# NATIONAL ASSEMBLY

**FOR WRITTEN REPLY**

**QUESTION NO. 1128**

**DATE OF PUBLICATION IN INTERNAL QUESTION PAPER: 05 JUNE 2020**

**(INTERNAL QUESTION PAPER NO. 19)**

**Ms R N Komane (EFF) to ask the Minister of Health:**

With reference to the admission by The Presidency that information regarding Covid‑19 was intentionally withheld from the public stating managing of panic as a reason to do so, (a) which information in particular was kept away from the public, (b) how has and/or will this affect public response to lockdown regulations and (c) what is the true status of hospitals in handling the pandemic?

###### NW1430E

**REPLY:**

1. We cannot respond specifically on this question as it is a matter that was relating to The Presidency. It is best that this question is addressed to The Presidency;
2. As indicated above it is not clear what information The Presidency was referring to therefore we cannot provide more details in this regard;
3. The details are as follows:
4. The Modelling consortium Incident Management Team has developed detailed projections and recommendations of the hospital requirements in all provinces including isolation beds, general beds and critical care beds;
5. A National Hospital Readiness Task Team has been established comprising of clinicians, disaster management experts and experienced hospital managers. The role of this team is to provide guidance and support to the provinces on all aspects of hospital readiness;
6. The Department has developed a surge strategy, which guides the provinces in various areas of health system support. The strategy also includes guidance on the management of the various categories of the covid-19 patients. Alongside this strategy, a detailed guidance has already been provided to all hospitals on all aspects of hospital readiness including in the form of Action Plans. Ten of these plans have already been provided to the hospitals covering: Preparation, Area allocation, Command and Control, Bed Statistics, Safety, Communication, Assessment, Decontamination, Surge capacity and Triage;
7. All hospitals have been provided with an on-line assessment of readiness including: equipment requirements, oxygen requirements, operational management, case management, infection prevention and control, human resources, infrastructure, medicines, linen, supply chain and support services;
8. Hospitals have been provided with detailed clinical guidelines for the clinical management of patients;
9. Ventilators that were donated by the US Government have been distributed to hospitals in Gauteng, Western Cape and Eastern Cape Provinces;
10. All provinces have developed and have started implementing detailed hospital readiness strategies;
11. The bed allocation for the covid-19 response is as follows:

* General beds = 12 029;
* High Critical Beds = 2 309;
* High care beds = 13 129.

END.