

COVID-19 SENTINEL HOSPITAL SURVEILLANCE UPDATE



NATIONAL INSTITUTE FOR
COMMUNICABLE DISEASES

Division of the National Health Laboratory Service

SOUTH AFRICA WEEK 53 2020

OVERVIEW

This report summarises data of COVID-19 cases admitted to DATCOV hospital surveillance sites in all provinces. The report is based on data collected from 5 March 2020 to 2 January 2021.

HIGHLIGHTS

- As of 2 January 2021, 147,308 COVID-19 admissions and 26,143 deaths were reported from 625 facilities (375 public-sector and 250 private-sector) in all nine provinces of South Africa. DATCOV coverage is 100% of public and private hospitals that have had COVID-19 admissions. New hospitals that have enrolled continue to capture historical admissions.
- There has been a resurgence in admissions in all provinces. The weekly admissions and deaths in the second wave have exceeded the numbers at the peak of the first wave in Eastern Cape, Western Cape, KwaZulu-Natal and Limpopo. Between week 52 and week 53, the number of COVID-19 admissions increased in five provinces, Free State, Gauteng, Limpopo, North West and Western Cape. Decreases in the most recent week may reflect delays in data submission particularly over the New Year's long weekend.
- The resurgence in admissions in Eastern Cape started in week 40; a decrease has been observed in Nelson Mandela Bay Metro since week 47 and in Sarah Baartman since week 48. The resurgence in admissions started in Western Cape in week 43; a decrease has been observed since week 49 in Garden Route.
- The resurgence in admissions started in KwaZulu-Natal in week 46; in Gauteng in week 48; with increased admissions observed in Free State, Limpopo, Mpumalanga and North West and in Northern Cape starting in week 48 and 49.

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METHODS

DATCOV, a hospital surveillance system for COVID-19 admissions, was initiated on the 1 April 2020. A COVID-19 case was defined as a person with a positive reverse transcriptase polymerase chain reaction (RT-PCR) assay for SARS-CoV-2 who was admitted to a DATCOV sentinel hospital. Case fatality ratio (CFR) was calculated for all closed cases, i.e. COVID-19 deaths divided by COVID-19 deaths plus COVID-19 discharges, excluding individuals who are still admitted in hospital. For the calculation of cumulative incidence risks, StatsSA mid-year population estimates for 2020 were utilised.

Data are submitted by public and private hospitals that have agreed to report COVID-19 admissions through DATCOV surveillance in all nine provinces of South Africa. On 15 July 2020, the National Health Council decided that all hospitals should report to DATCOV. As of 2 January 2021, a total of 625 facilities submitted data on hospitalised COVID-19 cases, 375 from public sector and 250 from private sector (Table 1). This reflects 100% coverage of all public and private hospitals that have had COVID-19 admissions. As new hospitals join the surveillance system, they have retrospectively captured all admissions recorded although there may be some backlogs in retrospective data capture.

Table 1. Number of hospitals reporting data on COVID-19 admissions by province and sector, South Africa, 5 March 2020-2 January 2021

Name of province	Public Sector	Private Sector
Eastern Cape	84	18
Free State	35	20
Gauteng	38	90
KwaZulu-Natal	62	45
Limpopo	41	7
Mpumalanga	28	9
North West	13	12
Northern Cape	16	8
Western Cape	58	41
South Africa	375	250

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RESULTS

Epidemiological and geographic trends in admissions

From 5 March 2020 to 2 January 2021, a total of 147,308 COVID-19 admissions were reported from 625 facilities in all nine provinces of South Africa. There has been a resurgence in both public and private sector since week 40; the weekly numbers of admissions have surpassed the numbers during the peak of the first wave in both sectors (Figure 1). Decreases in the most recent week may reflect delays in data submission.

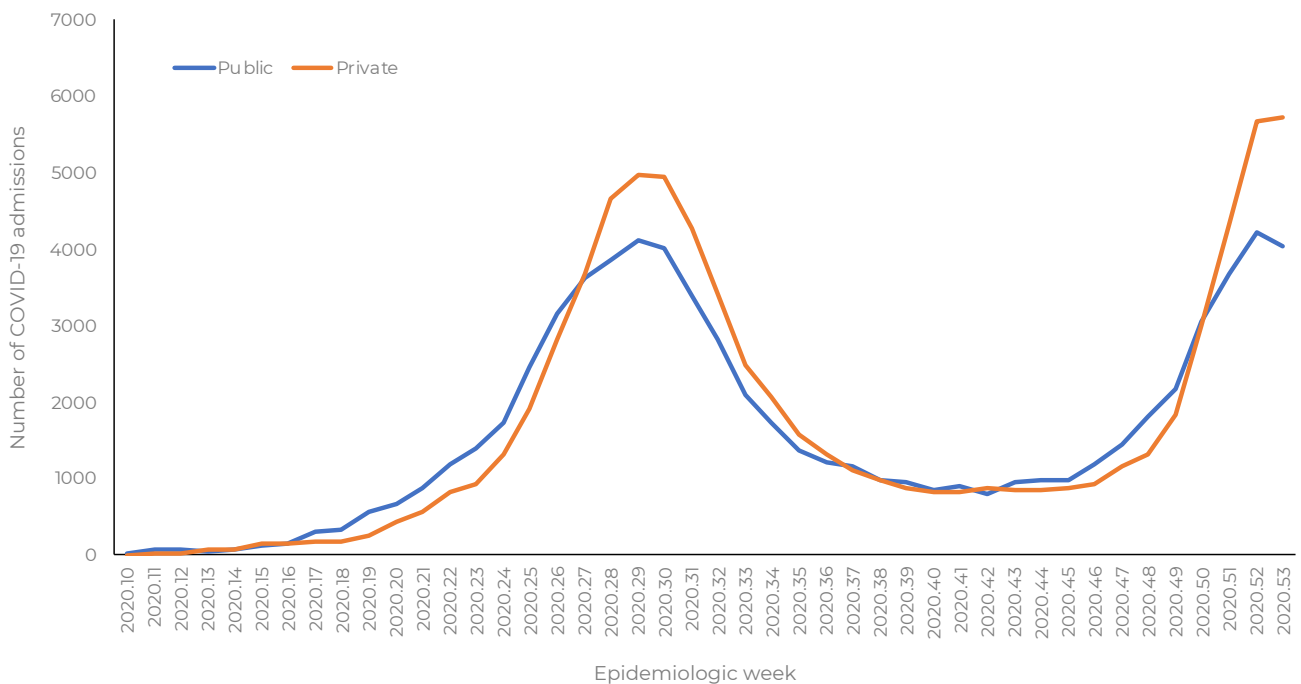


Figure 1. Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, South Africa, 5 March 2020–2 January 2021, n=147,308

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The majority of admissions were recorded in four provinces, Gauteng, Western Cape, Eastern Cape and KwaZulu-Natal provinces. Admissions have increased in Eastern Cape since week 40 (now decreasing), Western Cape since week 43, KwaZulu-Natal since week 46, Gauteng since week 48 and all other provinces since week 48 or 49 (Figure 2). The weekly numbers of admissions in Eastern Cape, Western Cape, KwaZulu-Natal and Limpopo have surpassed the numbers during the peak of the first wave.

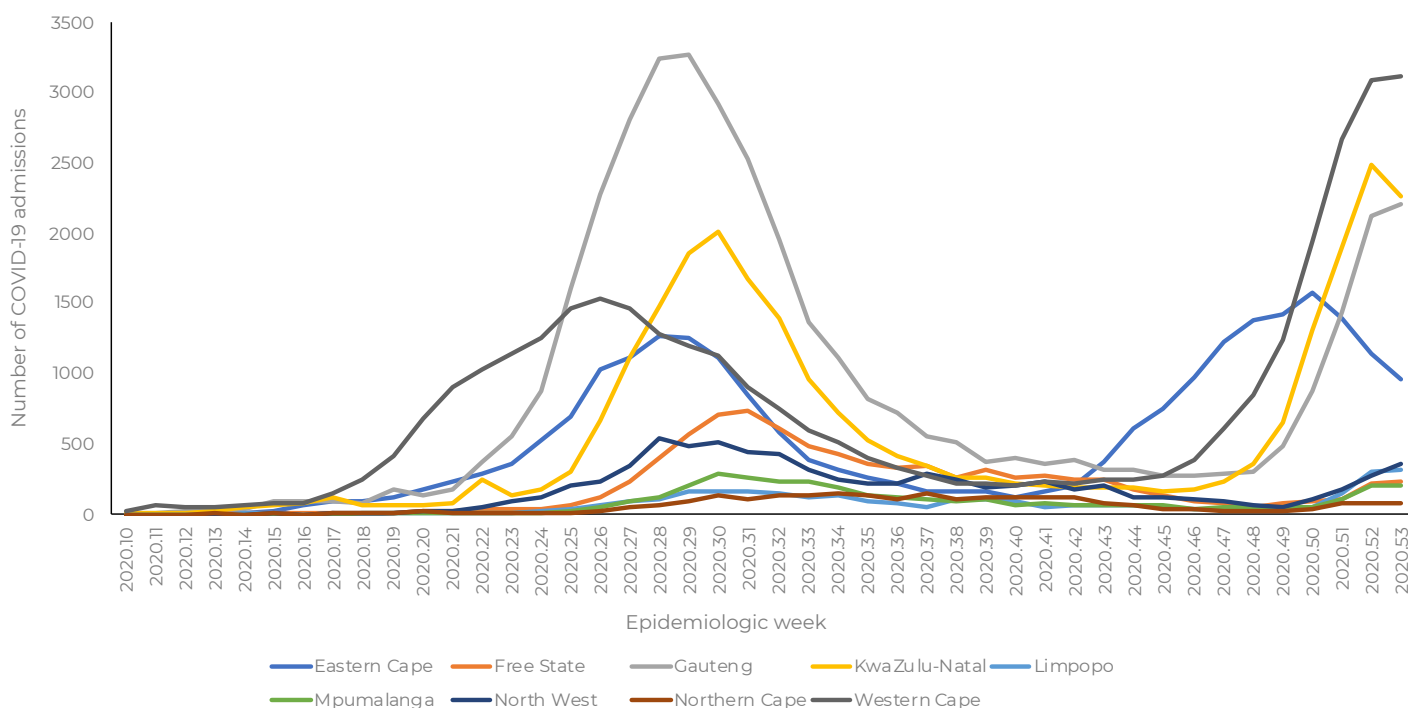


Figure 2. Number of reported COVID-19 admissions, by province and epidemiologic week of diagnosis, South Africa, 5 March 2020-2 January 2021, n=147,308

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EPIDEMIOLOGICAL AND GEOGRAPHIC TRENDS IN IN-HOSPITAL MORTALITY

More deaths have been reported in the public sector. There has been an increase in deaths in both public and private sector since week 42; the weekly numbers of deaths have surpassed the numbers during the peak of the first wave in both sectors (Figure 3).

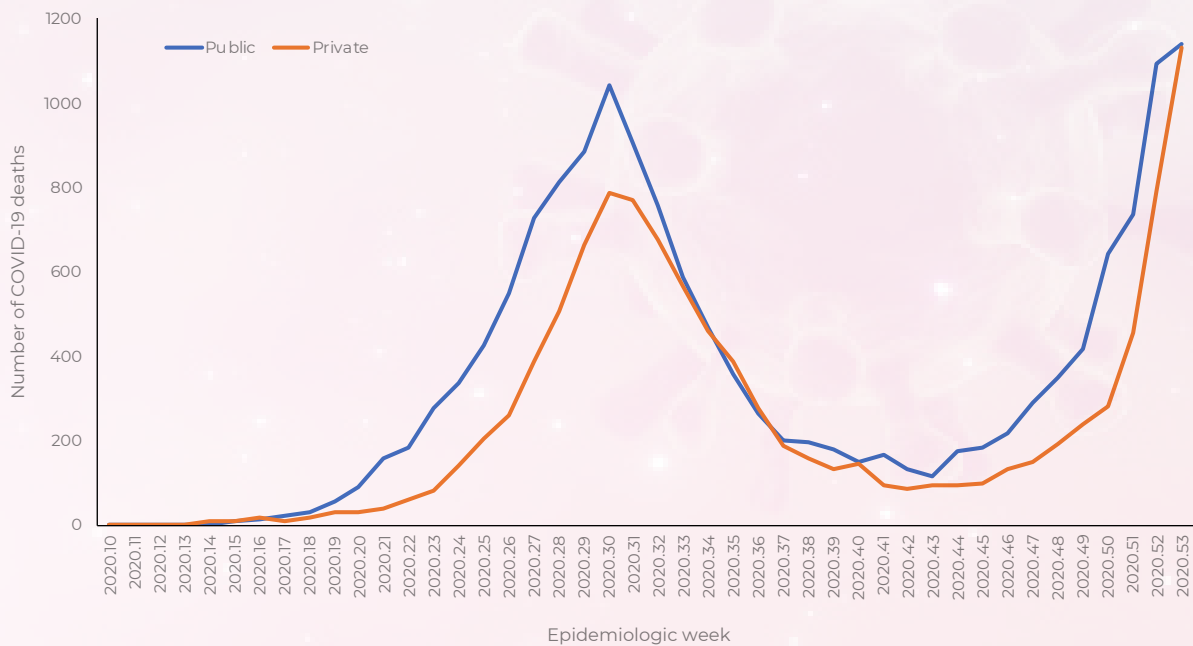


Figure 3. Number of in-hospital COVID-19 in-hospital deaths reported per week by health sector and epidemiologic week, South Africa, 5 March 2020-2 January 2021, n=26,143

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Most deaths were reported in Eastern Cape, Gauteng, Western Cape and KwaZulu-Natal (Figure 4). The weekly numbers of deaths in Eastern Cape, Western Cape, KwaZulu-Natal and Limpopo have surpassed the numbers during the peak of the first wave.

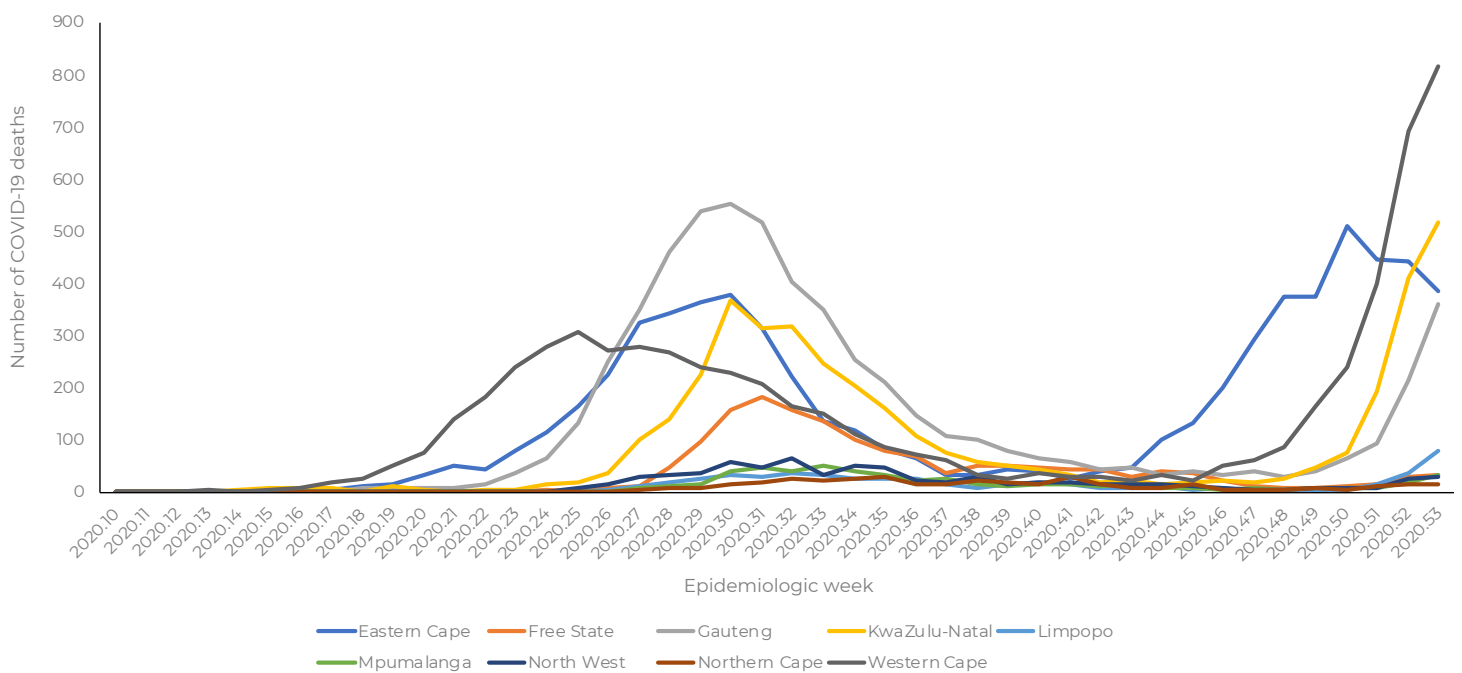


Figure 4. Number of reported COVID-19 in-hospital deaths, by province and epidemiologic week of death, South Africa, 5 March 2020-2 January 2021, n=26,143

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The cumulative incidence risks of COVID-19 admissions were highest in Western Cape and Eastern Cape provinces; and for deaths were highest in Eastern Cape and Western Cape provinces (Table 2).

Table 2. Number and cumulative incidence risk of COVID-19 hospitalisations and in-hospital deaths per 100,000 persons by province, South Africa, 5 March 2020-2 January 2021

Province	Provincial Population mid 2020*	Cumulative admissions	Cumulative Admissions / 100,000	Cumulative deaths	Cumulative deaths / 100,000
Eastern Cape	6,734,001	23858	354,3	6603	98,1
Free State	2,928,903	8437	288,1	1563	53,4
Gauteng	15,488,137	38 923	251,3	5761	37,2
KwaZulu-Natal	11,531,628	25 710	223,0	3932	34,1
Limpopo	5,852,553	3010	51,4	507	8,7
Mpumalanga	4,679,786	3459	73,9	508	10,9
North West	4,108,816	7 536	183,4	688	16,7
Northern Cape	1,292,786	2 495	193,0	370	28,6
Western Cape	7,005,741	33 880	483,6	6211	88,7
South Africa	59,622,350	147 308	247,1	26 143	43,8

*StatsSA mid-year population estimates 2020

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MONITORING FOR RESURGENCE

The number of COVID-19 admissions increased in five provinces from week 52 to week 53, Free State, Gauteng, Limpopo, North West and Western Cape. The highest proportion of new admissions were in Western Cape, KwaZulu-Natal and Gauteng (Table 3). There were 26 of 52 (50%) districts across the country that reported increased numbers of admissions from week 52 to week 53. Decreases in the most recent week may reflect delays in data submission.

Table 3. Percentage change in COVID-19 admissions, epidemiologic week 52 to week 53, by province, South Africa

Province	Hospital admissions		Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100,000 persons
	Week 52	Week 53*			
Eastern Cape	1136	963	-15	9,9	14,3
Free State	221	234	6	2,4	8,0
Gauteng	2124	2211	4	22,7	14,3
KwaZulu-Natal	2486	2269	-9	23,3	19,7
Limpopo	298	322	8	3,3	5,5
Mpumalanga	202	199	-1	2,0	4,3
North West	276	357	29	3,7	8,7
Northern Cape	85	80	-6	0,8	6,2
Western Cape	3087	3124	1	32,0	44,6
South Africa	9 915	9 759	-2	100,0	16,4

* Reporting of new admissions in the most recent week may be delayed

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EASTERN CAPE

The increase in admissions in the Eastern Cape started in week 40, in public and private sectors, exceeding the weekly numbers of admissions at the peak of the first wave in both sectors. In the last three weeks a decrease in admissions has been observed in both sectors (Figure 5).

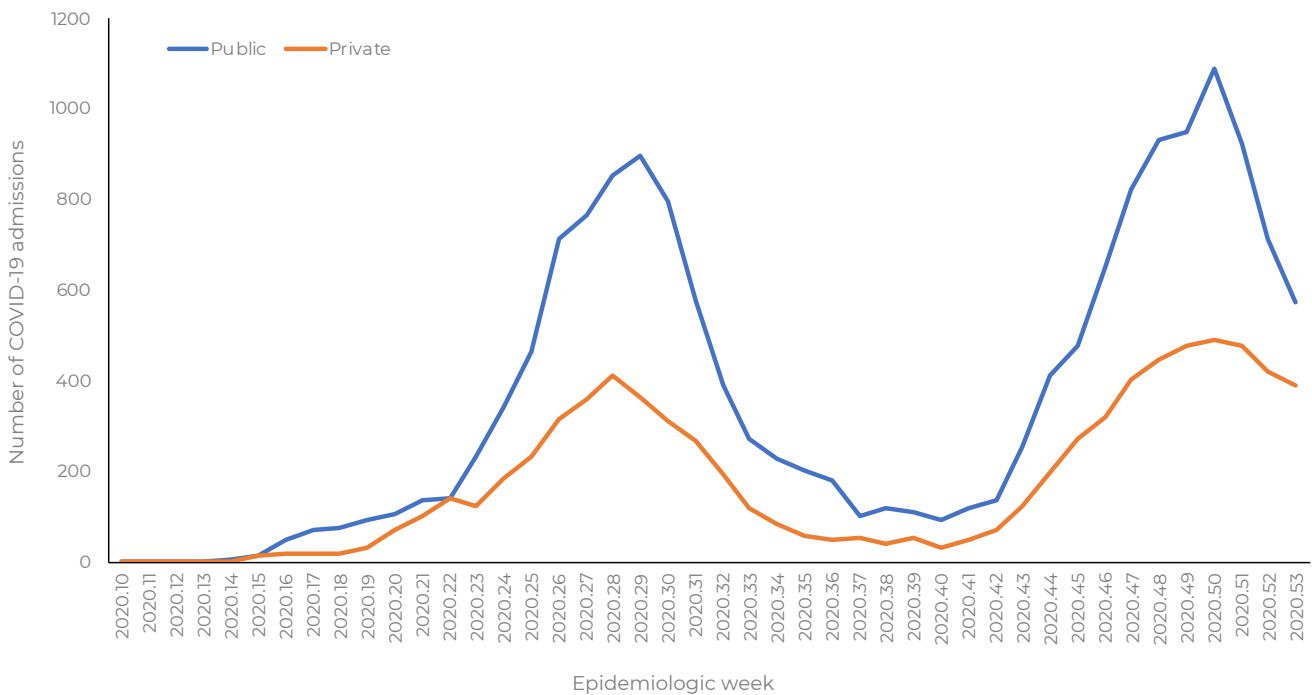


Figure 5: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Eastern Cape, 5 March 2020-2 January 2021

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The increase in admissions in Eastern Cape was predominantly in Nelson Mandela Bay Metro and Buffalo City Metro. The weekly admissions exceeded the numbers of admissions at the peak of the first wave in all districts (Figure 6). Admissions have decreased in Nelson Mandela Bay Metro since week 47, in Sarah Baartman since week 48 and in Buffalo City since week 50 and also in all other districts in the past two weeks.

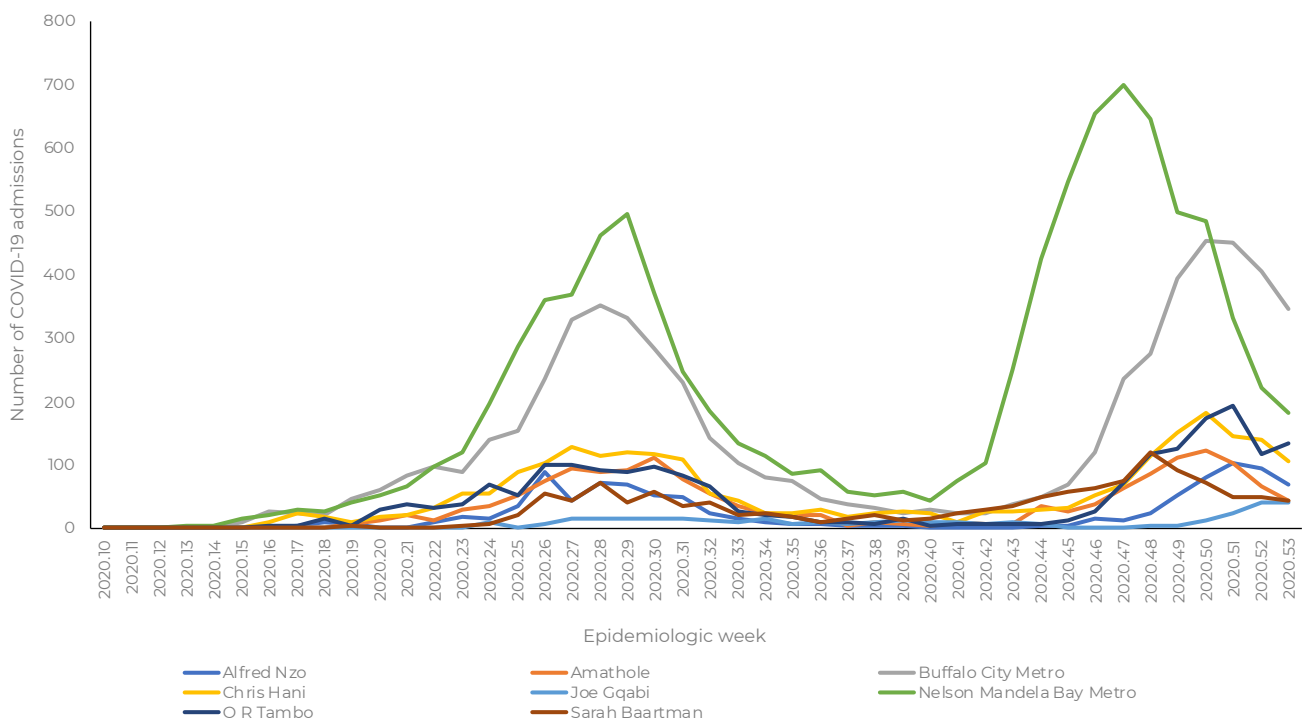


Figure 6. Number of reported COVID-19 admissions, by district and epidemiologic week, Eastern Cape, 5 March 2020-2 January 2021

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The only district with an increase in the number of COVID-19 admissions was OR Tambo district from week 52 to week 53. The highest proportion of new admissions and the highest incidence risk of new admissions was in Buffalo City Metro (Table 4).

Table 4: Number and percentage change in COVID-19 admissions, epidemiologic week 52 to week 53, by district, Eastern Cape

District	Cumulative hospital admissions	Admissions Week 52	Admissions Week 53	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Alfred Nzo	1011	95	68	-28	7,1	0,8
Amathole	1612	65	45	-31	4,7	0,6
Buffalo City Metro	5969	406	345	-15	35,8	4,5
Chris Hani	2379	140	105	-25	10,9	1,5
Joe Gqabi	356	42	42	0	4,4	1,3
Nelson Mandela Bay Metro	9202	222	181	-18	18,8	1,5
OR Tambo	2035	118	133	13	13,8	0,9
Sarah Baartman	1294	48	44	-8	4,6	0,9

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The increase in deaths in Eastern Cape was predominantly in Nelson Mandela Bay Metro and Buffalo City Metro. The weekly deaths exceeded the numbers of deaths at the peak of the first wave in all districts (Figure 7). The numbers of deaths have decreased in Nelson Mandela Metro since week 47 and Sarah Baartman since week 48. The number of deaths has increased in Buffalo City Metro in the past week.

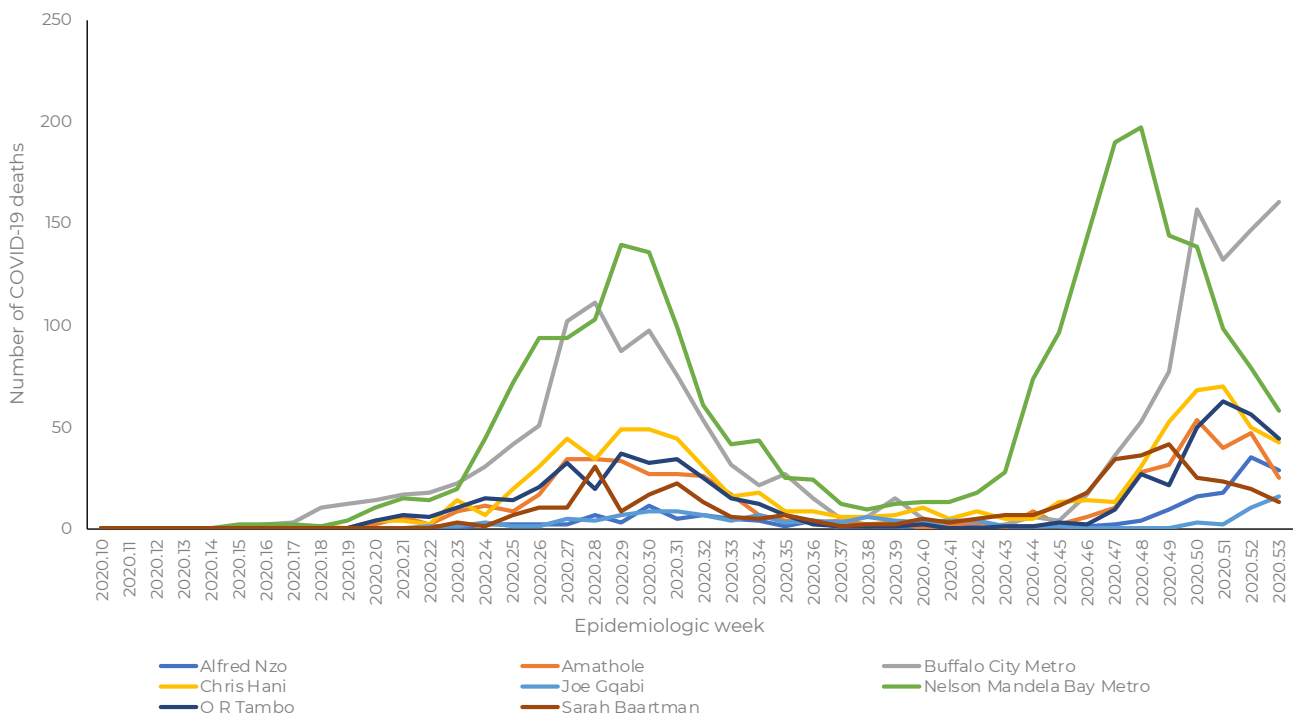


Figure 7. Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Eastern Cape, 5 March 2020-2 January 2021

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WESTERN CAPE

There has been an increase in admissions reported in the Western Cape in both public and private sectors since week 43, exceeding the weekly numbers of admissions at the peak of the first wave in both sectors (Figure 8). Decreases in the most recent week may reflect delays in data submission.

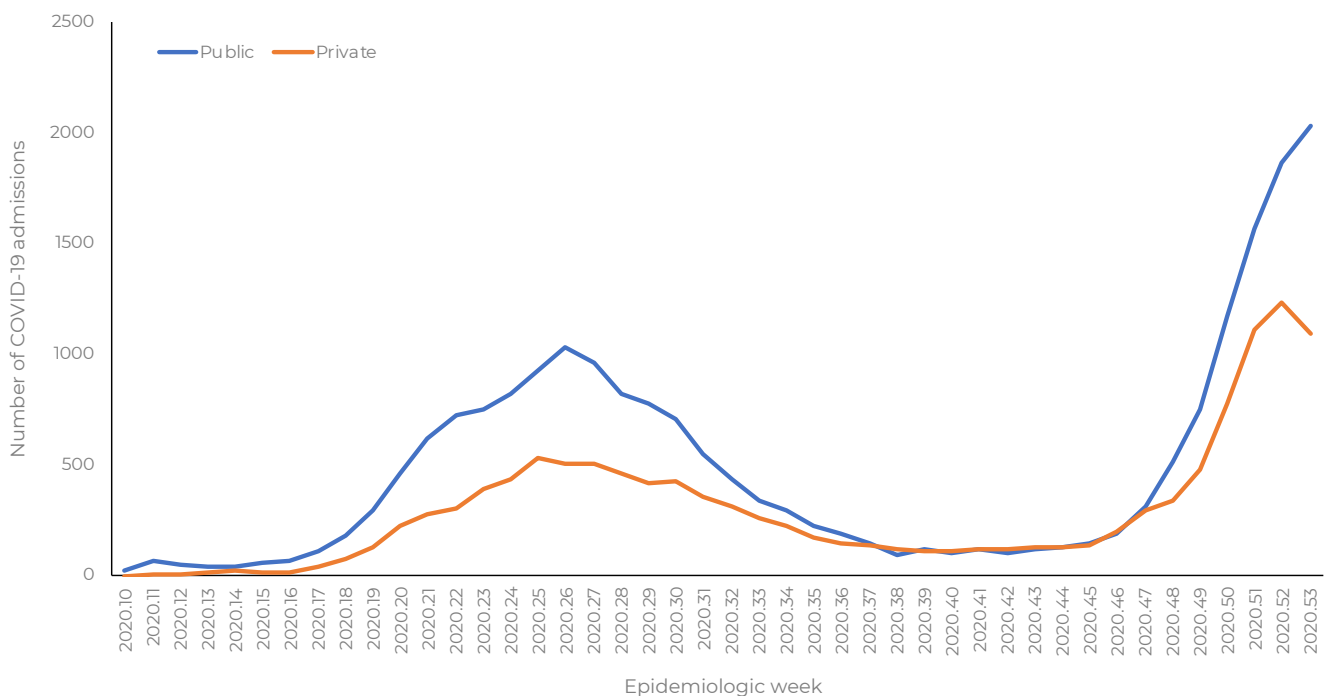


Figure 8: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Western Cape, 5 March 2020-2 January 2021

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The increase in admissions in Western Cape began in Garden Route then City of Cape Town Metro and Cape Winelands, exceeding the weekly numbers of admissions at the peak of the first wave in all districts (Figure 9). Admissions have decreased in Garden Route since week 50 and has shown a slower rate of increase in other districts in the past two weeks. Decreases in the most recent week may reflect delays in data submission.

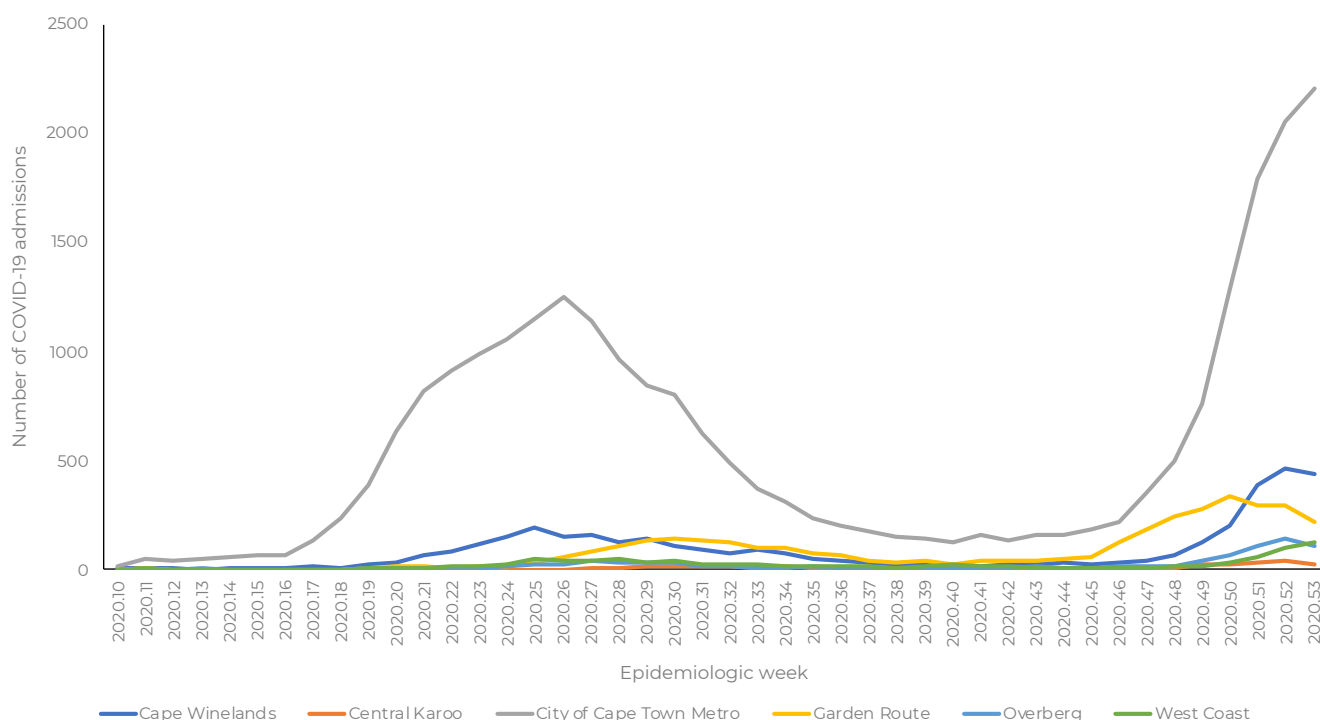


Figure 9: Number of reported COVID-19 admissions, by district and epidemiologic week, Western Cape, 5 March 2020-2 January 2021

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The number of COVID-19 admissions increased in two of six districts from week 52 to week 53, City of Cape Town and West Coast districts. The highest proportion of new admissions was in City of Cape Town (Table 5).

Table 5: Percentage change in COVID-19 admissions, epidemiologic week 52 to week 53, by district, Western Cape

District	Cumulative hospital admissions	Admissions Week 52	Admissions Week 53	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Cape Winelands	3803	463	439	-5	14,1	1,5
Central Karoo	289	37	25	-32	0,8	1,1
City of Cape Town Metro	24424	2056	2203	7	70,5	1,5
Garden Route	3570	290	222	-23	7,1	1,1
Overberg	868	142	112	-21	3,6	1,2
West Coast	926	99	123	24	3,9	0,9

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The increase in deaths in Western Cape was predominantly in City of Cape Town Metro, Garden Route and Cape Winelands, exceeding the weekly numbers of deaths at the peak of the first wave in all districts (Figure 10). The numbers of deaths in Garden Route has decreased in the past two weeks.

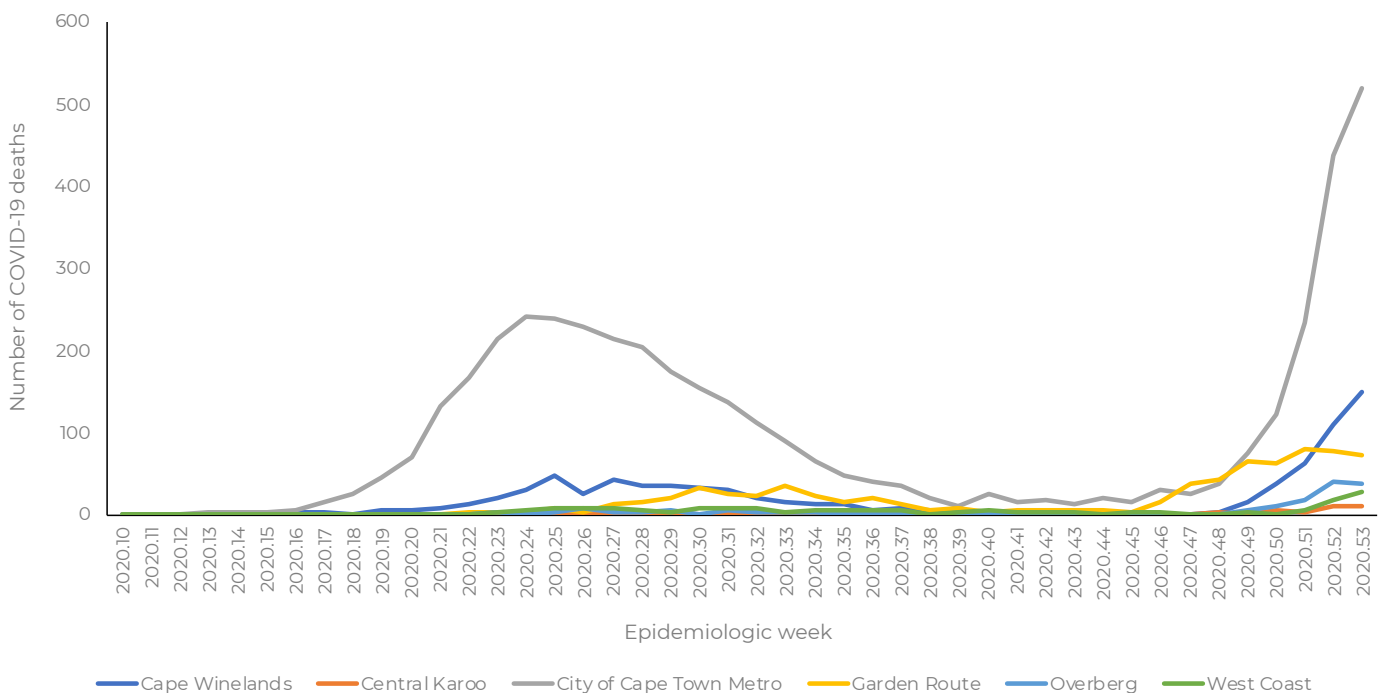


Figure 10: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Western Cape, 5 March 2020-2 January 2021

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KWAZULU-NATAL

There has been an increase in admissions in KwaZulu-Natal in the private sector since week 46 and in the public sector since week 47, exceeding the weekly numbers of admissions at the peak of the first wave in both sectors (Figure 11). Decreases in the most recent week may reflect delays in data submission.

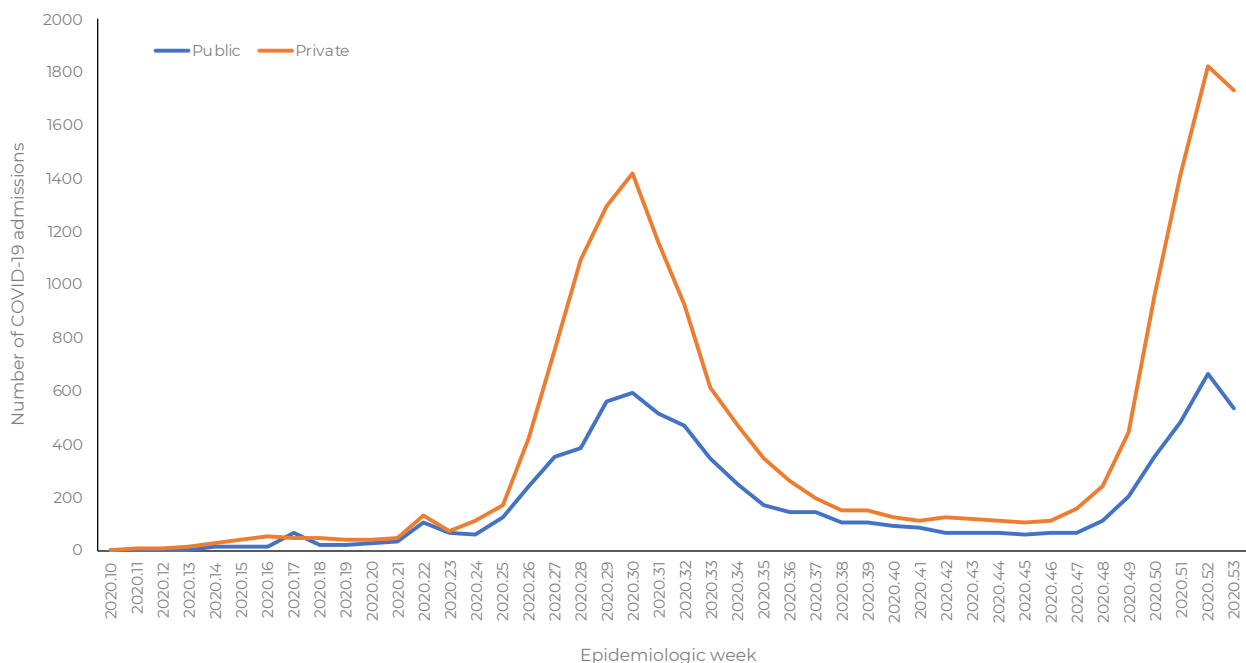


Figure 11: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, KwaZulu-Natal, 5 March 2020-2 January 2021

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The increase in admissions in KwaZulu-Natal is predominantly in eThekweni Metro, uMgungundlovu and King Cetshwayo districts; and has exceeded the weekly numbers of admissions at the peak of the first wave in nine districts (Figure 12). Decreases in the most recent week may reflect delays in data submission.

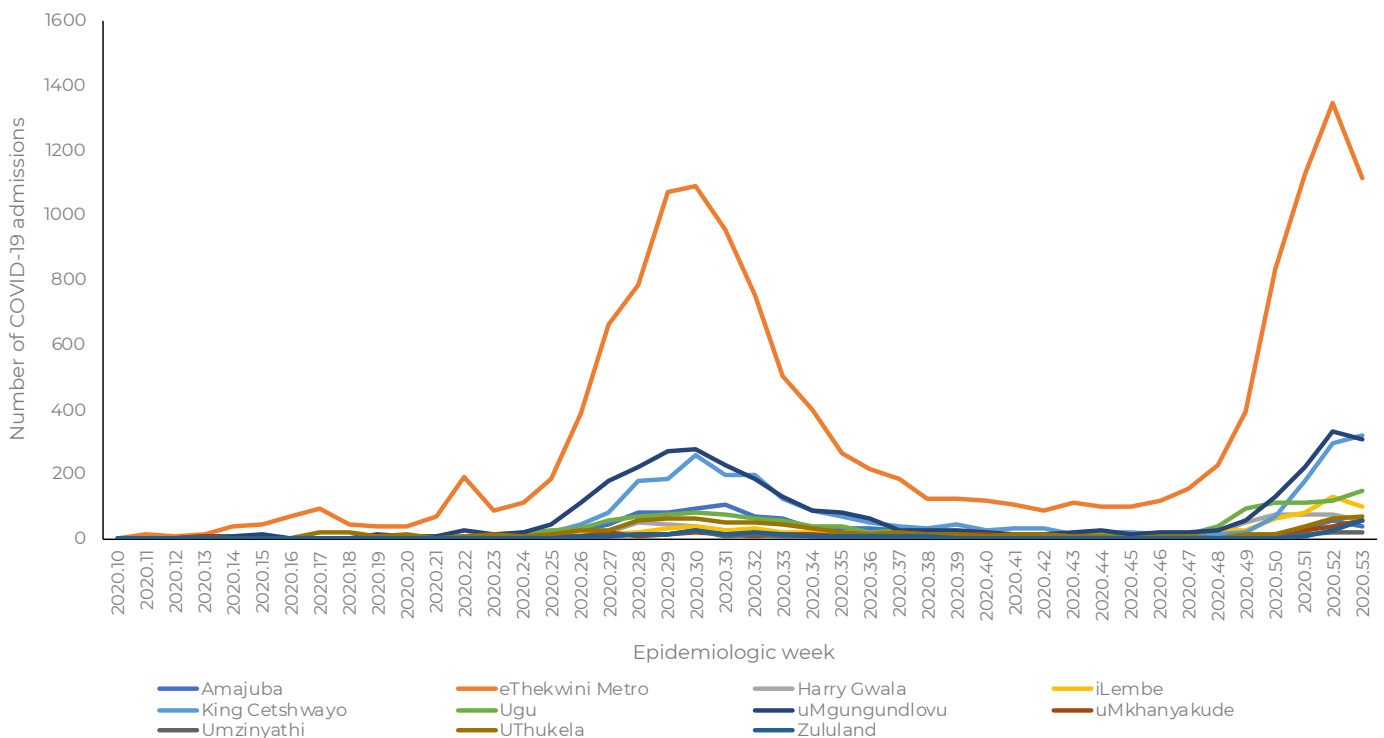


Figure 12: Number of reported COVID-19 admissions, by district and epidemiologic week, KwaZulu-Natal, 5 March 2020-2 January 2021

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The number of COVID-19 admissions increased in five of 11 districts from week 52 to week 53, King Cetshwayo, Ugu, uMkhanyakhude, uThukela and Zululand. The highest proportion of new admissions was in eThekweni Metro (Table 6).

Table 6: Percentage change in COVID-19 admissions, epidemiologic week 52 to week 53, by district, KwaZulu-Natal

District	Cumulative hospital admissions	Admissions Week 52	Admissions Week 53	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Amajuba	949	57	37	-35	1,6	0,3
eThekweni Metro	14443	1341	1109	-17	48,9	1,2
Harry Gwala	624	71	55	-23	2,4	0,5
iLembe	785	131	96	-27	4,2	0,6
King Cetshwayo	2679	293	320	9	14,1	1,5
Ugu	1423	115	149	30	6,6	0,8
uMgungundlovu	3250	330	305	-8	13,4	1,2
uMkhanyakhude	327	39	57	46	2,5	0,4
Umzinyathi	163	21	18	-14	0,8	0,1
UThukela	827	62	68	10	3,0	0,4
Zululand	240	26	55	112	2,4	0,3

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The increase in deaths in KwaZulu-Natal was predominantly in eThekweni, and has exceeded the weekly numbers of deaths at the peak of the first wave in six districts (Figure 13).

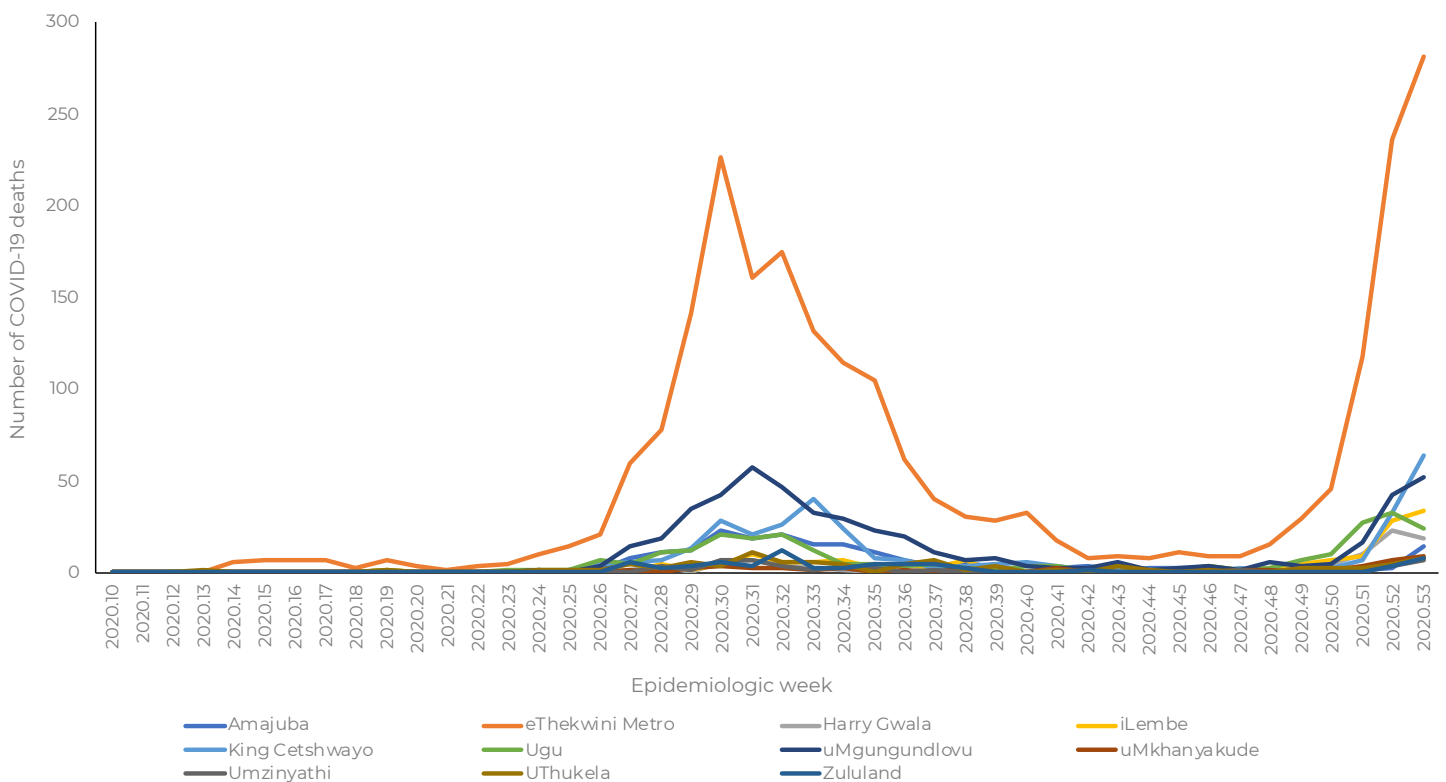


Figure 13: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, KwaZulu-Natal, 5 March 2020-2 January 2021

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GAUTENG

There has been an increase in admissions reported in Gauteng in the private and public sector since week 48 (Figure 14). Decreases in the most recent week may reflect delays in data submission.

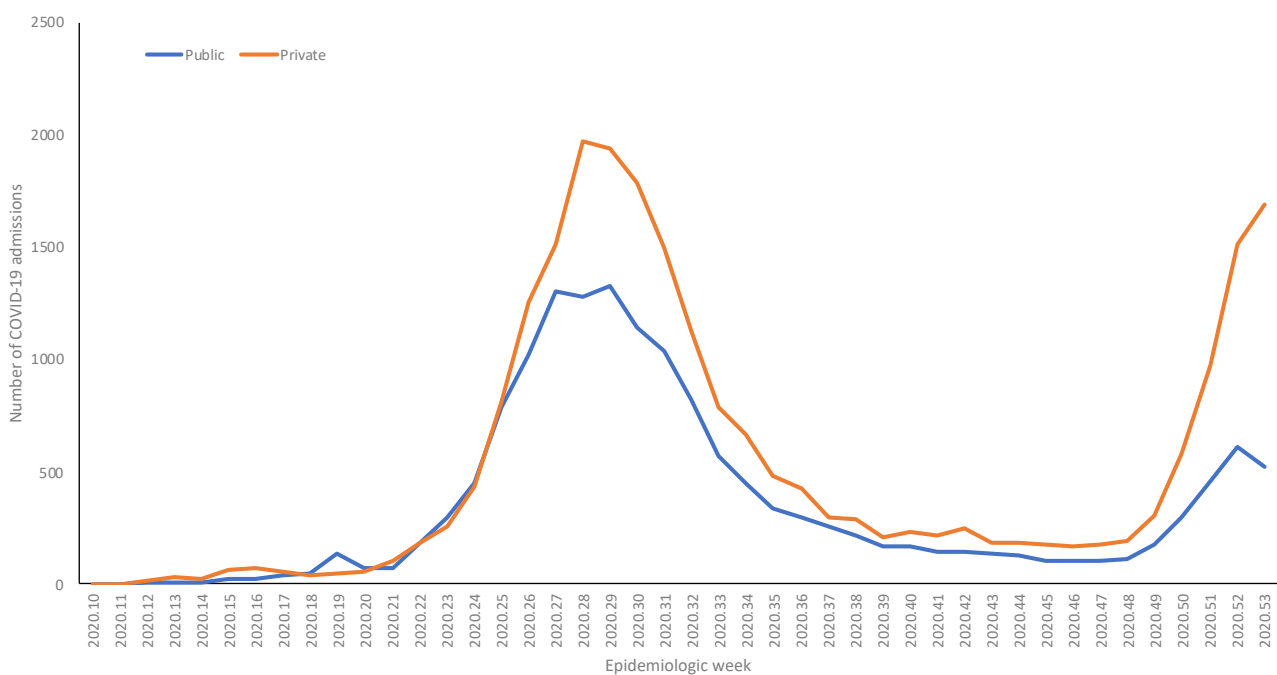


Figure 14: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Gauteng, 5 March 2020-2 January 2021

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The increase in admissions in Gauteng is seen predominantly in City of Johannesburg and City of Tshwane (Figure 15). Decreases in the most recent week may reflect delays in data submission.

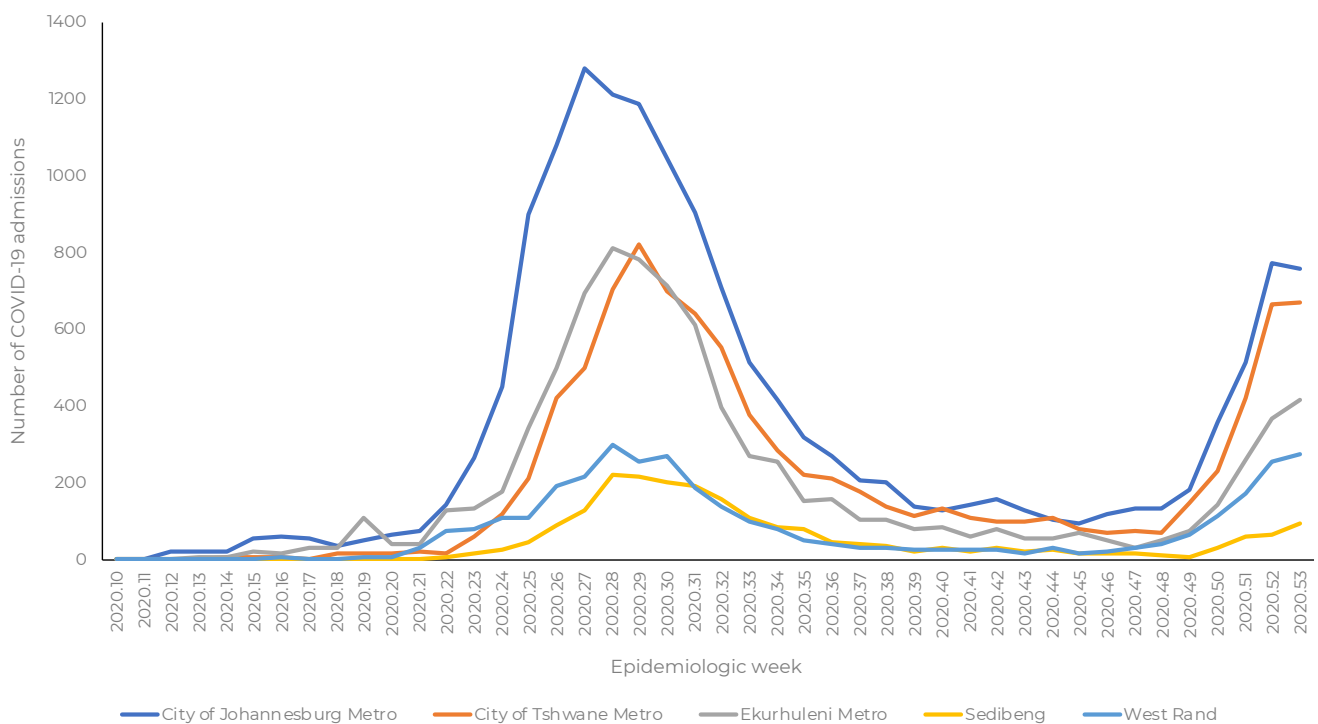


Figure 15: Number of reported COVID-19 admissions, by district and epidemiologic week, Gauteng, 5 March 2020-2 January 2021

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The number of COVID-19 admissions increased in four districts from week 52 to week 53, City of Tshwane, Ekurhuleni, Sedibeng and West Rand. The highest proportion of new admissions were in City of Johannesburg and City of Tshwane Metros (Table 7).

Table 7: Percentage change in COVID-19 admissions, epidemiologic week 52 to week 53, by district, Gauteng

District	Cumulative hospital admissions	Admissions Week 52	Admissions Week 53	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
City of Johannesburg Metro	15424	773	757	-2	34,2	0,6
City of Tshwane Metro	9346	665	670	1	30,3	0,8
Ekurhuleni Metro	8524	366	416	14	18,8	0,5
Sedibeng	2162	63	92	46	4,2	0,4
West Rand	3467	257	276	7	12,5	1,3

The number of deaths has increased in all Gauteng districts (Figure 16).

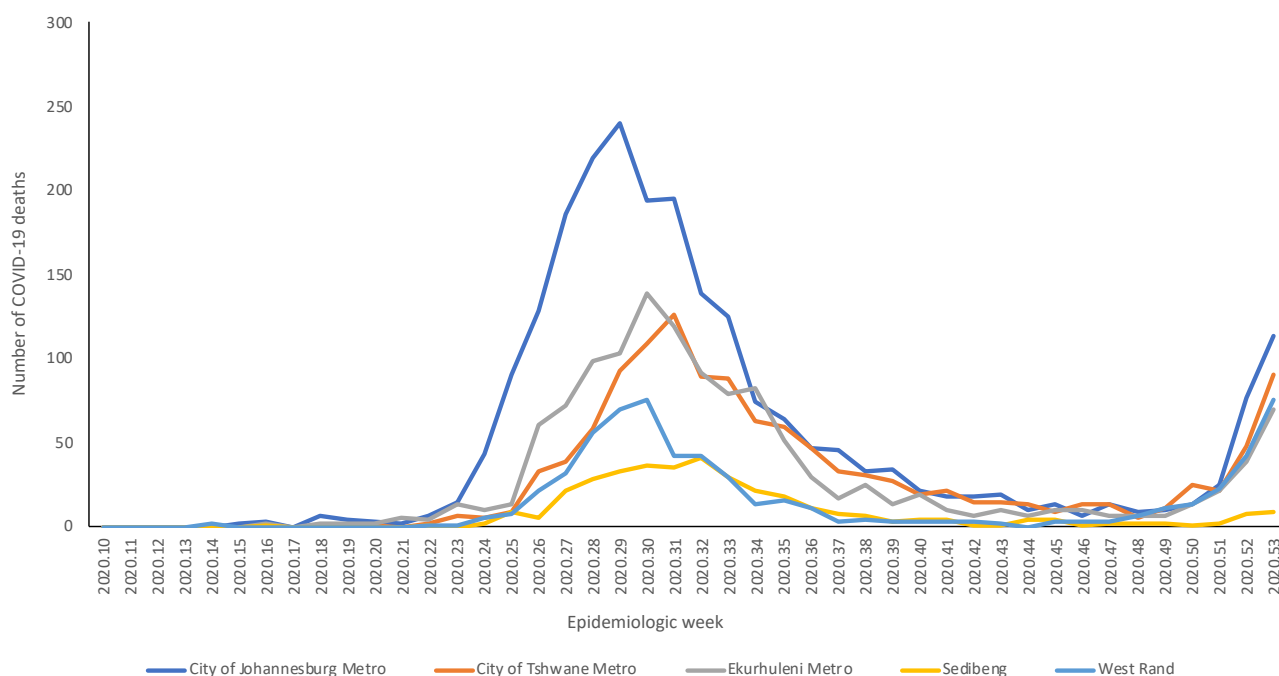


Figure 16: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Gauteng, 5 March 2020-2 January 2021

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LIMPOPO

There has been an increase in admissions reported in Limpopo in the private sector since week 48 and in the public sector since week 50, exceeding the weekly numbers of admissions at the peak of the first wave in both sectors (Figure 17). Decreases in the most recent week may reflect delays in data submission.

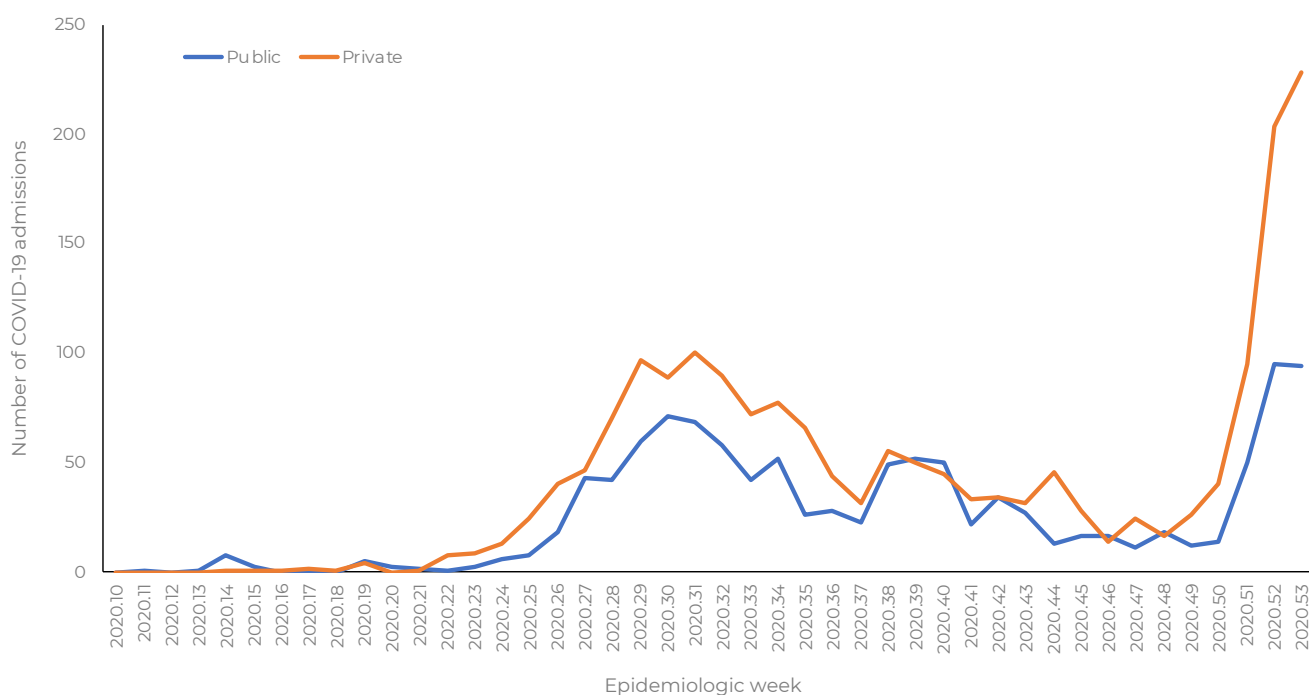


Figure 17: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Limpopo, 5 March 2020-2 January 2021

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The increase in admissions in Limpopo is observed predominantly in Capricorn, exceeding the weekly numbers of admissions at the peak of the first wave in all districts (Figure 18). Decreases in the most recent week may reflect delays in data submission.

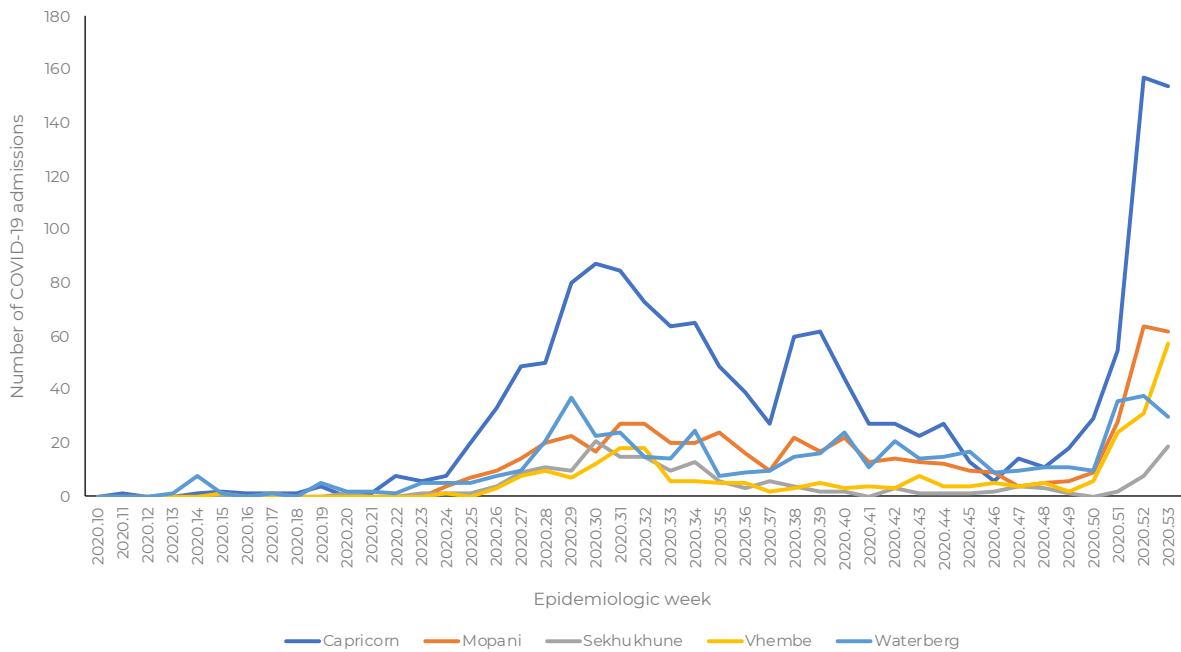


Figure 18: Number of reported COVID-19 admissions, by district and epidemiologic week, Limpopo, 5 March 2020-2 January 2021

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The number of COVID-19 admissions increased in two of five districts from week 52 to week 53, Sekhukhune and Vhembe. The highest proportion of new admissions was in Capricorn (Table 8).

Table 8: Percentage change in COVID-19 admissions, epidemiologic week 52 to week 53, by district, Limpopo

District	Cumulative hospital admissions	Admissions Week 52	Admissions Week 53	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Capricorn	1482	157	154	-2	47,8	3,7
Mopani	550	64	62	-3	19,3	1,6
Sekhukhune	180	8	19	138	5,9	0,5
Vhembe	270	31	57	84	17,7	1,2
Waterberg	528	38	30	-21	9,3	1,3

The increases in deaths have occurred in all districts but predominantly in Capricorn, exceeding the weekly numbers of deaths at the peak of the first wave in Capricorn, Vhembe and Mopani districts (Figure 19).

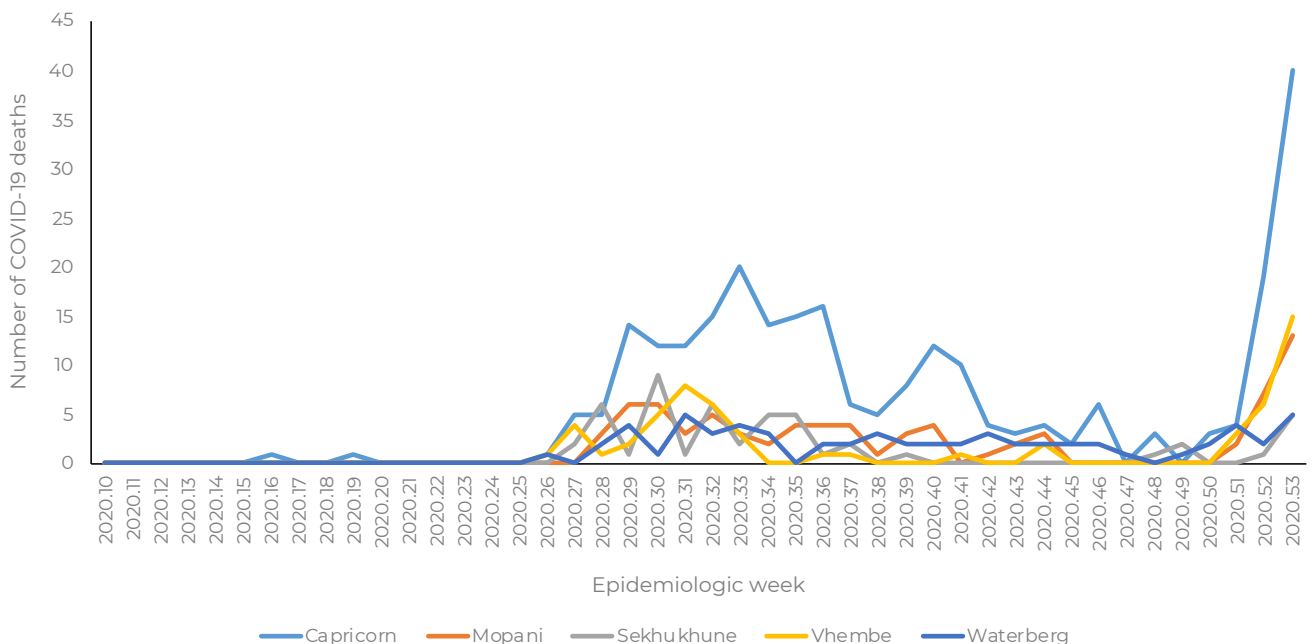


Figure 19: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Limpopo, 5 March 2020-2 January 2021

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FREE STATE

There has been an increase in admissions reported in Free State in the private sector since week 48 and in the public sector since week 50 (Figure 20).

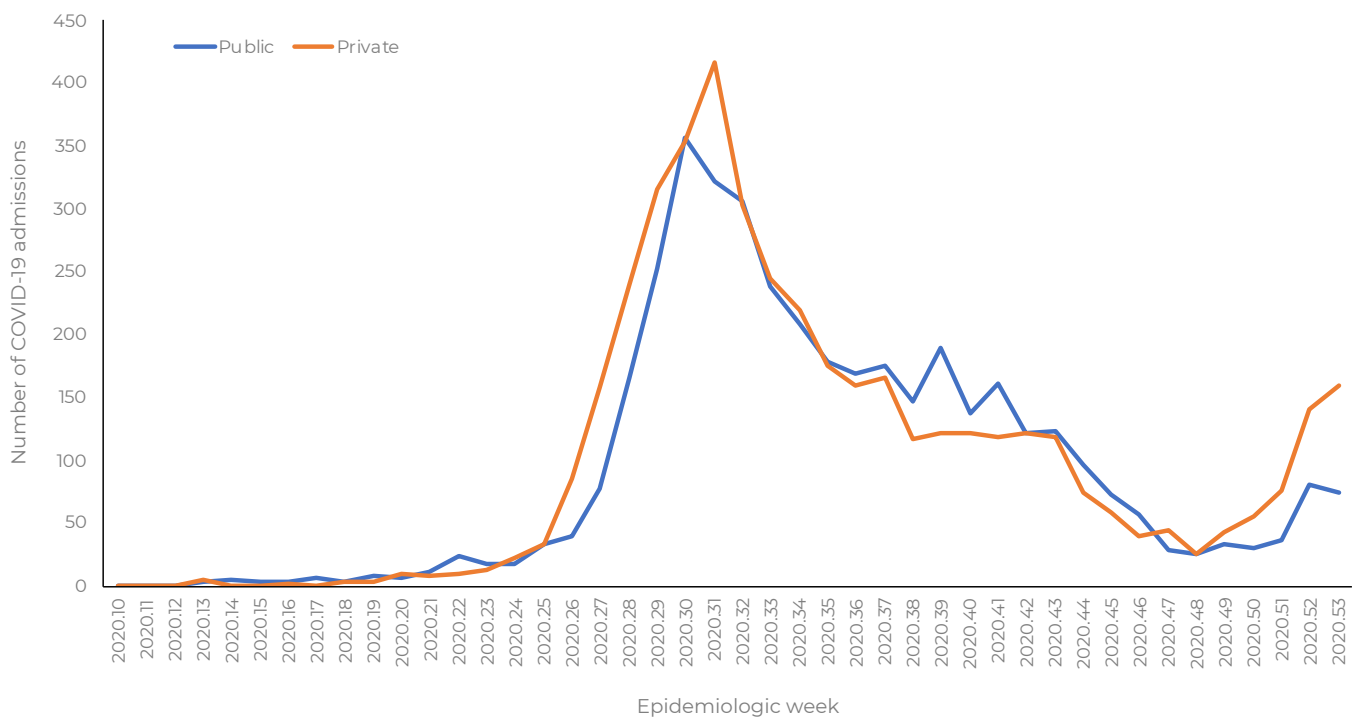


Figure 20: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Free State, 5 March 2020-2 January 2021

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The increase in admissions in Free State is predominantly in Mangaung Metro (Figure 21).

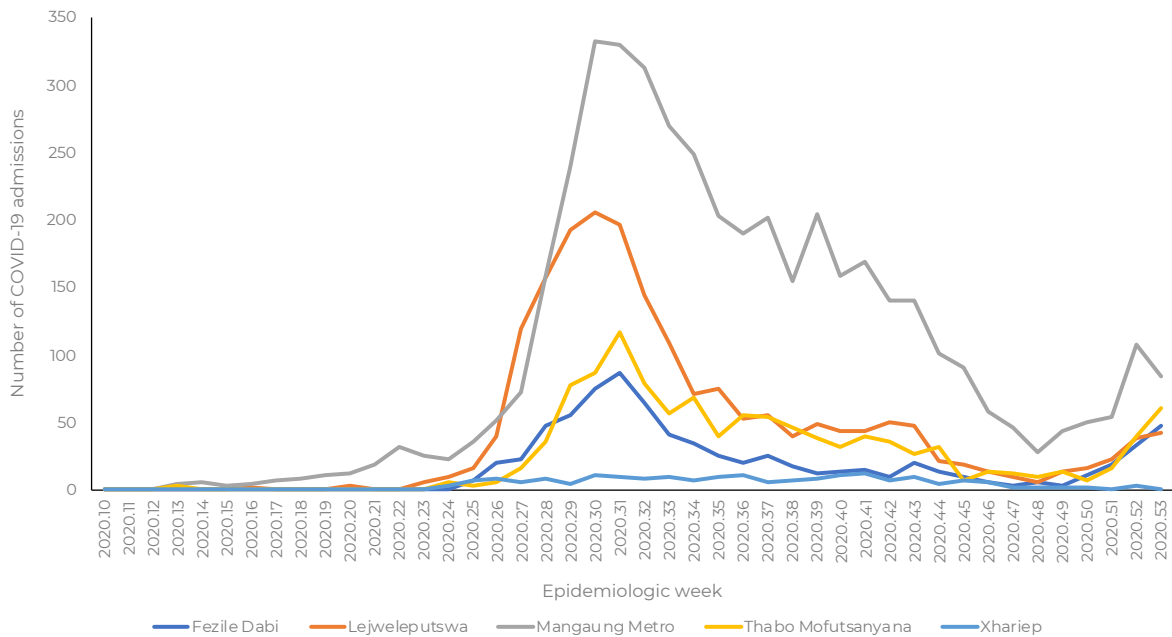


Figure 21: Number of reported COVID-19 admissions, by district and epidemiologic week, Free State, 5 March 2020-2 January 2021

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The number of COVID-19 admissions increased in three of five districts from week 52 to week 53, Fezile Dabi, Lejweleputswa and Thabo Mofutsanyana. The highest proportion of new admissions were in Mangaung Metro (Table 9).

Table 9: Percentage change in COVID-19 admissions, epidemiologic week 52 to week 53, by district, Free State

District	Cumulative hospital admissions	Admissions Week 52	Admissions Week 53	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Fezile Dabi	762	33	48	45	20,5	4,0
Lejweleputswa	1931	38	42	11	17,9	2,7
Mangaung Metro	4424	108	84	-22	35,9	4,1
Thabo Mofutsanyana	1130	39	60	54	25,6	3,4
Xhariep	190	3	0	-100	0,0	0,0

There have been small increases in deaths in four Free State districts, Lejweleputswa, Thabo Mofutsanyane, Fezile Dabi and Mangaung, but low numbers make it difficult to comment on trends (Figure 22).

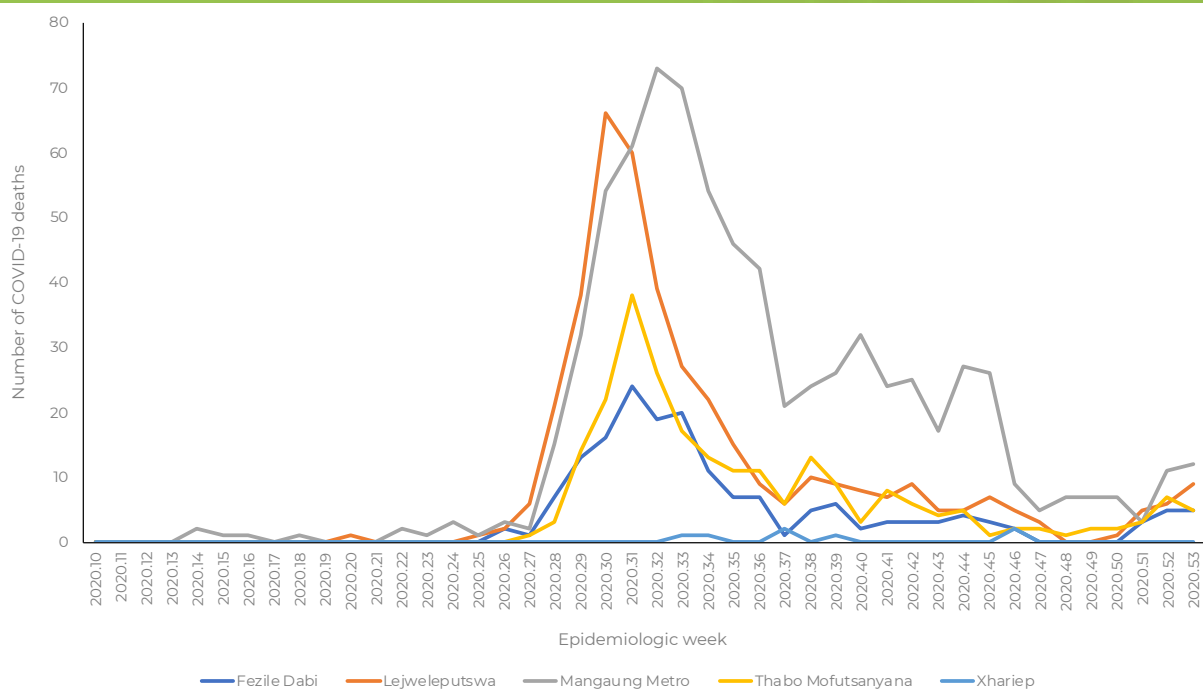


Figure 22: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Free State, 5 March 2020-2 January 2021

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MPUMALANGA

There has been an increase in admissions reported in Mpumalanga in the private sector since week 48 and the public sector since week 51 (Figure 23).

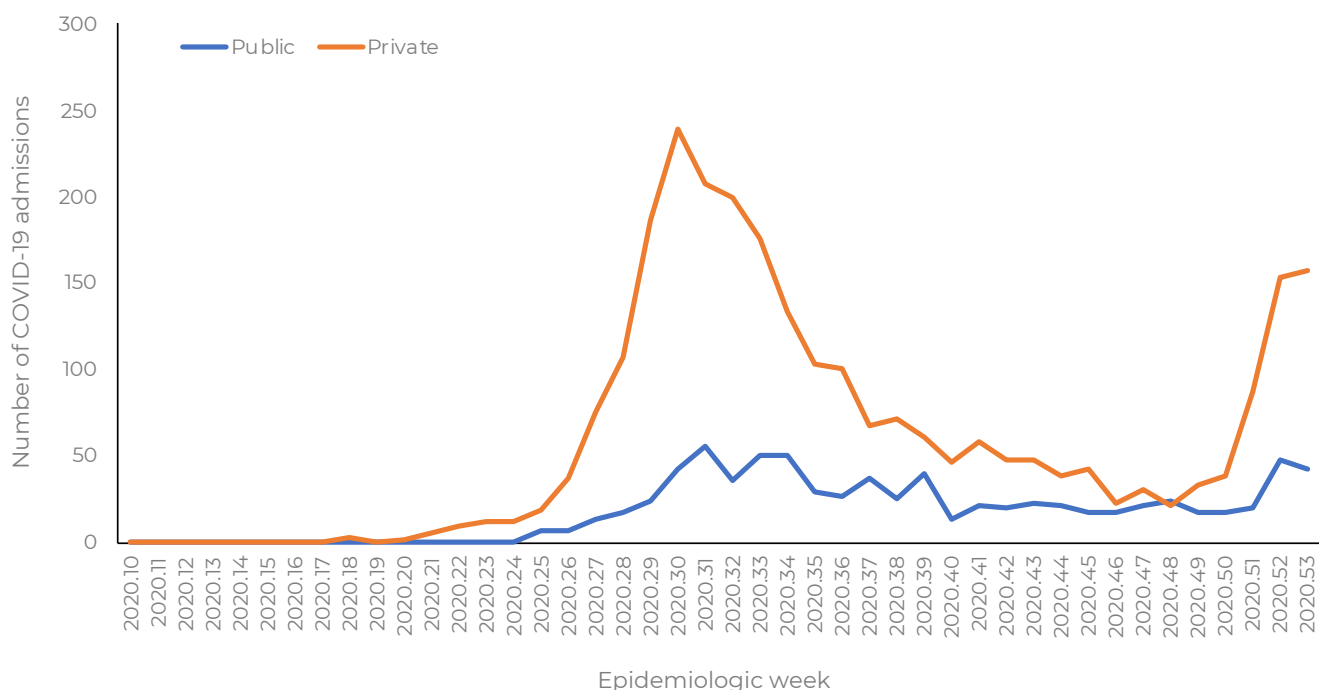


Figure 23: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Mpumalanga, 5 March 2020-2 January 2021

COVID-19 SENTINEL HOSPITAL SURVEILLANCE UPDATE

WEEK 53 2020

The increase in admissions in Mpumalanga is observed in all districts (Figure 24).

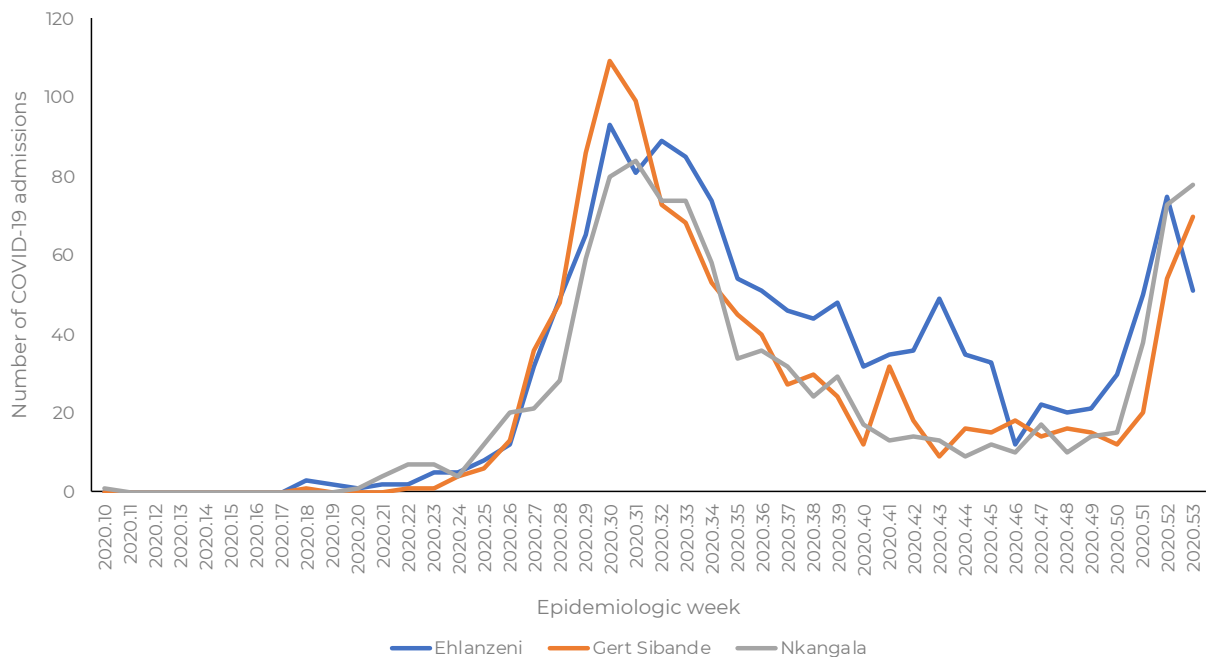


Figure 24: Number of reported COVID-19 admissions, by district and epidemiologic week, Mpumalanga, 5 March 2020-2 January 2021

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WEEK 53 2020

The number of COVID-19 admissions increased in two of three districts from week 52 to week 53, Gert Sibande and Nkangala. The highest proportion of new admissions were in Nkangala and Gert Sibande (Table 10).

Table 10: Percentage change in COVID-19 admissions, epidemiologic week 52 to week 53, by district, Mpumalanga

District	Cumulative hospital admissions	Admissions Week 52	Admissions Week 53	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Ehlanzeni	1352	75	51	-32	25,6	1,4
Gert Sibande	1085	54	70	30	35,2	2,8
Nkangala	1022	73	78	7	39,2	2,4

The increases in deaths is observed in all districts (Figure 25).

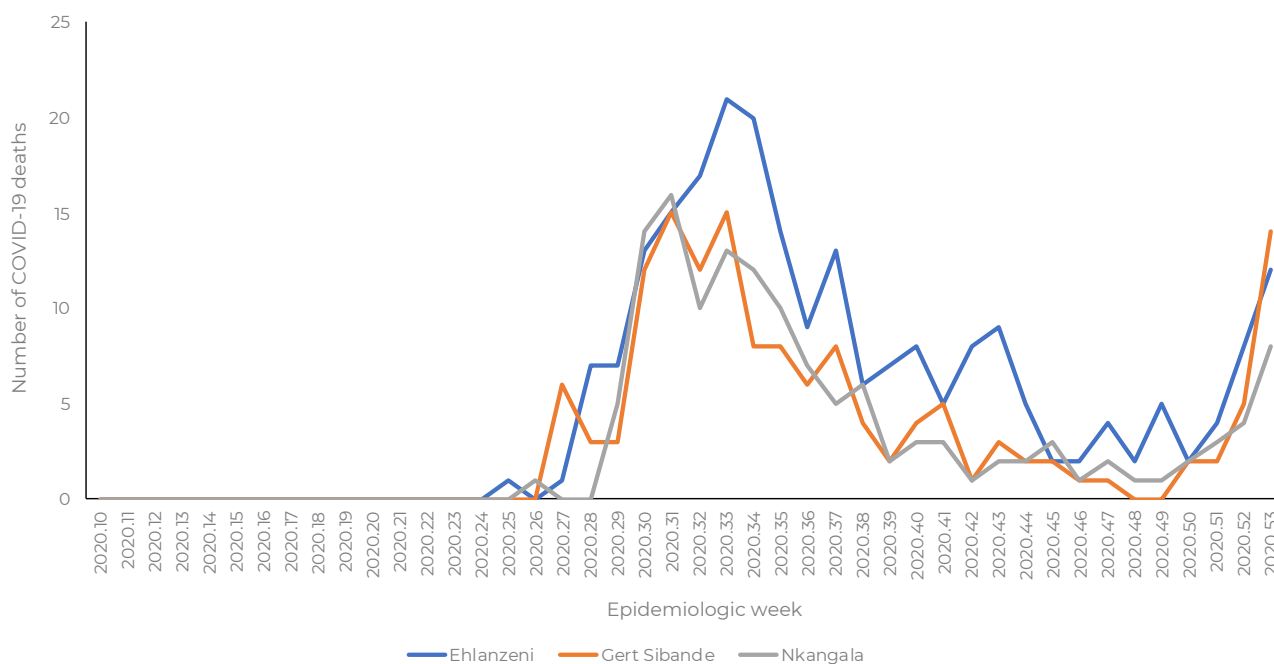


Figure 25: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Mpumalanga, 5 March 2020-2 January 2021

COVID-19 SENTINEL HOSPITAL SURVEILLANCE UPDATE

WEEK 53 2020

NORTH WEST

There has been an increase in admissions reported in North West in the private sector since week 48 and in the public sector since week 49 (Figure 26).

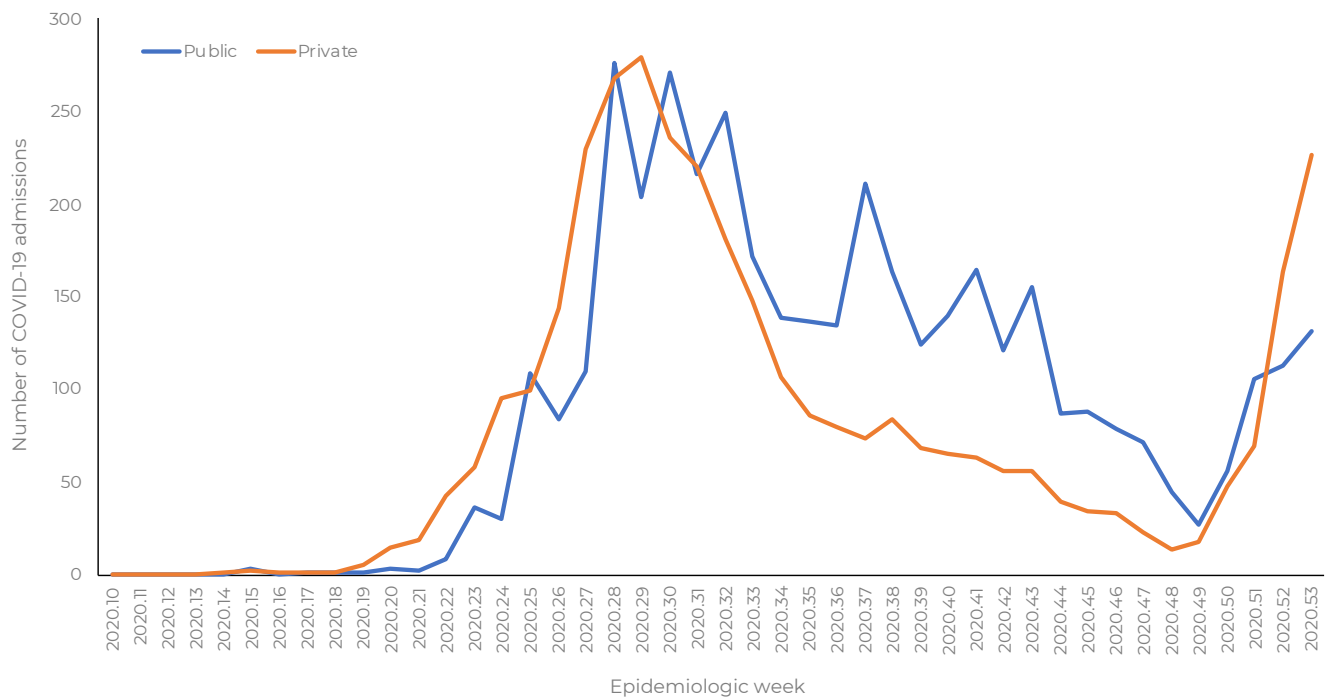


Figure 26: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, North West, 5 March 2020-2 January 2021

COVID-19 SENTINEL HOSPITAL SURVEILLANCE UPDATE

WEEK 53 2020

The increase in admissions in North West is observed predominantly in Dr Kenneth Kaunda and Bojanala Platinum (Figure 27).

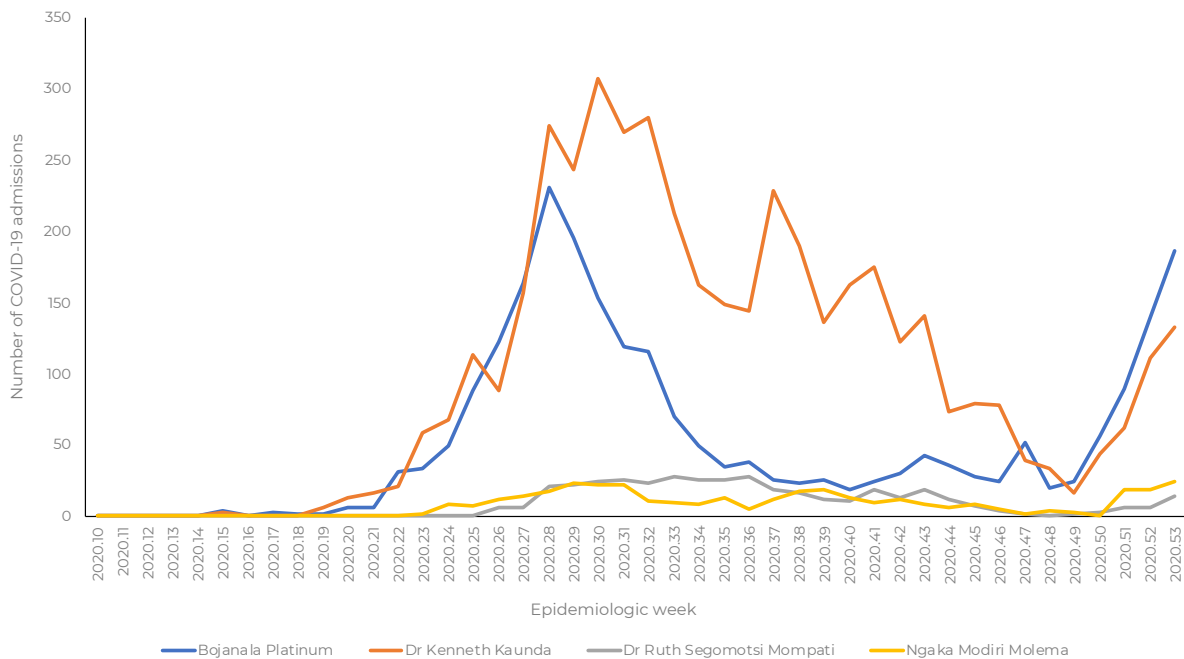


Figure 27: Number of reported COVID-19 admissions, by district and epidemiologic week, North West, 5 March 2020-2 January 2021

COVID-19 SENTINEL HOSPITAL SURVEILLANCE UPDATE

WEEK 53 2020

The number of COVID-19 admissions increased in all four districts from week 52 to week 53. The highest proportion of new admissions were in Bojanala Platinum and Dr Kenneth Kaunda (Table 11).

Table 11: Percentage change in COVID-19 admissions, epidemiologic week 52 to week 53, by district, North West

District	Cumulative hospital admissions	Admissions Week 52	Admissions Week 53	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Bojanala Platinum	2366	140	186	33	52,1	2,7
Dr Kenneth Kaunda	4408	111	133	20	37,3	4,7
Dr Ruth Segomotsi Mompoti	404	6	14	133	3,9	0,8
Ngaka Modiri Molema	358	19	24	26	6,7	0,7

There have been small increases in deaths in Bojanala Platinum and Dr Kenneth Kaunda, but low numbers make it difficult to comment on trends (Figure 28).

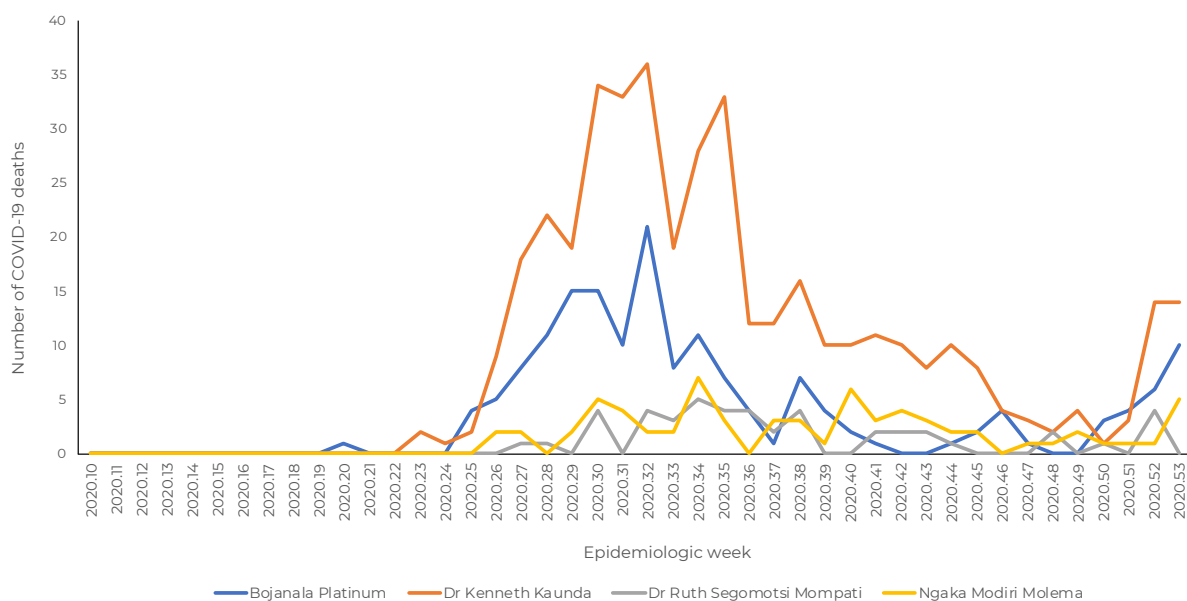


Figure 28: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, North West, 5 March 2020-2 January 2021

COVID-19 SENTINEL HOSPITAL SURVEILLANCE UPDATE

WEEK 53 2020

NORTHERN CAPE

There has been an increase in admissions reported in Northern Cape in the public and private sector since week 49 (Figure 29). Decreases in the most recent week may reflect delays in data submission.

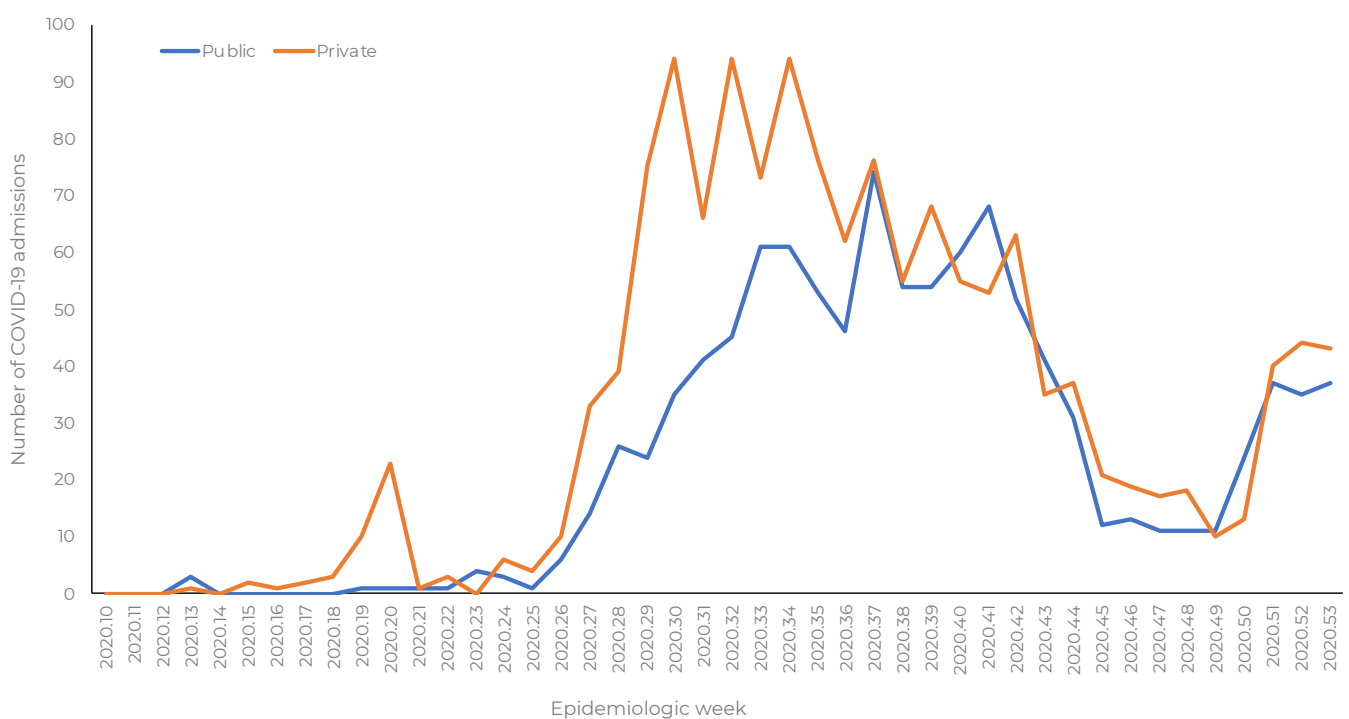


Figure 29: Number of reported COVID-19 admissions by health sector and epidemiologic week of diagnosis, Northern Cape, 5 March 2020-2 January 2021

COVID-19 SENTINEL HOSPITAL SURVEILLANCE UPDATE

WEEK 53 2020

The increase in admissions in Northern Cape is observed across all districts; and has exceeded the weekly number of admissions during the peak of the first wave in Pixley ka Seme district (Figure 30). Decreases in the most recent week may reflect delays in data submission.

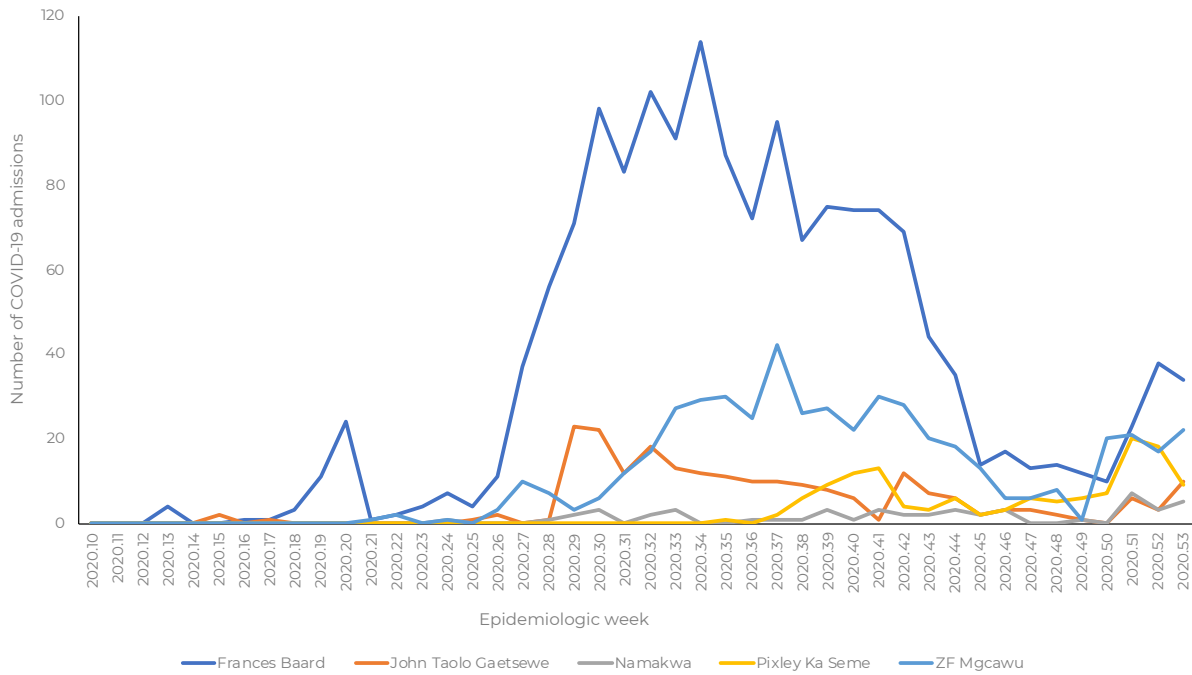


Figure 30: Number of reported COVID-19 admissions, by district and epidemiologic week, Northern Cape, 5 March 2020-2 January 2021

COVID-19 SENTINEL HOSPITAL SURVEILLANCE UPDATE

WEEK 53 2020

The number of COVID-19 admissions increased in three of five districts from week 52 to week 53, John Taolo Gaetsewe, Namakwa and ZF Mgcawu. The highest proportion of new admissions were in Frances Baard and ZF Mgcawu districts (Table 12).

Table 12: Percentage change in COVID-19 admissions, epidemiologic week 52 to week 53, by district, Northern Cape

District	Cumulative hospital admissions	Admissions Week 52	Admissions Week 53	Percentage change in admissions	Percentage of total new admissions	Incidence risk of new admissions /100 000 persons
Frances Baard	1596	44	34	-23	42,5	10,2
John Taolo Gaetsewe	217	3	10	233	12,5	4,6
Namakwa	50	3	5	67	6,3	5,4
Pixley Ka Seme	132	18	9	-50	11,3	5,3
ZF Mgcawu	500	17	22	29	27,5	9,8

There have been small increases in deaths in two districts, ZF Mgcawu and Pixley Ka Seme, but low numbers make it difficult to comment on trends (Figure 31).

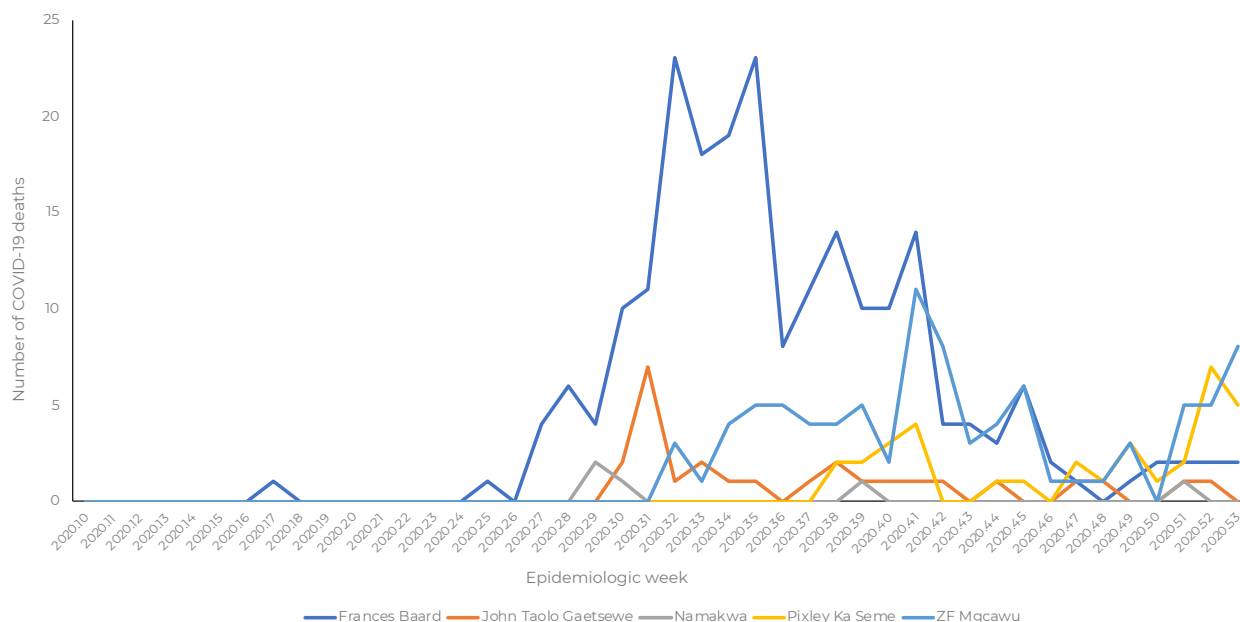


Figure 31: Number of reported COVID-19 in-hospital deaths, by district and epidemiologic week, Northern Cape, 5 March 2020-2 January 2021

COVID-19 SENTINEL HOSPITAL SURVEILLANCE UPDATE

WEEK 53 2020

LIMITATIONS

DATCOV now includes reporting from all hospitals with COVID-19 admissions but many hospitals are yet to reach complete submission of historic data. Data quality in a surveillance system is dependent on the information submitted by healthcare institutions. It is not possible for the NICD to verify or check the quality of all these data, however, the NICD has built-in data quality checks. Delays in reporting of admissions and deaths may affect the numbers reported in the most recent week. The National Department of Health are in the process of recruiting data capturers to support hospitals to improve data submission.

DATCOV only reports hospital-based admissions and deaths and therefore does not include deaths occurring outside hospitals. DATCOV now has a module to record out-of-hospital deaths.

COVID-19 SENTINEL HOSPITAL SURVEILLANCE UPDATE

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ACKNOWLEDGEMENTS

All public and private sector hospitals submitting data to DATCOV

Private hospital groups submitting data to DATCOV:

- Netcare
- Life Healthcare
- Mediclinic Southern Africa
- National Hospital Network (NHN)
- Clinix Health Group
- Lenmed
- Joint Medical Holdings (JMH)

COVID-19 SENTINEL HOSPITAL SURVEILLANCE UPDATE

WEEK 53 2020

APPENDIX

Table 13: Number of reported COVID-19 admissions and in-hospital deaths by age and gender, South Africa, 5 March 2020-2 January 2021

Age (years)	ADMISSIONS				DEATHS			
	Female	Male	Unknown	Total	Female	Male	Unknown	Total
0-4	926	1128	6	2060	29	28	1	58
5-9	251	341	0	592	4	8	0	12
10-14	467	417	0	884	8	10	0	18
15-19	1423	773	2	2198	32	30	0	62
20-24	2423	1233	2	3658	64	50	0	114
25-29	4419	2040	3	6462	168	96	1	265
30-34	6113	3525	0	9638	299	223	0	522
35-39	6852	4682	0	11534	439	388	0	827
40-44	6610	5665	1	12276	552	584	0	1136
45-49	7511	6690	3	14204	819	877	1	1697
50-54	8611	7588	0	16199	1163	1201	0	2364
55-59	8979	7807	4	16790	1636	1658	0	3294
60-64	7673	6978	3	14654	1798	1973	0	3771
65-69	6007	5403	3	11413	1766	1748	0	3514
70-74	4739	4314	4	9057	1434	1499	1	2934
75-79	3399	2900	0	6299	1126	1138	0	2264
80-84	2449	1770	3	4222	861	712	1	1574
85-89	1398	851	1	2250	531	389	0	920
90-94	610	328	1	939	277	172	0	449
>95	213	133	0	346	79	41	0	120
Unknown	817	711	101	1629	113	122	4	239
	81890	65277	137	147304	13198	12947	9	26154