



“This is a long march and it demands a march of national unity. It’s a march that requires us to focus and know that each and every person’s action will count and therefore, whatever plans there are, whatever decisions, we need to work together.

We know it is difficult.”

- DR ZWELI MKHIZE - MINISTER OF HEALTH -

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health

Department:
Health
REPUBLIC OF SOUTH AFRICA

Dear Pharmaceutical Services team,

The aim of this edition is to provide an overview of the work underway to respond to the Covid-19 outbreak in South Africa, to support the provision of pharmaceutical services and help ensure that the medicines needed by our patients are available in the right quantity, in the right place at the right time. A Covid-19 response team consisting of national and provincial stakeholders, as well as implementing partners has been created, and is working tirelessly to ensure that medicines are indeed available.

Work is being done on the selection of the medicines required, the development of therapeutic guidelines, demand and supply planning, as well the monitoring and reporting of medicine availability by health establishments to ensure that our patients never have to go without critical medicines during these challenging times.

The priority list of medicines includes those medicines needed for the management of Covid-19 patients, medicines where security of supply challenges are currently being, or may be experienced, and vital medicines that must be available at health establishments. The list has been expanded to include medicines used in the management of chronic conditions.

A demand forecast for the priority list of medicines has been developed. The current demand forecast for these items is significantly higher than initial forecasts, and is informed by the Covid-19 patient number modelling projections and the need to, as far as possible, keep stable patients with chronic conditions out of health establishments, especially during the expected peak period.

To address medicine supply challenges and minimise potential stock outs during this period, the NDoH with provincial Pharmaceutical Services have agreed that provinces should increase their stockholding of medicines on the priority list to at least three months. We have introduced a supply planning process to determine the supply shortfall of items on the list and initiated the sourcing of the items needed. Medicine availability is monitored on the National Surveillance Centre, where a Covid-19 dashboard has been developed. The NSC is intended to provide information to managers at all levels of healthcare to assist them to make informed decisions.

There is ongoing engagement with industry to properly plan, align and ensure that the supply of medicines is optimised. The Department together with the Department of Trade and Industry is working with suppliers to address logistical issues, particularly involving stock coming from outside the country.

Members of the AMD have been appointed as the Secretariat of the Ministerial Advisory Committee on Covid-19 and its subcommittees, who are mandated to provide high level strategic advice to the Minister of Health on the management of the Covid-19 outbreak.

AMD is working closely with provinces and other key stakeholders to address the challenges faced. The team has since the start of the journey, worked tirelessly to ensure that our collective efforts are geared towards helping to keep our people safe, ease suffering and save lives.

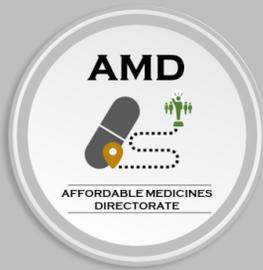
Yours in gratitude

Khadija Jamaloodien

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DATE: 12 May 2020



Covid-19 Update

The journey at a glance

AMD Covid-19 team in action

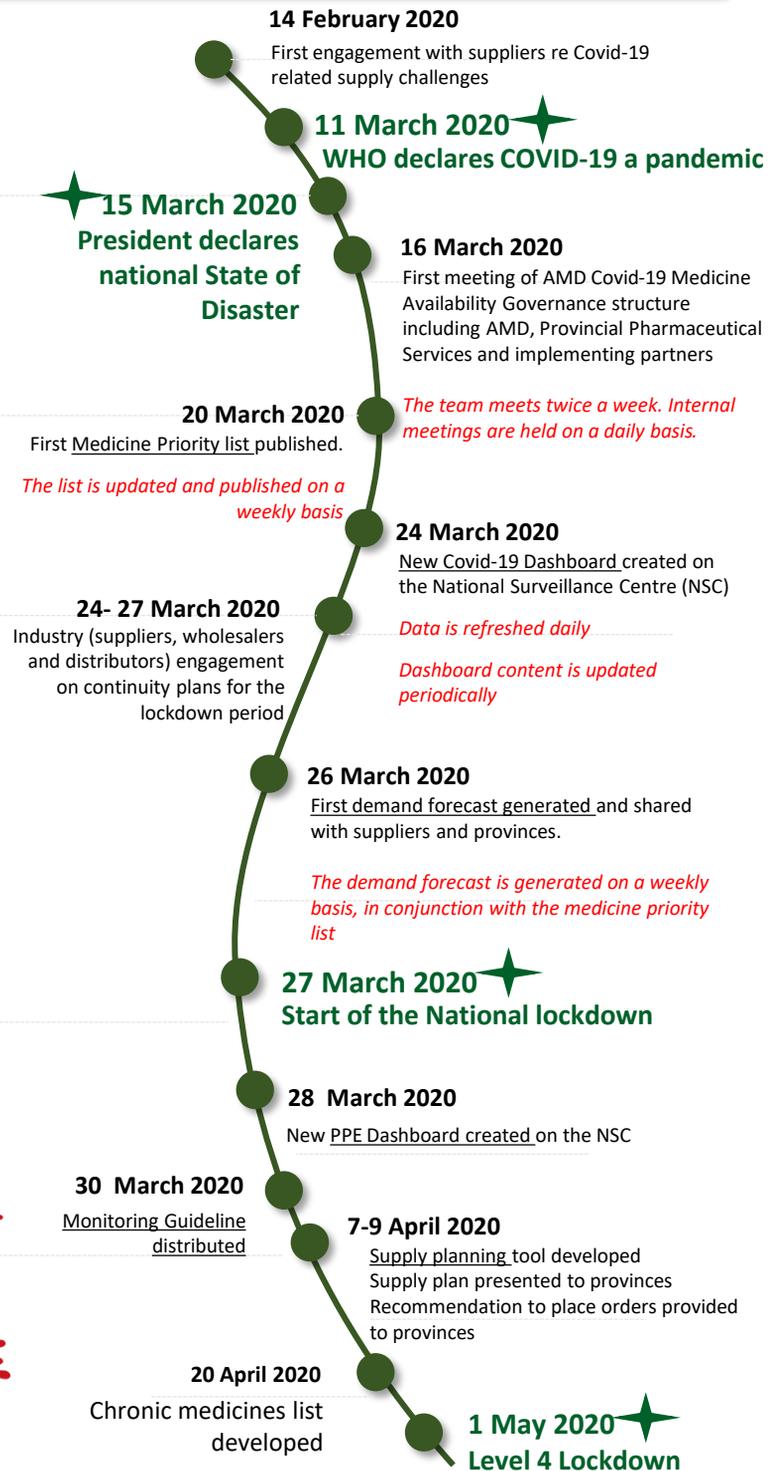


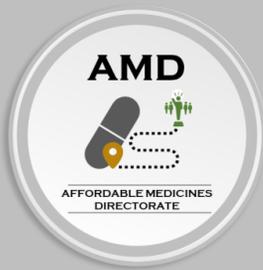
05 May 2020 | Photo Credit: R. Botha



05 May 2020 | Photo Credit: R. Botha

“Prepare for the worst, hope for the best”





Covid-19 Update

Identifying priority medicines - "The Priority List"

The first list of medicines requiring priority attention during the Covid-19 outbreak was published by AMD on 20 March, following consultation with the provinces. This initial list was developed based on the Covid-19 guidelines from the World Health Organization, the South African Clinical Management Guidelines as well as the South African National Standard Treatment Guidelines (STGs).

Based on an expected peak in patient numbers around June/July, it was decided to include medicines used to manage chronic diseases onto the list. Where possible, patients with chronic diseases could be issued with extra repeats of their prescriptions. This will assist in reducing the number of patients visiting health establishments during the expected peak, thus freeing up health care establishments and personnel workers to focus on Covid-19 patients.

An extract from the priority list as at 08 May 2020.

Indication of use for COVID-19 Indications		250			89	222
NSN	Medicine Pack short Description	Proposed PRIORITY	Prescriber level	VEN	COVID-19	CHRONIC
181810590	4-Aminosalicylic Acid, 4.00g, Granules, 30 Sachets	NO		N	NO	
181781208	Abacavir, 20.00mg/ml, Solution, 240 ml	YES	PHC	V	NO	
181896191	Abacavir, 300.00mg, Tablet, 56 Tablets	YES	PHC	V	NO	
181901076	Abacavir, 60.00mg, Tablet, dispersible, 56 Tablets	YES	PHC	V	NO	
189710142	Acetazolamide, 250.00mg, Tablet, 100 Tablets	NO	PHC	V	NO	YES
189752737	Acetazolamide, 250.00mg, Tablet, 30 Tablets	NO	PHC	V	NO	YES
189714840	Acetic Acid, Liquid, 500 ml	NO		N	NO	
189714841	Acetone, Liquid, 500 ml	NO		N	NO	
189761050	Acetylcholine, 20mg/2ml, Drop, Eye, 2 ml	NO		N	NO	
180206550	Acetylcysteine, 200.00mg, Granules, 20 Sachets	NO		N	NO	
181896924	Acetylcysteine, 200.00mg, Tablet, dispersible, 25 Tablets	NO		N	NO	
180215077	Acetylcysteine, 400.00mg, Granules, 30 Sachets	NO		N	NO	

The medicine priority list includes medicines for the management of Covid-19, vital medicines with potential supply challenges, as well as chronic medicines.

Priority List at a glance

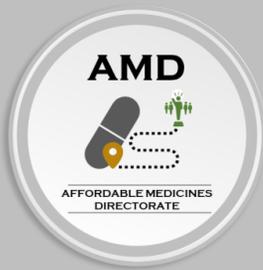
180
Priority Items

88
Covid-19 Items

284
Chronic Disease Items



As at 8 May 2020



Covid-19 Update

Determining how much we need – Demand and Supply Planning

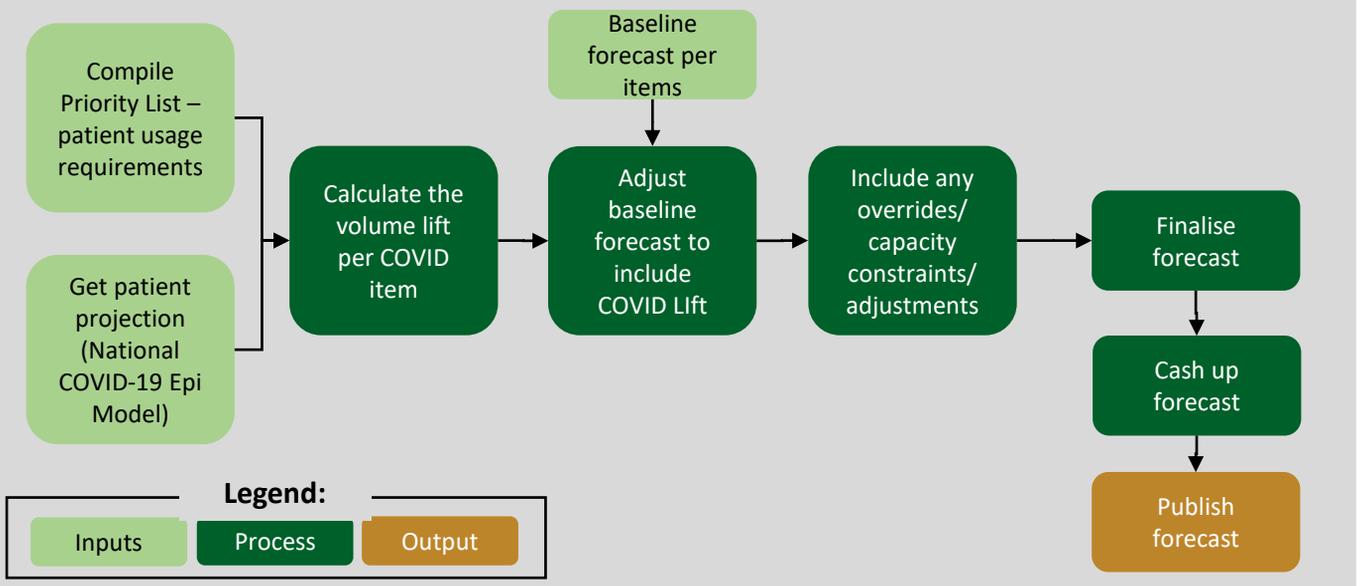
The first **demand forecast for medicines** on the priority list was developed and shared with the provinces on 26 March 2020. The forecast is based on the anticipated epidemiological course of the Covid-19 disease, the number of patients requiring treatment per month and the level of care where treatment will be provided (PHC, hospital or ICU). The forecast builds on statistical baseline forecasts for items based on the last three years' usage. Constraints such as those relating to capacity are identified and factored in.

Patient numbers are based on the **National Covid-19 Epi Model**, which is being used to project the number

of Covid-19 patients who will require treatment. According to the model as at 8 May, the **peak of infections** is expected in **July 2020**, with more than **four million patients during July in PHC facilities alone**. The latest demand forecast provides projections until December 2020. The demand forecast is updated with new information on a weekly basis down to provincial level.

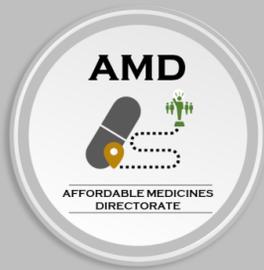
The diagram below illustrates the demand planning process from when the priority list is developed until the demand forecast is published.

Demand Planning Process



Following the demand forecasting process, a **supply planning process** was implemented to determine the supply shortfall of items on the priority list. Supply planning takes into account the current demand forecast, the stock held by provinces, the stock held by suppliers, as well as stock in the supplier pipeline. In

cases where contracted suppliers are not able to cover the gap/meet the demand, **AMD is sourcing medicines from contracted and where necessary, alternative suppliers**. Provinces are encouraged to order **three months' stock** to maintain a healthy buffer for the impending peak in Covid-19 patients.



Covid-19 Update

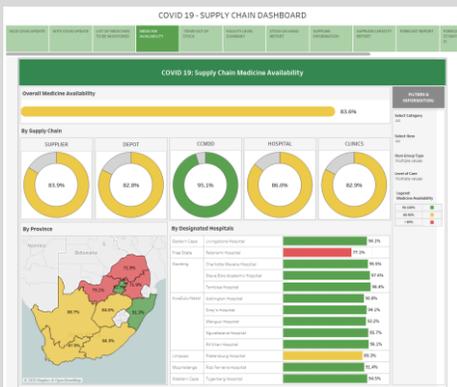
Monitoring how we are doing – Reporting to the National Surveillance Centre

A guideline for the monitoring of the availability of items on the priority list was developed and distributed to provinces on 30 March 2020. The purpose of the guideline is to support regular reporting of stock on hand information by all health establishments for Covid-19 priority items during the management of the pandemic. The guideline also documents the criteria for inclusion of medicine on the priority list.

Data on the stock status of the medicines on the

priority list must be submitted **daily** in the case of provincial pharmaceutical depots. Hospitals are required to submit data on these items preferably on a **daily basis, but at least weekly**. PHC facilities are required to submit data on a **weekly basis**.

A new Covid-19 dashboard was created on the NSC. This dashboard provides data on the availability of medicines identified as a priority for the treatment of Covid-19 as well as other items on the priority list.



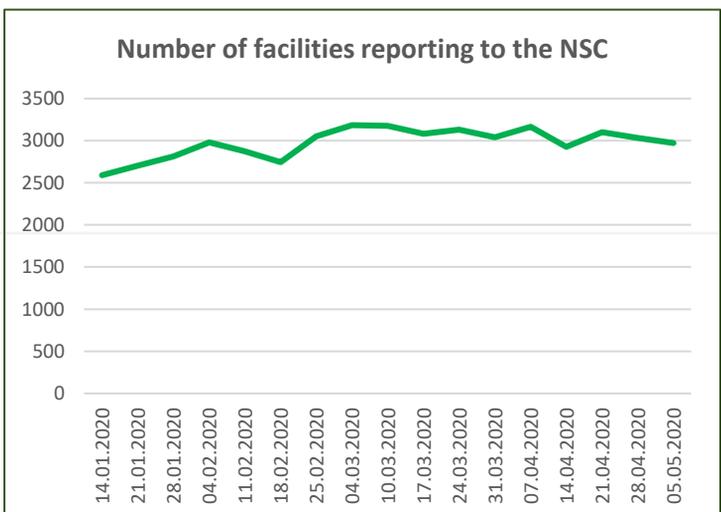
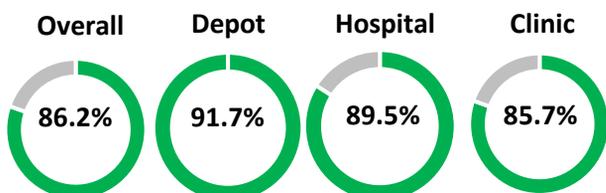
The purpose of the Covid-19 dashboard is to monitor medicine availability for the items on the priority list, the reporting compliance of facilities, as well as stock on hand versus the three months stockholding requirement for items

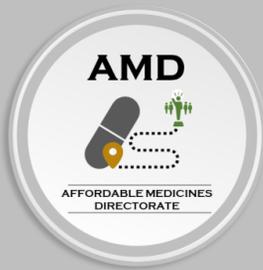
Reporting Compliance

Reporting compliance is monitored on a weekly basis. As at 12 May, the overall reporting compliance was 86,2 %, with 91,7% of depots, 89,5% of hospitals and 85,7% of clinics reporting. An increase from the previous week was noted in overall reporting compliance (5,6% up) and particularly at clinic level (6% up). Improvements were also seen at hospital level (4,9% up). The team is working to improve reporting.

Below is a summary of the reporting trend over the last four months of sites reporting adequately (more than 80% of their basket) to the NSC.

Weekly reporting compliance per institution





Covid-19 Update

Protecting our People (PPE)

A key component in the response to Covid-19 is the availability of adequate personal protective equipment (PPE). A standardised list of items that must be available has been developed. Personnel responsible for Occupational Health and Safety or other responsible persons at national and health establishment level are tasked with reporting on the availability of these vital items.

PHC facilities and hospitals will report on the availability of PPE using the Stock Visibility System (SVS).

Until SVS has been deployed to hospitals, an interim measure using an Excel template is being used. The completed Excel template is sent to (ppereport@health.gov.za) at NDoH. AMD then assists to collate the information for inclusion into the NSC dashboard. PPE should only be reported on the email handle mentioned above.

It is anticipated that hospitals will start reporting using SVS by the end of May.

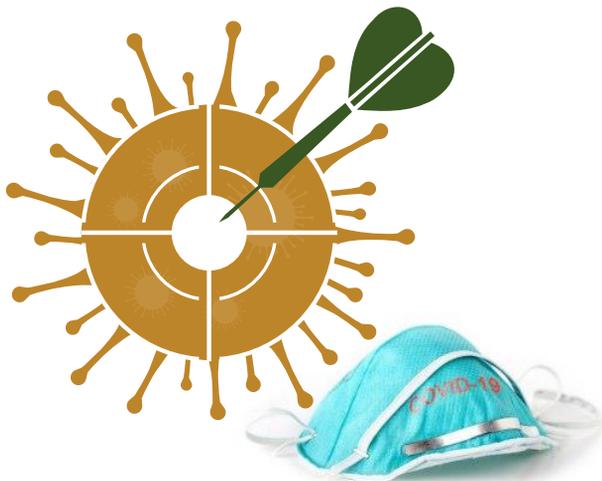


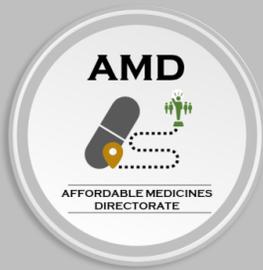
PPE Dashboard on the National Surveillance Centre

A PPE data dashboard was created on the NSC . The following views are available:

- Overall PPE availability at a provincial level and health establishment type informed by PPE description information
- All PPE Stock on Hand visualised by province and health establishment
- Stock on hand matrix for all health establishments reflecting stock on hand per PPE item, as well as a colour code of red and green to detail which items are in or out of stock.
- Stock on hand projection over four weeks highlighting the shortfall (or surplus) of each item.
- Data download page for the download of data for additional analysis as required

PPE stock on hand information is drawn by AMD from this dashboard for purposes of reporting within NDOH.





Covid-19 Update

In other news

Validity of prescriptions

Exclusion of Schedule 2, 3 and 4 medicines from the operation of certain provisions of the Medicines Act
On the 24 April 2020, the Minister of Health, Dr Zwelini Mkhize signed a notice of exclusion in terms of Section 36 of the Medicines and Related Substances Act 101 of 1965

The notice states that pharmacists may extend the dispensing of Schedule 2, 3 and 4 medicines by a further six months.. The person dispensing the prescription must be satisfied that the prescriber intended the patient to continue the treatment prescribed. This is applicable to prescriptions which are valid currently and new prescriptions

According to the notice medicines may not be dispensed for a period longer than twelve months from the date of issue. This change is effective immediately and is valid for the next 18 months (subject to the Minister's discretion).

The notice will make it easier for stable patients on chronic medicines not to have to visit a health establishment, to have prescriptions rewritten This will help to keep them safe and take pressure off the health care system.

Please see link to the document below
https://www.greengazette.co.za/documents/regulation-gazette-43260-of-30-april-2020-vol-658-no-11099_20200430-GGR-43260.pdf

Occupational Health and Safety measures in the workplace

The Department of Employment and Labour has implemented Occupational Health and Safety measures to reduce and eliminate the escalation of Covid-19 infections in workplaces. Please see link to the document below
https://www.greengazette.co.za/documents/national-gazette-43257-of-29-april-2020-vol-658_20200429-GGN-43257



National Treasury Instruction No. 05 of 2021/20

The National Treasury released Circular 05 of 2020/21. The purpose of the Circular (and accompanying annexures) is to prescribe the emergency procurement procedures to deal with the Covid-19 pandemic, specifically relating to the procurement of PPE items

Please see link to the document below
http://www.treasury.gov.za/comm_media/press/2020/Instruction%205.pdf

