



Wes-Kaapse Provinsiale Parlement Western Cape Provincial Parliament IPalamente yePhondo leNtshona Koloni

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Report 11/ 2021

Ref: Health Update and Provincial Treasury on the vaccine/'Adjusted' Alert Level 3 lockdown

Report of the Ad Hoc Committee on COVID-19, in performing oversight over the work of the provincial executive authority as it responds to the COVID-19 pandemic, including oversight over any part of the provincial executive authority, any provincial department, any organ of state and any provincial entity involved in activities dealing with the pandemic, on the themes/meetings covered for February 2021, as follows:

The Ad Hoc Committee on COVID-19 consists of the following members:

Mr R Allen (DA)
Mr D America (DA)
Ms D Baartman (DA)
Mr G Bosman (DA)
Mr F Christians (ACDP)
Mr C Dugmore (ANC)
Mr B Herron (GOOD)
Ms P Lekker (ANC)
Mr P Marais (FFP)
Mr D Mitchell (DA)
Ms W Philander (DA)
Mr A van der Westhuizen (DA)
Ms M Wenger (DA) (Chairperson)
Ms R Windvogel (ANC)
Mr M Xego (EFF)

Alternative Members:

Ms L Botha (DA)
Mr R MacKenzie (DA)
Ms M Maseko (DA)
Ms N Nkondlo (ANC)
Mr K Sayed (ANC)
Mr D Smith (ANC)

Procedural Staff:

Ms W Hassen-Moosa, Procedural Officer
Ms S Jones, Procedural Officer
Ms B Daza, Senior Procedural Officer
Mr M Sassman, Manager: Committees

1. Introduction and Background

The Ad Hoc Committee on COVID-19 (the Committee) was established by the Speaker of the Western Cape Provincial Parliament on 14 April 2020 in accordance with Standing Rule 119(1) (b) of the Standing Rules of Western Cape Provincial Parliament. The Committee was tasked with the responsibility to perform oversight over the work of the provincial executive authority as it responds to the COVID-19 pandemic, including oversight over any part of the provincial executive authority, any provincial department, any organ of state and any provincial entity involved in activities dealing with the pandemic.

The meetings have been held virtually, so as to comply with COVID-19 lockdown regulations issued by National Government, as well as a decision of the Programming Authority, to enforce social distancing rules.

2. Election of Chairperson, Adopted Themes and the Rules of Engagement

On 17 April 2020, Member M Wenger (DA) was elected to serve as the Chairperson of the Committee in accordance with Standing Rules 82(1) and 85. The Committee adopted 12 themes around which it would address the COVID-19 pandemic. The 12 adopted themes were as follows:

1. Health Department Responses and Preparations
2. Policing, Security and Police Brutality
3. Food Security
4. Protection of the Vulnerable
5. Disaster Management and Local Government Oversight
6. Economic Recovery, Support and Livelihoods
7. Transport and Infrastructure
8. Schooling and Education
9. Human Settlements
10. Citizen Surveillance
11. Intergovernmental Relations and Community Cooperation
12. Government Finance and Budgets

3. Additionally, the Rules of Engagement during virtual meetings were indicated as follows:

1. All meetings would be open to members of the public and media via livestreaming;
2. All Members microphones must be muted at the beginning of the meeting to avoid background noise;
3. Members are to flag Points of Order in the Chat Function of Microsoft Teams (the application through which virtual meetings are held);
4. All videos and audio must be switched off to improve the quality of the connection; however, if a Member/Minister/HOD/Official is speaking, they may put on their audio and video;
5. Participants must switch off their microphones once they are finished speaking;
6. In terms of maintenance of order, in accordance with the "Directives for Sitzings of the House and Meetings of Committees by Electronic Means", ATC'd on Friday, 17 April 2020, Section 8 states that "when a Member is considered to be out of order by the presiding officer, the presiding officer may mute the microphone of such a Member and call such a Member to order"; and
7. Section 10 of the Directives ATC'd on 17 April 2020 speaks to the application of Standing Rules. Section 10 states that "in instances where these directives are not clear or do not cover a particular eventuality in respect of sittings of the House or meetings of the

committees by means of videoconferencing, the Standing Rules must apply as far as this is reasonably and practically possible and, in instances where they cannot be applied, the ruling by the presiding officer must be final”.

4. The themes/meetings covered in February 2021 included:

4.1 Health Department Responses and Preparations

A general update by the provincial Department of Health on the COVID-19 virus development and indicators, as well as vaccine planning, focusing on the following:

- The receipt of the vaccine in all phases;
- The numbers and types of vaccines expected for the Province;
- The roll out planning of the vaccine; and
- The possibility of a generic vaccine being developed and whether the country would be able to acquire it (stand-over question from previous meeting).

4.2 Government Finance and Budgets

Briefing by the Minister of Finance and Economic Opportunities and the Provincial Treasury on funding for the vaccine.

5. THEMES: Health Update, ‘Adjusted’ Alert Level 3 lockdown and rollout of the vaccine

5.1 Overview and background

The Committee requested a briefing from the provincial Minister of Health and the provincial Department of Health on an update on the COVID-19 pandemic in the Western Cape, on 03 February 2021.

The purpose of the meeting was to receive information on the situational analysis of the pandemic in the Province in the light of the second wave of the COVID-19 virus in the Western Cape Province, including information in respect of the vaccine planning, focusing on the receipt of the vaccine in all phases; the numbers and types of vaccine expected for the Western Cape; the roll out planning of the vaccine, the possibility of a generic vaccine being developed and whether the country would be able to acquire it.

5.2. Briefing by the provincial Minister of Health and the Head of the Department of Health

Observations and challenges

5.2.1 The Minister of Health, Dr N Mbombo, informed the Committee that the briefing would cover the receipt of the vaccines in all phases, the vaccine roll out planning, the possibility of new vaccines that are being developed, the acquisition of vaccines, as well as the roll out prioritisation. One million vaccine doses had already arrived and a further 500,000 would be arriving at the end of March 2021. Those doses were purchased by the national Department of Health and National Treasury from the Serum Institute of India and Oxford University which is better known as “COVISHIELD” by their developers that will be utilised in the first phase.

5.2.2. The Phase I of the vaccine roll out will be primarily targeting healthcare workers in both the public and private sectors—those on the Personnel and Salary Administration System (PERSAL) employed by provinces; those who were not on PERSAL but are working for the Department of Health in the public sector; as well as workers appointed by the City of Cape Town. The Minister

stated that nursing students fall under part of the “other” category with community care workers and traditional health practitioners.

- 5.2.3. Minister Mbombo, informed the Committee that the vaccines consisted of two doses. Currently there are 702 000 health workers in South Africa of which 133 000 are in the Western Cape. These figures assisted in determining the total number of doses needed for the first phase.
- 5.2.4. Minister Mbombo noted that a vaccine reduces the chances of infection, transmission and death. Thus, it protects the health system overall. She urged everyone to adhere to health protocols and discouraged people from attending huge gatherings such as churches and restaurants.

Health update

- 5.2.5. Dr Cloete provided the Committee with an update on the COVID-19 virus development and indicators, as well as vaccine planning.
- 5.2.6. Dr Keith Cloete informed the Committee that the province had already passed the peak of the second wave and now shows a decline in the number of daily infected cases. Places like Caledon had almost no active coronavirus cases and the Garden Route is also showing a declining trend.
- 5.2.7. Various data was presented to show the province’s COVID-19 response. These included hospital admissions by area (currently 2 330 COVID-19 patients in acute hospitals) (1 398 in public hospitals and 932 in private hospitals), and utilisation per drainage area, and the total bulk oxygen consumption had been reduced to around 31.41 tons daily when compared to 51 tons daily in the first week of January.
- 5.2.8. Dr Cloete outlined the Department’s plan to assist and safe-guard the wellbeing of healthcare workers.
- 5.2.9. The detailed vaccine implementation plan was provided to the Committee. Dr Cloete explained that herd immunity, or population immunity, would only be achieved if more than 70%-80% of the population were immunised.
- 5.2.10. Details on the various types of vaccines with their efficacy results were provided to Members. Dr Cloete said that Johnson & Johnson was the only vaccine that had a local manufacturer - Aspen in Gqeberha. Information on the development of the vaccine was provided to the Committee and it was believed that the vaccine would work against the new variant 501.V2. The goal is to vaccinate 40 million South Africans.
- 5.2.11. Current vaccines distribution as at 1 Feb - 98 million doses given with the following breakdown:
- Pfizer/BioNTech vaccine - 117,000 doses with delivery beginning as of mid-February with total doses that are for the Q1 supply- based on conditions: indemnity, regulatory; and
 - AstraZeneca / SKBio (2,976,000 - 5,028,000) doses. Delivery as of mid/late February, subject to WHO EUL. Indicates H1 supply, with 25-35% available in Q1 and 65-75% available in Q2 - based on conditions: indemnity, regulatory
- 5.2.12. The Department has developed an Implementation Framework for the roll-out programme – which will be posted on the WCG: Health website. The plan is to officially start on 15 February 2021.
- 5.2.13. Phase I would include Health Care Workers (Public and Private Health Sectors; Care Workers; CHWs; Health Science students; Traditional Healers), estimated target is 133 000.
- 5.2.14. Phase II would include Essential Workers (Clients in congregate settings; Older than 60 Years; Older than 18 years with Co-morbidities, estimated target 2 million.
- 5.2.15. Phase III would include Older than 18 years and the estimated target is 2, 9 million.

6. THEMES: Provincial Treasury on the funding for the vaccines

6.1. Overview and background

The Committee requested a briefing from the Minister of Finance and Economic Opportunities and the Provincial Treasury on the funding for the vaccines on 3 February 2021.

6.2. Briefing by the Minister of Finance and the Provincial Treasury on funding for the vaccine.

Observations and challenges

- 6.2.1. The Minister Finance and Economic Opportunities, Mr D Maynier, acknowledged the challenging task that lies ahead for the Provincial Treasury in the vaccines roll out. He informed the Committee that the rough cost estimate for vaccination in the province amounted to R1.7 billion. Ensuring sufficient funding for vaccines is the top priority for treasury at the moment.
- 6.2.2. The Minister stated that currently there is significant uncertainty around the demand and supply forecasting of vaccines as well as the finance options available. The Provincial Treasury is in conversation with the National Treasury at the technical level and is waiting for further information on the financing of the vaccine roll out. He added that the Provincial Treasury was concerned that the national government may not allocate sufficient funding to the province. So Provincial Treasury is proactively exploring other available options such as budget reprioritisation, utilising provincial reserve and mobilising the private sector for resources. Once the budget process at both the national and the provincial levels has been concluded, more information around the financing of the vaccines will become available.
- 6.2.3. Mr D Savage, the Head of Department for Provincial Treasury, informed the Committee that this COVID-19 vaccination is an unprecedented exercise. He reminded the Committee of the confined fiscal environment at large. There is significant budget reduction driven by the new national strategy for the public sector's compensation and non-compensation expenditure.
- 6.2.4. Dr Roy Havemann, Deputy Director-General: Fiscal and Economic Services for Provincial Treasury, briefed the Committee on the cost of vaccines. At the moment, a single dose is estimated at R2.33 and this amount doubles for a two-dose vaccines. R231 is the estimated administrative cost per person related to the vaccines. He stated that each item will be carefully calculated by the treasury and there is a specific methodology in place in the rolling out of vaccines. There are also upfront payments such as building vaccination centres. All these made it crucial for provincial treasury to ensure that there would be sufficient budget to cover the 5.1 million people across sectors in the province. The current estimated cost for the entire vaccine roll out was between R1.2 to R1.7 billion. The Department is also reviewing methods to recoup some of the costs, such as utilising medical aid, etc. He assured the Committee that the provincial treasury is working closely with the national government to ensure that sufficient budget is available for the vaccine roll out. In addition, provincial treasury is also monitoring the types of vaccine arriving in the country.

7. Acknowledgements

The Chairperson thanked the provincial Department of Health and the Provincial Treasury for its hard work in the sector so far during the COVID-19 pandemic. The Chairperson also thanked the Members for their participation in the meetings held so far.



MS M WENGER (MPP)

CHAIRPERSON OF THE AD-HOC COMMITTEE ON COVID-19

DATE: 4 March 2021