



health

Department:
Health
REPUBLIC OF SOUTH AFRICA



Date:	22 July 2021		
To:	Honourable Ms Mmamoloko Kubayi, Acting Minister of Health	From:	Ministerial Advisory Committee (MAC) on COVID-19

EXTENSION OF LEVEL 4 RESTRICTIONS BEYOND 25 JULY 2021

Problem Statement

The Minister of Co-operative Governance and Traditional Affairs declared an adjusted Level 4 level of alert in terms of the Disaster Management Act (Act 57 of 2002) on 27 June 2021 (Government Notice No. 564, Government Gazette No. 44772). Adjusted Level 4 restrictions were imposed from 28 June 2021. The Regulations issued in terms of section 27(2) of the Act were amended by Government Notice No. R565, on the same day. The President initially announced on 27 June 2021 that the enhanced restrictions would be in place for 14 days, and extended that period for a further 14 days on 11 July 2021 (<https://www.gov.za/speeches/president-cyril-ramaphosa-progress-national-effort-contain-coronavirus-covid-19-pandemic-1>). That period therefore ends on Sunday 25 July 2021. On 14 July 2021, amended regulations were issued in Government Notices No.R.612 and R.614, allowing for some gatherings for the purposes of community engagement by various categories of leaders in order to address “emergency matters”.

Task to Committee

The MAC on COVID-19 was asked to advise on the appropriate level of restrictions to be applied from 25 July 2021.

Background

As was stated in the previous MAC advisory, the intention of enhanced Alert Level restrictions is primarily to limit the spread of SARS-CoV-2 by reducing interaction between people and enforcing the implementation of non-pharmaceutical interventions (NPIs), such as mask-wearing. Elements that are addressed in such restrictions include limitations on population movement and gatherings, the imposition of curfews, and restrictions on the sale, dispensing and transportation of alcoholic beverages.

Evidence review

The evidence considered relates to the epidemiological position which pertained at the time that adjusted Level 4 restrictions were initially imposed and then extended, and whether that has changed to such an extent that relaxation of the Alert Level can safely and responsibly be considered. The MAC has reviewed the modelling performed by the South African COVID-19 Modelling Consortium (SACMC). The SACMC National COVID-19 Epi Model (NCEM v5.2) incorporates updated seroprevalence estimates from all available surveys, data on the spread of the Delta variant and vaccine coverage, to model outcomes under five scenarios, differentiated by individual behaviour,

the effects of COVID-19 fatigue, and nationally-directed restrictions. These scenarios are complemented by short-term forecasts of cases, hospitalizations, and wave metrics, updated on a weekly basis to reflect incoming data. Based on the NCEM v5.2 projections and data analysis, the SACMC makes the following observations and forecasts:

1. The immediate situation

- The SARS-CoV-2 Delta variant is likely to be dominant in all provinces, and is not limited to Gauteng (GP). However, it must be noted that robust data on circulating lineages are not available for Free State (FS), Mpumalanga (MP), North West (NW), or Northern Cape (NC).
- All provinces apart from KwaZulu-Natal (KZN) currently meet the definition for being in a wave.
- In KZN, the incidence of COVID-19 was increasing rapidly prior to the outbreak of civil unrest in the province. There has been a substantial impact on testing, and therefore on the reported case numbers in the province. The reported case numbers are likely to be an under-estimate of the true situation. Current estimates of R are therefore not available for KZN. On 1 July 2021, R was estimated to be 1.46 (confidence interval (CI): 1.38 - 1.53), indicating a strongly growing epidemic.
- In GP, the proportion testing positive remains high, but incidence appeared to have peaked prior to the civil unrest in that province. Reported case numbers since the outbreak of civil unrest in the province should be treated with some caution.
- Nonetheless, the proportion testing positive, case incidence, hospitalisations, and deaths have stabilised or declined in many provinces over the past 2 weeks. R is now estimated to be below 1 in most provinces, indicating that their third waves have likely peaked.
- R increased in all provinces during the recent Alert Level 2 intervention, before beginning to decline in late Alert Level 2 or Alert Level 3. In all provinces except NC, which experienced an early resurgence that may have occurred prior to the introduction and spread of the Delta variant, R remained above 1 throughout the imposition of Alert Level 3 restrictions. R in NC appears to be gradually increasing and is currently estimated at 0.98 (CI: 0.88 - 1.23).

2. Short term forecasts (2 week horizon)

- There is a high probability (>70%) that R has recently declined below 1 in the FS, GP, Limpopo (LP), MP, NW, and Western Cape (WC). If it has not already dropped below 1, there is a high probability it will do so in the near future.
- Short-term forecasts indicate that incidence and COVID-19 hospital admissions are increasing gradually in Eastern Cape (EC), but have stabilised in LP, MP, NW and WC, and are likely to decline gradually during the next 2 weeks.
- Hospital admissions remain above Wave 1 and Wave 2 levels in GP and NW, preventing accurate short-term forecasts of hospital admission trajectories in these provinces.
- Although case and hospital admission forecasts are not available for KZN over the next 2 weeks, due to data reliability problems related to unrest in the province, hospital admissions are expected to continue increasing in the province over this time frame.

3. Medium term forecasts (2-6 weeks)

- The effect of responses to behavioural messaging and restrictions on the size of the third wave is likely to be greater in provinces which are still in the earlier phase of that wave.
- Peak daily hospital admissions are projected to be similar to the second wave in most provinces, under strong to moderate response scenarios.
- Hospital admissions are expected to have peaked in GP by mid-July. Hospital admissions are expected to peak in mid-July to early-August in EC, KZN, LP, MP and WC.
- COVID-19 cases and hospital admissions are expected to reduce to low levels across all provinces by September 2021.
- Over the course of Wave 3, total hospital admissions at a national level are likely to be between the values seen in Waves 1 and 2, while deaths (in-hospital and total) may be comparable to or exceed the level seen in Wave 2.

- To date, the model estimates show an appreciable impact of vaccinations on hospital admissions and deaths, emphasizing the need to accelerate implementation of the national vaccination programme.
- Uncertainty in seroprevalence data and the distribution of variants between and within provinces reduces the ability to produce robust projections in some provinces, including projections of potential resurgences. Model projections for FS, NC and NW are therefore preliminary and will be updated as new data become available.
- The increased transmissibility of the Delta variant places greater importance on strong adherence to non-pharmaceutical interventions (NPI) as well as enforcement of restrictions (particularly on gatherings). Model scenarios depict waves of different sizes in each of the provinces, as a result of NPI fatigue. However, even with NPI fatigue, rapid vaccination of the population provides a powerful tool to reduce severe illness and death.

Recommendations

The MAC on COVID-19 recommends that:

- consideration be given to reducing the Alert Level from adjusted Level 4 to Level 3 from 25 July 2021, including lifting the restrictions on non-essential travel into and out of GP;
- strict adherence to NPI be emphasized and actively enforced;
- careful attention be paid to the appropriate limitation of mass gatherings, as outlined in Government Notice No. R.614; and
- hospital capacity and resources be carefully monitored in all provinces;
- continued efforts to ensure rapid access to and acceptance of COVID-19 vaccination be emphasized.

As before, the MAC on COVID-19 recommends close scrutiny of the social and economic impact of COVID-related restrictions. Where such restrictions are seen not to have the desired or expected impact, or where unintended consequences are identified, remedial action is needed. This is particularly true of restrictions which limit economic activity and may contribute to worsening of unemployment or reduced income.

Rationale for recommendation

The MAC on COVID-19 has based its core recommendation that consideration be given to reducing the Alert Level on the following rationale:

- case incidence is estimated to have peaked and R is currently estimated to be below 1 in most provinces, excluding KZN;
- easing restrictions may result in a slower decline in incidence than otherwise might have occurred, but it is unlikely that easing restrictions to Alert Level 3 would result in R increasing above 1 nationally or in many provinces;
- the impact on R of the increased transmissibility of Delta is likely to be substantially larger than the reduction in transmissibility provided by continued Alert Level 4 restrictions;
- nonetheless, provinces with estimated R values close to 1 (NC, FS, MP, WC) may see resurgences as a result of easing restrictions; and
- test positivity and the risk of transmission remain high.

Accordingly, rigorous adherence to NPIs must be maintained and monitored, and increasing vaccine uptake across all eligible groups remains a key priority.

Thank you for consideration of this advisory.

Kind regards,



PROF KOLEKA MLISANA



PROF MARIAN JACOBS

CO-CHAIRPERSONS: MINISTERIAL ADVISORY COMMITTEE ON COVID-19

DATE: 22 July 2021

CC:

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