHBAH are concerned that the Gauteng Department of Health has not been communicating openly and honestly with the public about the true status of the public health system at this time. The staff perceive there to be a lack of clear and consistent leadership in the provincial department.

These observations exemplify the level of under-preparedness across the health sector. A similar scenario is being played out in many public and private sector hospitals across Gauteng.

Urgent action is needed to ensure that the national response is commensurate with the level of risk and pressure that is already evident, and is expected to worsen rapidly. In particular, we would recommend that urgent attention is paid to the following issues:

1. Ensuring that a nationally co-ordinated response is enabled, with the involvement of all provincial authorities and the private sector in accordance with the MAC on COVID-19 Third Wave Advisories from 31 March 2021 and 10 June 2021.
2. Mobilisation of additional resources for the health sector, across all spheres of government.
3. Improving and enforcing the quality and timeliness of data sharing on hospital capacity and bed utilisation, including oxygen supply and use, using existing data capturing tools and dashboards. Solutions to increase the human resources required are urgently needed and additional resources are necessary to ensure that accurate data are available in a timely manner. These data should be shared with the public in order to underscore the severity of the situation and the need to comply with all restrictions and non-pharmaceutical interventions.
4. Consideration of enhanced restrictions, in accordance with the MAC on COVID-19 Third Wave Advisories from 31 March 2021 and 10 June 2021.

Continuing the current trajectory will result in preventable deaths. We know this from the second wave, and we also know what needs to be done, now.

Thank you for your consideration of this request.

Kind regards,

The image shows two handwritten signatures in black ink. The signature on the left is 'Koleka Mlisana' and the signature on the right is 'Marian Jacobs'. Both are written in a cursive, flowing style.

PROF KOLEKA MLISANA

PROF MARIAN JACOBS

Co-Chairpersons: Ministerial Advisory Committee on COVID-19

DATE:

CC:

- » **Dr S Buthelezi (Director-General)**
- » **Dr T Pillay (Deputy Director-General)**
- » **Incident Management Team**