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Statement of the Minister of Health Launch of Mobile Laboratories National Health Laboratory Services 1 April 2020

Let me start by conveying our deepest shock and sadness at the loss of Professor Gita Ramjee, one of our top vaccine research scientist and an HIV prevention research leader. She had returned from London a week ago but reportedly showed no symptoms of COVID-19 initially. We convey our condolences to her family, loved ones and colleagues- this is indeed a great loss for the South African academic community.

As at today, the total confirmed COVID-19 cases are at 1380. This is an increase of 27 cases from yesterday's announcement:

The Provincial breakdown is as follows:

Province	Number of Cases
Gauteng	645
Western Cape	326
KwaZulu Natal	186
Free State	76
North West	9
Northern Cape	7
Eastern Cape	15
Mpumalanga	12
Limpopo	14
Unallocated	90

To date 44292 people have been tested largely in private laboratories. A total of 47541 tests have been completed, of which about 6000 were performed in the public National Health Laboratory Service

This is way too few considering the size of our population and other important factors such as inequality, poverty and underlying disease burden we have.

The President has approved a “COVID Home Visits Program”, of mass community-based screening, referral for clinic testing, quarantine of suspected cases and appropriate care for COVID-19 patients.

The program includes the deployment of Community Health Care Workers to the field for door-to-door household screening. Each province has been requested to start working on this strategy, by deploying provincial community health care workers with, appropriate Personal Protective Equipment, to undertake a house-to-house programme of “no-touch” screening for COVID-19 symptoms and to refer symptomatic people to clinics for testing.

In addition, PEPFAR- funded *District Support Partners* to support provinces in this Program have been availed.

The CSIR and Right to Care have assisted us in mapping the most vulnerable populations- through this process 993 strategic priority wards were identified using the social vulnerability index.

We take this opportunity to thank these partners for joining us in the war against COVID-19.

Tonight, a list of priority districts will be finalized by MECs in a teleconference.

LAUNCH OF MOBILE TESTING UNITS

To ensure there is adequate capacity to test citizens being screened, the NHLS has procured 60 mobile vans, in addition to the 7 currently deployed to provinces, totaling 67 mobile testing units.

Today, we are here to launch these mobile laboratories that will be deployed across the country to all districts and metropolitan municipalities.

At this stage, the focus will be on collecting nasopharyngeal specimens for PCR tests or GeneXpert testing. The current capacity is 5000 tests in 24 hours in 10 laboratories countrywide- when we reach full capacity we will be able to process 30 000 tests per 24 hours.

Rapid antibody tests have been used in many countries throughout the world and we are aware that there is interest in using these tests in South Africa. Our authorities are working round the clock to assess the efficacy of these tests in our context with the aim to make them available for future application.

MESSAGE TO MECS

This morning I sent a per my personal message MECs as colleagues and leaders in this fight to save our nation from probably the most devastating enemy that has ravaged many nations and destroyed many lives in recent times

I send this note as a way to encourage them all to be strong in the face of what may become the worst challenge our country may face for generations. I believe that if we are focused and united we can collectively defeat COVID 19.

We have seen a slower growth of COVID 19 positive cases in the past few days

I ascribe this to several factors:

Firstly we closed borders and reduced importation of infection

Secondly, enforcing quarantine of the inbound travelers and returning citizens has slowed down the infection from the traveling community to a resident community

Thirdly the lockdown slowed internal transmission by reducing the risk of spread through large gatherings and overcrowded transport routes in trains buses and taxis

However there are areas we must be alert to.

We need more vigilance now than ever before

Internal transmission has started and it may have tendency to spread silently as people with less means and slight symptoms may be slow to seek medical help as they are few and far apart initially.

Our testing criteria of patients with symptoms is currently reactive and restrictive

By and large, people with access to private family practitioners have tested- most of whom had history of travel to epicenters in western capitals and are easy to suspect if they develop symptoms

This means we don't yet have a true picture of the size of the problem

We need to test hundreds of thousands of the population to get a better picture to refine our containment strategy

The lockdown may have had the inadvertent effect of limiting access to health facilities for those who depend on public health services in poor and densely populated and underserved communities because of transport difficulties

This means that the release of a lockdown may have a huge rebound effect of releasing every constraint that made the infection slowdown and we may have a runaway train with no way to apply brakes

We need to engage all community leaders and call for volunteers in community and civil society formations to support the campaign, spread the message and teach our people to take the containment measures seriously and support all affected individuals and families.

The message of stay at home and importance of hygiene must be made more emphatically. The message must be that COVID-19 is serious but can be defeated and we need each person to make this a personal fight to save the nation.

Those on antiretroviral treatment and other chronic ailments must stick strictly to their medication.

Each person's actions will count

Let us break the chain of the coronavirus infection.

Next month the flu season starts, thus making more people sick with similar symptoms, and therefore no way of distinguishing common colds from an upsurge of COVID-19 infection

These will flood our clinics and hospitals and create fertile ground for Coronavirus to spread or be masked in its presentation.

This means what we may currently be experiencing is the calm before a heavy and devastating storm.

There will therefore be no further warning before the pounding descends upon us.

There will not be time to prepare what we will not have put in place in the next seven days

My plea to all my colleagues was to move with speed on the following:

1) Setting up of mobile units of health workers to move into communities with cases or contacts and set up testing and screening in communities initially starting with the symptomatic and then extending to the greater community.

We will now procure rapid test kits, taking into account any of the flaws anyone may point out. We will roll out testing and surveillance and start isolation treatment of patients and quarantine of contacts at an accelerated pace

This means we will go out look for and find patients and not wait for them in hospital.

We will focus on dismantling the infection cycle by proactive action, rather than a reactive approach adopted up to now. We now combine the offensive strategy with the current defensive strategy used up to now .

There must be clearly defined targets at district and sub district levels structures with a clear short command line led by experienced professionals who can take clinical decisions quickly and act on the spot

2) We need to procure additional beds and dedicated treatment Centres where only COVID 19 patients will be treated in every town

Where necessary we will find treatment centers and places to treat near communities where the burden of infection is high

3) More quarantine beds must be identified with clear lines of control and food supplies as well as monitoring of temperatures daily, beginning with areas where the disease has been detected already.

4) Health professionals must be earmarked for release to focus on COVID 19 when the storm hits us.

We are requesting reinforcements from countries such as Cuba and China via WHO and these should be expected from next week. They must find our machinery well organized to reinforce effectively

5) Encourage the release from hospitals of those patients that can be managed as outpatients and reduce hospital patient load and risk of cross infections

6) Every institution, that is hospitals or clinics, must do daily reports of suspected or confirmed COVID-19 cases and take necessary steps to protect staff and patients and prevention of further spread

7) All treatment and PPE requirements must be stocked for several weeks of supplies. National Department of Health and Provincial Departments must assess areas where interventions are necessary to prepare for heavy loads of patients from end of this week

Protective gear must be available for all health workers and every staff member must be taught to suspect infection and prevent spread and protect themselves

8) Gauteng, Western Cape, KwaZulu Natal and Free State must prepare dedicated capacity for additional hospital beds for COVID 19 and report progress every week

Based on personal observations the pounding of COVID 19 has started and it will intensify from this week and we may see rising mortality rates. We are losing families friends colleagues community members health and other professionals across all age groups

We will look at scientific models when these are ready but we now have enough evidence to indicate that unless we move fast we will soon be swarmed.

We no longer have time

We need to be strong focused and courageous

We need to be decisive in our actions. We need to escalate our response to a higher level

I appealed for a focus on implementation and less on arguments and debates

There can never be a perfect plan in a battle. Ground experience will refine our actions. Academic debates have their place but during this ground offensive we will entertain advices that refine and improve our effectiveness.

The country's future will depend on our swift coordinated actions

END