

State Comptroller Of Israel | Special Report: The State of Israel's Coping with the Covid-19 Pandemic | 2021

National Level Issues

Managing Covid-19
Pandemic at the
National Level —
Decisions making
Process and
Implementation



Managing Covid-19 Pandemic at the National Level – Decisions making Process and Implementation

Background

Israel has been in a continuous state of emergency since the Declaration of Independence by the Provisional State Council in May 1948. The declaration of a state of emergency is limited to one year, and the Knesset has renewed it every year. In December 2019, the coronavirus (SARS-CoV-2 coronavirus) outbreak in China caused the Covid-19 pandemic. On January 27, 2020, the Minister of Health, by the authority vested in him under Section 20 of the Public Health Ordinance¹, declared that the Covid-19 pandemic is infectious, and poses a severe threat to public health. With the outbreak of covid-19 pandemic in Israel, the government began in March 2020 to institute emergency regulations permit it to make decisions on dealing with the crisis and impose restrictions on the public to prevent the spread of the virus without carrying out the regular legislative processes in the Knesset. On July 23, 2020, the Special Authorities to Combat the Novel Coronavirus (Temporary Provision) Law 2020 was enacted. This law authorizes the Government to declare a state of emergency in the wake of the covid-19 pandemic under the conditions outlined in the law. By declaring a state of emergency, the law sets out various restrictions that the Government is empowered to impose on the public. At the start of the Covid-19 pandemic, the then Prime Minister directed the National Security Council ("Malal") to integrate government ministries' activities during the Covid-19 pandemic.

Public Health Ordinance No. 40 for 1940; Public Health Order (Change in List of Infectious Diseases Appearing in the Schedule to the Ordinance), 2020, Collection of Regulations No. 8334.



Key figures

8,600 - 21,600 deaths

from Covid-19
according to the
mortality forecasts
of the Ministry of
Health during the
first pandemic
wave. This is in
contrast with 1,500
deaths according
to the direst
forecast of the
National
Emergency
Management
Authority (NEMA)

6,400 deaths

from Covid-19 until the middle of June 2021

Approx. 4 months

after the outbreak of Covid-19 pandemic in Israel, the Ministry of Health appointed a national coronavirus project director

114 meeting

were held by the 34th and 35th Governments (meeting in various forums headed by the Prime Minister, Government meeting, Coronavirus Cabinet meeting, and Ministerial Committee for **Restricted Areas** meeting) between January 26, 2020, and October 15, 2020

9 months

following the
Covid-19 pandemic
outbreak in Israel,
the IDF started to
fully operate the
mechanism for
breaking the chains
of transmission
("Alon"
Coronavirus
Command Center)

4%

of incoming
passengers to
Israel from Ben
Gurion Airport were
sent to quarantine
in government-run
hotels between
April 2020 and
February 2021
(some 20,000 out
of around 551,000
incoming
passengers)

7 conditions

laid down by the NSC and the national advisory team of experts as mandatory conditions for exiting the first lockdown. At the time of exiting the lockdown, two conditions were not implemented, four were partly implemented, and one was fully implemented

7,000 Mechanical ventilators

is the target for the procurement of ventilators set by the Prime Minister to prepare the healthcare system for dealing with the Covid-19 pandemic



Audit Actions



Between June 2020 and January 2021 (audit period), the State Comptroller's Office examined how the Government dealt with the Covid-19 pandemic. This audit reviewed the management of the Covid-19 pandemic at the national level as part of a special report on the State of Israel's coping with the Covid-19 pandemic, part of which was published in interim reports in September and October 2020. The audit in this report pertains primarily to the first wave of the pandemic from March to May 2020 (first wave of the pandemic) and the second wave of the pandemic from June to September 2020 (second wave of the pandemic). Regarding the issue of persons entering Israel from abroad, the audit also dealt with the third wave of the pandemic from December 2020 to February 2021. At the end of the audit, Israel embarked on a vaccination campaign for its population, which affected the pandemic. By August 2021, Israel is experiencing the fourth wave of infection. The audit was conducted at the National Security Council; Ministry of Defense – Office of Staff Assistant to Minister of Defense; National Emergency Management Authority; Department of Production and Procurement (DOPP); Ministry of Health; Ministry of Justice; IDF - Home Front Command; and the Israel Police -Enforcement Directorate. Supplementary examinations were carried out at the Prime Minister's Office – Israeli secret intelligence service (the Mossad), and the IDF Operations Directorate. During the audit, the audit team met with numerous officials managing the response to the pandemic and with experts in pandemic and emergency management.

Key findings





Decision-making during the Covid-19 pandemic in the 34th government – The 34th government held 24 meetings devoted entirely or partially to dealing with the Covid-19 pandemic. Likewise, the Ministerial Committee on Declaring Restricted Zones held seven meetings. In addition, the Prime Minister held 31 meetings in different compositions forums, some of them with the participation of ministers. These compositions generally included the National Security Council (NSC) head and the then directors general of the Ministries of Finance and Health. The audit found that the government had not empowered a coronavirus cabinet. The establishment of an emergency government had not been declared as set out in Appendix D to the Government Working Code: Emergency Government Working Procedure. It further emerged that the decisions on employing the Ministry of Defense assistance, the presentation of alternatives to the Infection forecasts, and the decision on the procurement of Mechanical ventilators during the period of the 34th government were made in the framework of different forums led by the Prime Minister, and were not discussed in the government plenum.



- **Establishment of the Covid-19 Cabinet and decision-making in the 35th government** According to the Government Decision from May 24, 2020, a ministerial committee (coronavirus Cabinet) will be established headed by the prime minister comprising 15 other ministers. The functions of the Covid-19 Cabinet, as defined in the Government Decision, were: (a) Serving as an "overarching coordinating framework for all government entities dealing with handling the coronavirus pandemic." (b) "Concentrate on the exit strategy" (c) "Dealing with preparations for a renewed outbreak of Covid-19 pandemic." From its establishment in May 2020 until October 15, 2020, the coronavirus Cabinet has held 22 meetings. The ministerial Committee on Declaring Restricted Zones held six meeting during that same period. The Government Decision did not authorize the coronavirus Cabinet to decide on behalf of the government; hence, until the reestablishment of the coronavirus Cabinet on July 26, 2020, all decisions made by it required government approval.
- Activities of the government and covid-19 cabinet during the second Covid19 pandemic wave During the period between July 3, 2020, and August 2, 2020, the coronavirus cabinet did not convene. The government did not discuss measures to stem the infection recommended by the NSC, even though during this period the number of severely ill patients increased. Given the need for rapid and immediate decision-making in dealing with a complex crisis, the delay in decision-making by the cabinet during July-August 2020 impaired the ability to reduce morbidity according to the recommendation of the professional officials, a fact that influenced the decision to impose an additional national lockdown on September 18, 2020.
- The operational capabilities of the Ministry of Health for dealing with the Covid-19 pandemic The Ministry of Health experienced difficulty in managing and providing an operational response in the domains of procurement, as well as in managing the Control Center, all of which functions were intended to reduce the pandemic risks. The national coronavirus project director² was appointed four months after the outbreak of the Covid-19 pandemic in Israel, even though the Ministry of Health's difficulties in the managerial-operational areas had been raised before the decision-makers at the beginning of the pandemic. Additionally, the national coronavirus project director was not appointed by a letter of appointment nor given definition of powers. Thus, the formulation of a program for dealing with the covid-19 pandemic was also delayed. The establishment of the Control Center in the Ministry of Health in July 2020 provided a solution for some of its missing operational capabilities.
- Functioning of the NSC in assisting the government in the management of the Covid-19 pandemic The role assigned to the NSC and the complexity of dealing with the pandemic during the first wave of the pandemic led the NSC, from time to time, to carry out functions of an operational nature on the management of the Covid-19

² Director of the "Magen Israel" ("Israel Shield") program, whose purpose is to bring about a systematic lowering of the R (reproduction) number.



pandemic, in addition to its function as an advisory body. The management of a national pandemic necessitates running a dedicated operational body empowered to implement the decisions of the political echelon. The NSC's activities during the Covid-19 pandemic were carried out based on the existing organizational structure, without any assessment of whether NSC's organizational structure is adequate for its tasks in dealing with the Covid-19 pandemic and its other regular functions role.

- Establishment of a "red team" at the NSC At the start of the crisis, the NSC deliberated over the need to set up a "red team" (adversarial approach) to challenge the working assumptions and actions; however, such a team was not formed.
- Control of the implementation of the Prime Minister and Government's **decisions** – The Government or the coronavirus Cabinet did not hold an orderly process to control and monitor the Prime Minister and Government's decisions, enabling them to know the barriers for implementing their decisions. In ten of 28 deliberations held by the Government or coronavirus Cabinet during the period between March 8, 2020, and November 8, 2020, the NSC presented a reference of the manner of implementation of previous decisions; in the 18 other deliberations, the NSC did not present to the Government plenum or coronavirus Cabinet status of implementation of their decisions.
- Process of lessons learned from the management of the crisis After the first wave of the pandemic and response to it, the NSC did not complete an overall process of drawing lessons on the management of the crisis for presenting the lessons to the decision-makers. Moreover, the Government or the coronavirus Cabinet failed to discuss lessons learned between the first and second waves of the pandemic. By the audit end date, no process of lessons learned at the national level was completed, including neither by the NSC nor by the Ministry of Health.
- Use of a reference scenario as a basis for managing the crisis In the first wave of the pandemic: until June 2020, the Government did not deliberate over a reference scenario that deals, among other things, with the extensive impacts of the Covid-19 pandemic on the economy in terms of economic, education and welfare aspects. Likewise, the then Prime Minister accepted the dire infection forecast of the Ministry of Health, without alternative forecasts being presented to the Government, despite the considerable differences between the various forecasts, among them, the disparity between the forecast of the National Emergency Management Authority (NEMA) and that of the Ministry of Health, and the influence of the decision on the selected scenario, on the preparations of the government ministries and the conduct of the economy. In the second wave of the pandemic: after the coronavirus Cabinet and the Government decided the infection forecast will be used as a working assumption ahead of the second wave of the pandemic, they decided those preparations will be made in the healthcare system alone, without examining the derivative implications on additional areas such as education, employment, economy, transportation and culture, and without directing the

Devil's advocate unit that examine unlikely scenarios and questioning common assumptions.



various ministries to make preparations accordingly. All this, despite the considerable impact the infection had during the first wave of the pandemic on all areas of life, particularly on the education system and the economy.

- Establishing an exit strategy for the first Covid-19 wave and preparing for the second wave - NSC prepared a lockdown exit plan based on the recommendations of the expert teams. Nevertheless, the audit showed that the initial measures for exiting the first lockdown from mid-April to the beginning of May 2020 had been implemented without the government discussing the NSC's lockdown exit plan and setting targets and indices for evaluating the effect of easing restrictions on the spread of the infection. When the government deliberated on May 4, 2020, over the lockdown exit strategy, it did not examine the fulfillment of mandatory conditions for exiting the lockdown, as set out in the NSC's plan, among them the implementation of an effective mechanism for breaking chains of transmission. In addition, the roadmap approved by the government for exiting the lockdown did not keep to the time intervals of two weeks between easing measures, contrary to the experts' recommendation. It was further found that during May and June 2020, the government altered the roadmap it had laid down, approving the implementation of easing measures at an even faster pace, without evaluating the effects of these measures on the spread of infection, and continued to support easing measures even after a surge in infection beyond the threshold values for two out of the three "warning lights" established.
- Handling of passengers entering Israel from abroad From the beginning of May 2020 until late December 2020, the infection rate rose steadily from 16,000 cases per month at the beginning of the said period to 338,000 cases at the period's end. The number of people entering Israel grew from 9,700 per month at the beginning of the period to 101,000 per month at the period's end, and there was no mandate to quarantine at government-run hotels. Neither the government nor the coronavirus cabinet examined the position of the Ministry of Health on administering Covid-19 tests to incoming travelers or explored other alternatives to a 14-day stay at quarantine hotels, despite the understanding that without tighter supervision and monitoring of incoming international passengers, it would be difficult to prevent the importation of a new wave of infection into Israel. Moreover, despite recognizing the danger of covid-19 variants entering Israel that could jeopardize the vaccine campaign, the measures were taken after learning of the British variant in September 2020 to stem its entry into Israel, allowing the passage of 98% of passengers arriving from abroad into home isolation. This isolation was found to be ineffective both in compliance and in enforcement. The audit, raised that the handling of incoming international passengers from Ben Gurion Airport was based on a single solution of sending 96% of incoming travelers (531,000 out of 551,000 people) to home isolation during the period between April 2020 and February 2021, a course of action, which proved to be ineffective.
- **Directorate of epidemiological investigations** The directorate of epidemiological investigations went into the whole operation after the IDF set up the "Alon Coronavirus"



Command Center" at the beginning of November 2020, some nine months after the outbreak of the Covid-19 pandemic, and six months after the Prime Minister's instruction to set it up. An instruction that was given already at the beginning of the exit from the first lockdown.

Key recommendations

- In times of crisis or emergency, when the Government decides to form a dedicated ministerial committee to perform tasks, it should assess the possibility to vest the ministerial committee with powers, as it did while managing this crisis. This framework granted the coronavirus Cabinet with powers in July 2020.
- It is recommended that the NSC conduct a comprehensive assessment, in collaboration with all the entities involved in the management of the crisis, mainly the Ministry of Health. This, to point out the correct course to provide an operational solution including a review of the current norms for handling a pandemic, as laid down before the outbreak of the Covid-19 pandemic, adapted for the unique needs entailed in managing a similar event of such an extensive scope in the future. Additionally, the Government should hold a discussion, based on the findings of the NSC's assessment, as to the various options open for the operational management of a pandemic type of crisis.
- It is recommended that the NSC complete the lessons learned processes, integrating into them the lessons from all the relevant entities. Likewise, the Government or the coronavirus Cabinet should discuss the matter of lessons learned, particularly at the end of the pandemic wave, to improve preparedness for future waves of the pandemic, should they occur.
- A reference scenario adopted by the Government should consider the full array of systemic aspects, including their impacts on the preparations of all the relevant government ministries.
- It is recommended that the NSC, in conjunction with the Ministry of Health, Ministry of Defense, Ministry of public security, and Ministry of transport and road safety, conduct a comprehensive process of learning lessons on handling incoming international passengers, to date, and formulate an overall proposal for handling this issue. Including weighing alternative courses of action for each of the following topics: Covid-19 testing of incoming passengers, abroad and in Israel; effective enforcement of mandatory quarantine on individuals who must home isolate; and a transportation solution for arriving passengers to and from Ben Gurion Airport to home isolation. Given the complexity of preventing of virus entry from abroad, it is recommended that the coronavirus Cabinet and the Government timely evaluate passengers entering and leaving Israel and ensure the provision of a solution that considers all supplementary

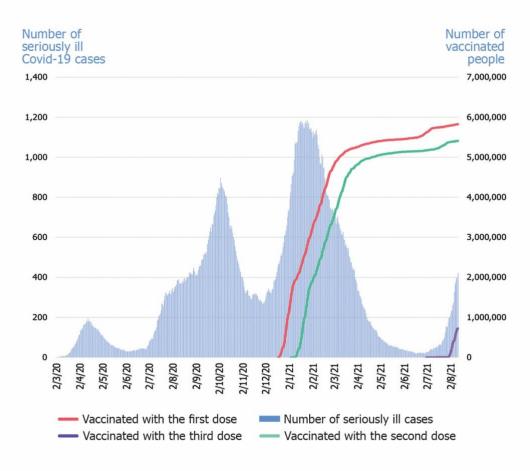


measures needed in the long term, balancing between efforts to reduce the risk of virus spread and the protection of individual rights.



🏋 It is recommended that the Prime Minister's Office and the NSC examine the organizational structure of the NSC in view of the continuation of the crisis, paying attention to its dedicated tasks relating to coping with the crisis and its other regular tasks.

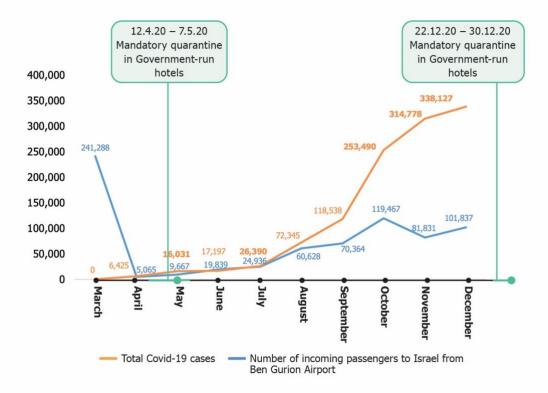
Number of Seriously Ill Cases and Number of Vaccinated People between March 2020 and August 2021



According to the Ministry of Health. Figures, as processed by the State Comptroller's Office.



Number of Covid-19 Cases and Incoming Travelers to Israel from Ben Gurion Airport between March 2020 and February 2021



According to Data.gov, combined with Israel Population and Immigration Authority data posted on the Internet, the State Comptroller's Office processed.

Mandatory quarantine was imposed between April 12, 2020, and May 7, 2020, except for exceptional cases).



Summary

The Covid-19 pandemic caused a global crisis unusual in its scope and its impact on public health and on the economic and social situation of Israel's population. The management of crises, particularly unforeseen crises, necessitates rapid decision-making and implementation of actions under pressure and uncertainty. The audit found that Israeli government quickly understood with the outbreak of the pandemic in the world, the risks posed by such an event and the need to devise measures to mitigate the danger. However, deficiencies were found in the decision and implementation processes of the following matters: decision-making by the 34th Government during the Covid-19 pandemic; establishment of the Covid-19 Cabinet and decision-making by the 35th Government; activity of the Government and Covid-19 Cabinet during the second wave of the pandemic; the Ministry of Health's dealing with the crisis; the NSC assistance to the Government to manage the crisis, control and supervise implementation of the decisions, and draw lessons from the crisis; reliance on a reference scenario; setting an exit strategy from the first wave of the pandemic and preparing for the second wave; handling of incoming passengers to Israel and establishment of a directorate of epidemiological investigations. By May 2021, Israel's population was vaccinated against Covid-19, which significantly reduced the number of confirmed cases and severely ill patients. Nevertheless, by August 2021, Israel has been hit by a fourth wave of the pandemic, enhancing the need that the said relevant bodies rectify the deficiencies specified in this report and adopt the accompanying recommendations, to optimize decisions dealing with the ongoing Covid-19 pandemic, and with future crisis of similar magnitude, and for improving the preparedness for it.