ARPHS COVID-19 IMT Situation Report (SitRep)

Incident Name: COVID-19		Incident Controller: William Rainger	
Date: 24/01/2022	Time: 1200hrs	SitRep #: 108	Response day: 160
Prepared by: Intelligence Manager		Approved by: Incident Controller	
IMT location: Room 330, Level 3, Building 15, GCC		IMT email: 9 (2) (a)	
IMT: William Rainger, Jane McEntee, Janice Miller, Joanna Goodfellow, Kathy Bendikson, Helen Hayes, Keith Suddes, Tofa Ramanlal, Simon Bowen, Mirah Sharma, Maria Poynter Or delegates			
Meeting attendees: Kathy Bendikson, Nick Eichler, Ally Holden, Tom McCarthy, Jane McEntee, Janice Miller, William Rainger, Tofa Ramanlal, Mirah Sharma, Stefan Smith, Keith Suddes, Siupolu Tavui, Joan Tuigamala, Collin Tukuitonga, Sue Waters, Masae			

SitRep distribution list: ARPHS IMT. **SitRep location:** CIMS Activation > Intelligence > SitRep
Action Plan location: CIMS Activation > Planning > Action Plan
Outbreak folder location: COVID-19 > Outbreaks Community > C-0042
IMT Risk register location: CIMS Activation > Response Manager > Risks
Workforce Requests and Recruitment: Northern Region Sharepoint
Requisition form:
- **Personnel – CLICK HERE** (located in the CIMS Activation, Logistics Folder)
- **Resources - CLICK HERE** (located in the CIMS Activation, Logistics Folder)

Response Objectives:

Response Priorities:
1. Operating in accordance with the Outbreak Strategy
2. Ensuring focus of control
3. Case investigation and interrupting transmission
4. Identify, confirm and isolate confirmed cases
5. Contact management (delegation to NITC and PHUs, retaining high risk settings; prioritise Māori and Pacific cases; maintain high level awareness essential workers)
6. On-going stakeholder management through SPOC
7. Effective communications and PIM
8. Adapting to workforce constraints
9. Ensure staff wellbeing.

COVID-19 Alert Levels		ARPHS		Risk Assessment	
National	**Regional**	**EOC Status**	**IMT Status**		▲
Traffic Light System applies	TLS - Red 23/01/2022	RED Activated (18/8)	RED Activated (18/8)	R3	S ▼

For information on Risk Assessment please refer to Appendix 1

Current Status across Auckland Region: as at 00:00hrs

Date	Confirmed/probable Community		Confirmed MIF (new)	Total Deaths
21/01	9874	11	35	26
24/01	9923	14	36	26

Incident Controller

Discussion/Actions / Tasks

- Continuity planning – reassess ability to work remotely
- Surge staff for assistance if Omicron develops rapidly.
- Delegation from remote workers.
- Not supportive of TAs remote working.
- WGS concentrating on border and community cases

Key priorities for the day:

- PHMSs on-going workforce roster shortages
- Staffing challenges – administrative support
- Front foot approach

Clinical

Issues and risks:

- PHCM staff thin on ground – needing support with appointment and calendar management.
- Infection pressure at border- test positivity about 3% and up to 6% (cf 0.4% a month ago). All MIQ cases now Omicron with increasing 7-day rolling average.
- Reconnecting NZ policy still aiming for border opening on 28 Feb which feels very at odds with omicron planning. We need to pick up border opening in Planning within 2 weeks.
- Coordination of response across multiple agencies- significant challenge and risk.
- ARPHS having to provide leadership on national-level issues. Takes away resource from rest of our response.
- Insufficient staffing esp PHMS to respond to size of outbreak- AKL anniversary/Waitangi weekend particular risks

Priorities:

- Close management of contacts and source investigation.
- Bruce has been brought in to support investigation.
- Omicron planning processing and case classification which is technically more challenging and requiring PHMS input and SOP updates.
- Support national and regional clinical governance structures especially for CIQ.
- Staff wellbeing – ONGOING

Planning

Priorities:

- Linking with the region on testing, texting, regional plan.
- Changed in isolation period
- Region concerned with supply and demand for testing.
- Identify workforce/ workload capacity
- Developing questions and enablers to share with region and MoH
- Planning team remote working plan.
- Clear Omicron planning – Framework, priorities.

Intelligence

Discussion/Actions/Tasks.

- Omicron containment (delay phase) underway - focus on testing reported via NITC
- Concentrating efforts to report on high-risk exposure events – working with NCTS to implement changes
- Daily reporting – updates for delay phase in progress
- Various meetings underway to coordinate response

Operations

Discussion/Actions/Tasks

- Management of border cases continue to consume CRU capacity – CBG taking Day 1 and Day 3, & reviewing taking CT <30 today
- Continuing to train/cycle through staff into the ART team
- Commencing work for updating and restructuring CRU training programme (1 Feb as start date from online perspective)
- CRU recruitment is progressing
- Continuing to progress working from home project – procurement underway with hA
- Lack of administration staff causing strain.
- More positive Omicron cases will consume most of the workload.
- Management of staff hours

Pae Ora

Discussion/Actions/Tasks

- Thin on staffing and resources
- Focus on how Omicron cases develop in community.
- Not changing now the prioritization process but updating daily the amount of cases able to handle.
- Miscommunication issue – need to align advice given to cases from all agencies
- Tangi Exposure events – cultural competency is essential, management guidance required
- Focus on NCTS

Pacific Team

Discussion/Actions/Tasks

- Ongoing preparedness communications with the community leaders/communities for preparing families for home isolation-all Pasifika ethnicities
- Working with PaRCH / establishing continued comms re changes in response
- A/w finalising of Pasifika Leadership Role
- Twice a week meeting with MoH. Focus on vaccination and outward testing information to communities.

Logistics

Discussion/Actions / Tasks

- Staff
  - Staff extensions for CRU coverage.
  - Fixed term contracts
- Other
  - Procurement of hardware for cru staff and working from home
  - Level 1 leaks , work approved

HR Staff Wellbeing

Discussion/Actions / Tasks
- Hub Q&A – how staff data will be managed if become case
- Onsite support from Raewynn until end of March
- Looking into wellbeing packs (Janine from Comms working on)

PIM / Communications

Discussion/Actions / Tasks
- IC Update drafted today
- Decisions on workplace process and use of the Ministry's pack?
- Regional texting as possibility? Need to finalise landing pages if linked
- Preliminary work done on resources for Lifelines/Critical Services.
- Work underway on all-staff comms on WFH (with links to relevant resources).

Response

Discussion/Actions / Tasks
- Support development of 'Transition' Plan through Recovery in to BAU – DRAFT with Controller for review 21/01/2022
- Engaged with Lifelines and AEM to discuss potential Omicron impact on critical services. Ongoing work being completed by 28/01
- Supporting the development of BCP and BAU information to assist 'Working From Home' and delivery of BAU
- Supporting 'Case in house' and working remotely (from home) BCP – Mhairi, Ally and Victoria
- Clarify ARPHS (COVID) Notifications and email distribution lists . To Jane by end of 28/01 – Alexcia, Helen, Ally
- Support the development of COVID 'Omicron' Ops structure – Jo and Tofa
- Border agencies (JEOC) will need clarity on roles and responsibility once border begins to open.
- ALL functions reminded to log any identified risks in the appropriate Register. Link to Risk Register https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/COVID-19/-%20CIMS%20Activation/03%20Response%20Manager/Risks/COVID-19%20Response%20High-Level%20Risk%20Register.xlsx?Web=1

Recovery

Discussion/Actions / Tasks
- Strategic Transition (Recovery) Framework and Transition Action Plan awaiting approval.
- 'Rest and Recuperation' for staff to be determined in the new year
- Initial Transition Action Plan submitted – DRAFT with Controller for review 21/01/2022
- Continuing to work with teams, receiving feedback
- Debrief (After Action Review Tracking): function leads to track and capture structure
  - 9 (2) (a) ██████████████ capturing feedback and suggestions

Risk Register
- *Tracking of debrief topics and improvement opportunities (please email ideas or issues for review to Response Manager - arphsresponsemanager@adhb.govt.nz).*
- *After Action Review section of the OB Closure/Summary document can be found here. https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/COVID-19/-%20CIMS%20Activation/11%20Recovery/AfterActionReview*
- *Standard practice for wellbeing and sustainable rostering principles underway, managed by other functions.*

Initial Recovery Plan
- Working DRAFT approved 15/10/2021.
- Located here: \\arphs.hanz.health.nz@SSL\DavWWWRoot\sites\N_ID\IllnessandDiseases\COVID-19\- CIMS Activation\11 Recovery\Plans

ARPHS COVID-19 IMT Situation Report (SitRep)

Incident Name: COVID-19		Incident Controller: William Rainger	
Date: 26/01/2022	Time: 1200hrs	SitRep #: 109	Response day: 162
Prepared by: Intelligence Manager		Approved by: Incident Controller	
IMT location: Zoom and Room 330, Level 3, Building 15, GCC		IMT email: 9 (2) (a) ██████████	

IMT: William Rainger, Jane McEntee, Janice Miller, Joanna Goodfellow, Kathy Bendikson, Helen Hayes, Keith Suddes, Tofa Ramanlal, Simon Bowen, Mirah Sharma, Maria Poynter
Or delegates

Meeting attendees: Martin Dawe, Ally Holden, Helen Hayes, Jane McEntee, Janice Miller, William Rainger, Tofa Ramanlal, Donna Campbell, Keith Suddes, Collin Tukuitonga, Sue Waters, Masae, Julia Peters

SitRep distribution list: ARPHS IMT. **SitRep location:** CIMS Activation > Intelligence > SitRep
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Current Status across Auckland Region: as at 00:00hrs

Date	Confirmed/probable Community		Confirmed MIF (new)	Total Deaths
24/01	9923	14	36	26
26/01	9956	12	16	27

Incident Controller

Discussion/Actions / Tasks

- Government is releasing 3 phase Omicron response framework
- Numbers of cases low but expect surge in next few days – probably over the weekend
- Need to ensure workforce for next 2 to 3 weeks
- Priority to work through details of our response in Manage It

Key priorities for the day:

- Meeting with region on end-to-end process during Stamp It Out
- Maintain current Stamp It Out for Omicron

Clinical

Issues and risks:

- PHCM staff thin on ground – needing support with appointment and calendar management.
- Infection pressure at border- test positivity about 3% and up to 6% (cf 0.4% a month ago). All MIQ cases now Omicron with increasing 7-day rolling average.
- Reconnecting NZ policy still aiming for border opening on 28 Feb which feels very at odds with omicron planning. We need to pick up border opening in Planning within 2 weeks.
- Coordination of response across multiple agencies- significant challenge and risk.
- ARPHS having to provide leadership on national-level issues. Takes away resource from rest of our response.
- Insufficient staffing esp PHMS to respond to size of outbreak- AKL anniversary/Waitangi weekend particular risks

Priorities:

- Close management of contacts and source investigation.
- Bruce has been brought in to support investigation.
- Omicron planning processing and case classification which is technically more challenging and requiring PHMS input and SOP updates.
- Support national and regional clinical governance structures especially for CIQ.
- Staff wellbeing – ONGOING

Planning

Priorities:

- Linking with the region on testing, texting, regional plan – still awaiting details, 5-10 day time frame for launch of text notifications, self-investigation portal signalled by MoH.
- Changed in isolation period, with further changes signalled as the OB develops.
- Region concerned with supply and demand for testing.
- Identify workforce/ workload capacity
- Developing questions and enablers to share with region and MoH
- Planning team remote working plan.
- Clear Omicron planning – Framework, priorities. The focus this week has been on preparation to pivot from contact tracing to Exposure Event (EE) Management in the next 2 weeks, clarifying high risk EEs (critical services and Māori and Pasifika communities), and processes.
- Supporting handover of residential housing EE Management to NRHCC from next week.

Intelligence

Discussion/Actions/Tasks.

- Cases expected to rise sharply in the coming days given the large number of contacts involved in various exposure events linked to Cluster 109 (Wedding). Continuing to link cases for now.
- Omicron containment (delay phase) underway – focus on high risk EEs. Intel will add the high-risk EE table back into the morning report to capture any late afternoon updates
- ARPHS will begin a joint morning report with NRHCC on 1st Feb 2022
- Ron has drafted a community cluster detection script – will be shared with the MoH for National use
- Concentrating efforts to report on high-risk exposure events in the coming weeks– working with NCTS to implement changes
- Supporting Ops with the referral process for EE management
- High risk exposure events – we have asked for updates to NCTS

Operations

Discussion/Actions/Tasks

- Management of border cases continue to consume CRU capacity – CBG taking Day 1 and Day 3, & reviewing taking CT <30 today
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- CRU recruitment is progressing
- Continuing to progress working from home project – procurement underway with hA
- Lack of administration staff causing strain.
- More positive Omicron cases will consume most of the workload.
- <mark>"Keep it out"</mark> focus at border.
- Management of staff hours

Pae Ora

Discussion/Actions/Tasks

- Thin on staffing and resources
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- Not changing now the prioritization process but updating daily the amount of cases able to handle.
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- Tangi Exposure events – cultural competency is essential, management guidance required
- Focus on NCTS

Pacific Team

Discussion/Actions/Tasks

- Prioritising input for managing Exposure events with planning team
- A/w finalising of Pasifika Leadership Role
- Ongoing preparedness communications with the community leaders/communities for preparing families for home isolation-all Pasifika ethnicities.
- Staffing resource for Pasifika CCM and Tautua Teams
- PaRCH not going to manage EE and will carry on with current individual case and household management. Discussions with PaRCH to confirm roles in omicron response
- Twice a week meeting with MOH. Focus on vaccination and outward testing information to communities.

Logistics

Discussion/Actions / Tasks

- Staff
  - Staff extensions for Cru coverage.
  - Fixed term contracts
- Other
  - Procurement of hardware for cru staff and working from home
  - Level 1 leaks , work approved

HR Staff Wellbeing

Discussion/Actions / Tasks

- MRCH- rapid process has caused levels of concern
- Hub Q&A – how staff data will be managed if become case
- Onsite support from Raewynn until end of March
- Looking into wellbeing packs (Janine from Comms working on)

PIM / Communications

Discussion/Actions / Tasks

- IC Update drafted today
- Decisions on workplace process and use of the Ministry's pack?
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IMT: Jane McEntee, Julia Peters, Jona Ukmata, Ally Holden, Janice Miller, Tofa Ramanlal / Kathryn Charman, Donna Campbell / Rhonda Cornes, Masae Tuaoimaalii, Mirah Sharma, Helen Hayes, Keith Suddes or delegates

ZOOM Meeting attendees: Donna Campbell, Kathryn Charman, Rhonda Cornes, Helen Hayes, Ally Holden, Jane McEntee, Janice Miller, Julia Peters, Tofa Ramanlal, Mirah Sharma, Keith Suddes, Masae Tuaoimaalii, Collin Tukuitonga, Jona Ukmata, Sue Waters, Ella Worger

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- Priority to work through details of our response in Manage It

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- Maintain current Stamp It Out for Omicron

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- Bruce has been brought in to support investigation.
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- Support national and regional clinical governance structures especially for CIQ.
- Staff wellbeing – ONGOING

Planning

Priorities:

- Linking with the region on testing, texting, regional plan – still awaiting details, 5-10 day time frame (as of 25/1/22) for launch of text notifications, self-investigation portal signalled by MoH.
- Changed in isolation period, with further changes signalled as the OB develops.
- Region concerned with supply and demand for testing.
- Identify workforce/ workload capacity
- Developing questions and enablers to share with region and MoH
- Planning team remote working plan completed and awaiting approval 1/2/22.
- Clear Omicron planning – Framework, priorities. The focus this week has been on preparation to pivot from contact tracing to Exposure Event (EE) Management in the next 2 weeks, clarifying high risk EEs (critical services and Māori and Pasifika communities), and processes. Overall draft work plan compiled to guide work compiled. Require central advise on critical services and exemptions, but planning continues in this absence.
- Supporting handover of residential housing EE Management to NRHCC from next week.
- Engagement with NRHCC on end to end process.

Intelligence

Discussion/Actions/Tasks.

- Cases expected to rise sharply in the coming days given the large number of contacts involved in various exposure events linked to Cluster 109 (Wedding). Continuing to link cases for now.
- Omicron containment (delay phase) underway – focus on high risk EEs. Intel will add the high-risk EE table back into the morning report to capture any late afternoon updates
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- Ron has drafted a community cluster detection script – will be shared with the MoH for National use
- Concentrating efforts to report on high-risk exposure events in the coming weeks– working with NCTS to implement changes
- Supporting Ops with the referral process for EE management
- High risk exposure events – we have asked for updates to NCTS

Operations

Discussion/Actions/Tasks

- Management of border cases transferred successfully to CBG 27/01
- Transition of Residential housing workload to NRHCC – proposed date 4/02
- ART and Greenlane CCM merge from 28/01;
- Prioritising on-going messaging re "ART structure" with wider team, EE management
- Working from home project – WIP; prioritising messaging with Teams
- On-going clarification re roles of other stakeholders in phase 2 and 3
- Commencing work for updating and restructuring CRU training programme (1 Feb as start date from online perspective)
- Lack of administration staff causing strain.
- "Keep it out" focus at border.
- Management of staff hours

Pae Ora

Discussion/Actions/Tasks

- Thin on staffing and resources
- Focus on how Omicron cases develop in community.
- Not changing now the prioritization process but updating daily the amount of cases able to handle.
- Miscommunication issue – need to align advice given to cases from all agencies
- Tangi Exposure events – cultural competency is essential, management guidance required
- Focus on NCTS

Rhonda and Donna covering IMT while Stefan on leave week beginning 24 January

- Request to extend Māori Welfare Lead role (██████████, ████████). ████ declined.
- MRCH has capacity to offer CCM support to ARPHS (short term)
- Work with Planning, Operations and MRCH on management of high risk Māori Communities EEs.
- Reiterated Stefan's recommendation that Pae Ora CCM move to Pae Ora ART (agreed in principle)
- Kaimanaaki extensions to end of February approved by IC
- Identified EE for Māori communities – Tangihanga, Kohanga reo, Kura (exluding secondary school) and Marae events (not rigid – open to other high risk EEs)
- Developing guidelines for triage team's engagement with Pae Ora
- Kaimanaaki role needs to be reviewed (supporting cases to supporting EE)
- Recommendation that Pae Ora CCM move to Pae Ora ART agreed in principle. Working with Jane, Julia and Operations to discuss implementation.

Pacific Team

Discussion/Actions/Tasks
- Prioritising input for managing Exposure events with planning team-guidelines for identifying high risk EE
- Ongoing preparedness and communications with the community leaders/communities for preparing families for home isolation-all Pasifika ethnicities.
- Staffing resource for Pasifika CCM and Tautua Teams
- Updating ARPHS Pasifika specific fact sheets (language specific)
- A/w finalising of Pasifika Leadership Role

Logistics

Discussion/Actions / Tasks
- Staff
  - Staff extensions for CRU coverage.
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- Other
  - Procurement of hardware for cru staff and working from home
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HR Staff Wellbeing

Discussion/Actions / Tasks
- Hub Q&A – how staff data will be managed if become case
- Onsite support from Raewynn until end of March
- Looking into wellbeing packs (Janine from Comms working on)

PIM / Communications

Discussion/Actions / Tasks
- Meeting with DPMC and NRHCC on comms around critical workers – decision on what we can tell Ak Lifeline businesses
- Decisions on workplace process and use of the Ministry's upload tool
- Request for further communications with Indian communities with NRHCC and Asian and Migrant
- Further work on all-staff comms on WFH including wellbeing support
- Newsletter on Tuesday with COVID update

Response

Discussion/Actions / Tasks
- Handover to Tofa – covering week of 31/01 to 6 Feb
- Support development of 'Transition' Plan through Recovery in to BAU – DRAFT with Controller for review 21/01/2022
- Engaged with Lifelines and AEM to discuss potential Omicron impact on critical services. Ongoing work – awaiting important information from ministry to complete package for Critical Services.
- Supporting the development of BCP and BAU information to assist 'Working From Home' and delivery of BAU
- Supporting 'Case in house' and working remotely (from home) BCP – Mhairi, Ally and Victoria
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Discussion/Actions / Tasks

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Initial Recovery Plan

- Working DRAFT approved 15/10/2021.
- • Located here: *\\arphs.hanz.health.nz@SSL\DavWWWRoot\sites\N_ID\IllnessandDiseases\COVID-19\- CIMS Activation\11 Recovery\Plans*

ARPHS COVID-19 IMT Situation Report (SitRep)

Incident Name: COVID-19		Incident Controller: Jane McEntee	
Date: 02/02/2022	Time: 1200hrs	SitRep #: 111	Response day: 171
Prepared by: Intelligence Manager		Approved by: Incident Controller	
IMT location: Zoom and Room 330, Level 3, Building 15, GCC		IMT email ▓▓▓▓▓▓	

IMT: Jane McEntee, Julia Peters, Jona Ukmata, Ally Holden, Janice Miller, Tofa Ramanlal / Kathryn Charman, Donna Campbell / Rhonda Cornes, Masae Tuaoimaalii, Mirah Sharma, Helen Hayes, Keith Suddes or delegates

ZOOM Meeting attendees: Donna Campbell, Kathryn Charman, Rhonda Cornes, Helen Hayes, Ally Holden, Jane McEntee, Janice Miller, Julia Peters, Tofa Ramanlal, Mirah Sharma, Keith Suddes, Masae Tuaoimaalii, Collin Tukuitonga, Jona Ukmata, Sue Waters, Ella Worger

SitRep distribution list: ARPHS IMT. **SitRep location:** CIMS Activation > Intelligence > SitRep
Action Plan location: CIMS Activation > Planning > Action Plan
Outbreak folder location: COVID-19 > Outbreaks Community > C-0042
IMT Risk register location: CIMS Activation > Response Manager > Risks
Workforce Requests and Recruitment: Northern Region Sharepoint
Requisition form:
- **Personnel – CLICK HERE** (located in the CIMS Activation, Logistics Folder)
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Response Objectives:

Response Priorities:
1. Operating in accordance with the Outbreak Strategy
2. Ensuring focus of control
3. Case investigation and interrupting transmission
4. Identify, confirm and isolate confirmed cases
5. Contact management (delegation to NITC and PHUs, retaining high risk settings; prioritise Māori and Pacific cases; maintain high level awareness essential workers)
6. On-going stakeholder management through SPOC
7. Effective communications and PIM
8. Adapting to workforce constraints
9. Ensure staff wellbeing.

COVID-19 Alert Levels		ARPHS		Risk Assessment	
National	**Regional**	**EOC Status**	**IMT Status**		▲
Traffic Light System applies	TLS - Red 23/01/2022	RED Activated (18/8)	RED Activated (18/8)	R3	S ▼

For information on Risk Assessment please refer to Appendix 1

Current Status across Auckland Region: as at 00:00hrs

Date	Confirmed/probable Community		Confirmed MIF (new)	Total Deaths
28/01	10,055	77	27	27
02/02	10,055	104	45	28

Incident Controller

Discussion/Actions / Tasks

- Government is releasing 3 phase Omicron response framework
- Numbers of cases low but expect surge in next few days – probably over the weekend. Expecting doubling of cases every 3-4 days.
- Need to ensure workforce for next 2 to 3 weeks
- Priority to work through details of our response in Manage It

Key priorities for the day:
- Focus high risk cases and exposure events
- Meeting with region on end-to-end process during Stamp It Out
- Maintain current Stamp It Out for Omicron

Clinical

Issues and risks:

- PHCM staff thin on ground – needing support with appointment and calendar management.
- Infection pressure at border- test positivity about 3% and up to 6% (cf 0.4% a month ago). All MIQ cases now Omicron with increasing 7-day rolling average.
- Reconnecting NZ policy still aiming for border opening on 28 Feb which feels very at odds with omicron planning. We need to pick up border opening in Planning within 2 weeks.
- Coordination of response across multiple agencies- significant challenge and risk.
- ARPHS having to provide leadership on national-level issues. Takes away resource from rest of our response.
- Insufficient staffing esp PHMS to respond to size of outbreak- AKL anniversary/Waitangi weekend particular risks

Priorities:
- Close management of contacts and source investigation.
- Bruce has been brought in to support investigation.
- Omicron planning processing and case classification which is technically more challenging and requiring PHMS input and SOP updates.
- Support national and regional clinical governance structures especially for CIQ.
- Staff wellbeing – ONGOING

Planning

Priorities:

- Linking with the region on testing, texting, regional plan – still awaiting details, 5-10 day time frame (as of 25/1/22) for launch of text notifications, self-investigation portal signalled by MoH.
- Change in isolation period, with further changes signalled as the OB develops.
- Region concerned with supply and demand for testing.
- Identify workforce/ workload capacity
- Developing questions and enablers to share with region and MoH
- Planning team remote working plan completed and awaiting approval 1/2/22.
- Clear Omicron planning – Framework, priorities. The focus this week has been on preparation to pivot from contact tracing to Exposure Event (EE) Management in the next 2 weeks, clarifying high risk EEs (critical services and Māori and Pasifika communities), and processes. Overall draft work plan compiled to guide work compiled. Require central advise on critical services and exemptions, but planning continues in this absence.
- Supporting handover of residential housing EE Management to NRHCC from next week.

- Engagement with NRHCC on end to end process.
- Pros and cons of CCM

Intelligence

Discussion/Actions/Tasks.

- The outbreak has made incursions into the Pacific Peoples population – case numbers sitting at ~30% today up from ~25% yesterday. Cluster C-112 is an exposure event at a choir practice mainly affecting the Pacific population. While we have the capacity and before the workforce are overwhelmed by case numbers we are working on this exposure event as a Cluster providing high-level reporting.
- Intel met with Toby R at MoH last week to discuss SatScan. This is a data tool used to identify community clusters using case addresses but does not involve exposure events so please be aware of limitations. ARPHS are currently running this overnight and working on creating useable reports from the outputs. Ron is sharing all data with MoH – next meeting today.
- Concentrating efforts to report on high-risk exposure events in the coming weeks – working with NCTS to implement change
- Supporting Ops with the referral process for EE management
- Concern regarding how the high risk going to be NCTS

Operations

Discussion/Actions/Tasks

- Management of Church cluster
- Transition of one full team to EE management
- Two teams doing both CCM and EE management with continued ongoing training
- Historical case management should be finalised today – and handing to CBG, support as required for next 2 weeks.
- WFH planning – should be ready to start this week
- Continuing to refine relationships with PaRCH and roles and responsibilities
- Health care worker matrix and support for NITC-CBG to manage
- Staffing is stretched for this week
- Ongoing critical roles vacant – ops management, admin, project management
- Management of border cases transferred successfully to CBG 27/01
- Transition of Residential housing workload to NRHCC – proposed date 4/02
- On-going clarification re roles of other stakeholders in phase 2 and 3
- Commencing work for updating and restructuring CRU training programme (1 Feb as start date from online perspective)
- Lack of administration staff causing strain.
- "Keep it out" focus at border.
- Management of staff hours

Pae Ora

Discussion/Actions/Tasks

- Thin on staffing and resources
- Focus on how Omicron cases develop in community.
- Not changing now the prioritization process but updating daily the amount of cases able to handle.
- Miscommunication issue – need to align advice given to cases from all agencies

- Tangi Exposure events – cultural competency is essential, management guidance required
- Focus on NCTS
- Work with Planning, Operations and MRCH on management of high risk Māori Communities EEs.
- Kaimanaaki role needs to be reviewed (supporting cases to supporting EE)
- Identified EE for Māori communities – Tangihanga, Kohanga reo, Kura (exluding secondary school) and Marae events (not rigid – open to other high risk EEs)
- Developing guidelines for triage team's engagement with Pae Ora

Pacific Team

Discussion/Actions/Tasks

- Prioritising input for managing Exposure events with planning team-guidelines for identifying high risk EE
- Continued engagement with PaRCH for support in process planning in managing high risk EE's and DC's
- Staffing resource for Pasifika CCM and Tautua Teams- capacity concerns
- Updating ARPHS Pasifika specific fact sheets (language specific)
- A/w finalising of Pasifika Leadership Role
- Ongoing preparedness and communications with the community leaders/communities for preparing families for home isolation-all Pasifika ethnicities.

Logistics

Discussion/Actions / Tasks

- Staff
  - Staff extensions for Cru coverage.
  - Fixed term contracts
- Other
  - Procurement of hardware for cru staff and working from home
  - Level 1 leaks , work approved

HR Staff Wellbeing

Discussion/Actions / Tasks

- MRCH- rapid process has caused levels of concern
- Hub Q&A – how staff data will be managed if become case
- Onsite support from Raewynn until end of March
- Looking into wellbeing packs (Janine from Comms working on)

PIM / Communications

Discussion/Actions / Tasks

- Request for messaging for Samoan communities with church cluster – work with NRHCC and Cause Collective
- Website content review – secondary contacts and move to positive result texting etc
- Further communications with Indian communities with NRHCC and Asian and Migrant
- Further work on all-staff comms on WFH including wellbeing support

Response

Discussion/Actions / Tasks

- Support development of 'Transition' Plan through Recovery in to BAU – DRAFT with Controller for review 21/01/2022
- Engaged with Lifelines and AEM to discuss potential Omicron impact on critical services. Sent stakeholder update email 01/02
- Supporting the development of BCP and BAU information to assist 'Working From Home' and delivery of BAU

- Border agencies (JEOC) will need clarity on roles and responsibility once border begins to open.
- ALL functions reminded to log any identified risks in the appropriate Register. Link to Risk Register https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/COVID-19/-%20CIMS%20Activation/03%20Response%20Manager/Risks/COVID-19%20Response%20High-Level%20Risk%20Register.xlsx?Web=1

Recovery

Discussion/Actions / Tasks

- Recovery function – On Hold pending Omicron OB response 28/01/2022
- Strategic Transition (Recovery) Framework and Transition Action Plan awaiting approval.
- Initial Transition Action Plan submitted – DRAFT with Controller for review 21/01/2022
- Continuing to work with teams, receiving feedback
- Debrief (After Action Review Tracking): function leads to track and capture structure
  - 9 (2) (a) capturing feedback and suggestions

Risk Register

- *Tracking of debrief topics and improvement opportunities (please email ideas or issues for review to Response Manager - arphsresponsemanager@adhb.govt.nz).*
- *After Action Review section of the OB Closure/Summary document can be found here. https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/COVID-19/-%20CIMS%20Activation/11%20Recovery/AfterActionReview*
- *Standard practice for wellbeing and sustainable rostering principles underway, managed by other functions.*

Initial Recovery Plan

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ARPHS COVID-19 IMT Situation Report (SitRep)

Incident Name: COVID-19		Incident Controller: Jane McEntee	
Date: 04/02/2022	Time: 1200hrs	SitRep #: 112	Response day: 173
Prepared by: Intelligence Manager		Approved by: Incident Controller	
IMT location: Zoom and Room 330, Level 3, Building 15, GCC		IMT email: 9 (2) (a) ███████	

IMT: Jane McEntee, Julia Peters, Jona Ukmata, Ally Holden, Janice Miller, Tofa Ramanlal / Kathryn Charman, Donna Campbell / Rhonda Cornes, Masae Tuaoimaalii, Mirah Sharma, Helen Hayes, Keith Suddes or delegates

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COVID-19 Alert Levels		ARPHS		Risk Assessment	
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Traffic Light System applies	TLS Red 23/01/2022	RED Activated (18/8)	RED Activated (18/8)	R3	S ▼

*For information on Risk Assessment please refer to Appendix 1

Current Status across Auckland Region: as at 00:00hrs

Date	Confirmed/probable Community		Confirmed MIF (new)	Total Deaths
02/02	10,425	104	45	28
04/02	10,614	98	37	28

Incident Controller

Discussion/Actions / Tasks

- Government is releasing 3 phase Omicron response framework
- Need to ensure workforce for next 2 to 3 weeks
- Priority to work through details of our response in Manage It

Key priorities for the day:
- Meeting with region on end-to-end process during Stamp It Out
- Maintain current Stamp It Out for Omicron

Clinical

Issues and risks:
- PHCM staff thin on ground – needing support with appointment and calendar management.
- Reconnecting NZ policy still aiming for border opening on 28 Feb which feels very at odds with omicron planning. We need to pick up border opening in Planning within 2 weeks.
- Coordination of response across multiple agencies- significant challenge and risk.
- ARPHS having to provide leadership on national-level issues. Takes away resource from rest of our response.
- Insufficient staffing esp PHMS to respond to size of outbreak- Waitangi weekend particular risks

Priorities:
- Close management of contacts and source investigation.
- Bruce has been brought in to support investigation.
- Omicron planning processing and case classification which is technically more challenging and requiring PHMS input and SOP updates.
- Support national and regional clinical governance structures especially for CIQ.
- Staff wellbeing – ONGOING

Planning

Priorities:
- Linking with the region on testing, texting, regional plan – still awaiting details, 5-10 day time frame (as of 25/1/22) for launch of text notifications, self-investigation portal signalled by MoH.
- Changed in isolation period, with further changes signalled as the OB develops.
- Region concerned with supply and demand for testing.
- Identify workforce/ workload capacity
- Developing questions and enablers to share with region and MoH
- Planning team remote working plan approved
- Clear Omicron planning – Framework, priorities. The focus this week has been on preparation to pivot from contact tracing to Exposure Event (EE) Management in the next 2 weeks, clarifying high risk EEs (critical services and Māori and Pasifika communities), and processes. Overall draft work plan compiled to guide work compiled. Require central advise on critical services and exemptions, but planning continues in this absence.
- Supporting handover of residential housing EE Management to NRHCC from next week.
- Engagement with NRHCC on end to end process.

Intelligence

Discussion/Actions/Tasks.

- The outbreak has made incursions into the Pacific Peoples population – case numbers sitting at ~30% today up from ~25% yesterday. Cluster C-112 is an exposure event at a choir practice mainly affecting
- Omicron containment (delay phase) underway – focus on high risk EEs.
- Intel met with Toby R at MoH last week to discuss SatScan. This can identify community clusters using case addresses but does not involve exposure events so please be aware of limitations. ARPHS are currently running this overnight and working on creating useable reports from the outputs. Ron is sharing all data with MoH – next meeting today.
- Concentrating efforts to report on high-risk exposure events in the coming weeks – working with NCTS to implement changes
- Supporting Ops with the referral process for EE management – working through the process to get EEs into NCTS via SHED or nominated pathway

Operations

Discussion/Actions/Tasks

- Transition of Residential housing workload to NRHCC – proposed date 4/02
- Prioritising on-going messaging re "ART structure" with wider team, EE management
- Working from home project – WIP; prioritising messaging with Teams
- On-going clarification re roles of other stakeholders in phase 2 and 3
- Commencing work for updating and restructuring CRU training programme (1 Feb as start date from online perspective)
- Lack of administration staff causing strain.
- "Keep it out" focus at border.
- Management of staff hours

Pae Ora

Discussion/Actions/Tasks

- Thin on staffing and resources
- Focus on how Omicron cases develop in community.
- Not changing now the prioritization process but updating daily the amount of cases able to handle.
- Miscommunication issue – need to align advice given to cases from all agencies
- Tangi Exposure events – cultural competency is essential, management guidance required
- Focus on NCTS
- Work with Planning, Operations and MRCH on management of high risk Māori Communities EEs.
- Kaimanaaki role needs to be reviewed (supporting cases to supporting EE)
- Kaimanaaki extensions to end of February approved by IC
- Identified EE for Māori communities – Tangihanga, Kohanga reo, Kura (exluding secondary school) and Marae events (not rigid – open to other high risk EEs)
- Developing guidelines for triage team's engagement with Pae Ora

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Discussion/Actions/Tasks

- Prioritising input for managing Exposure events with planning team-guidelines for identifying high risk EE
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- Staffing resource for Pasifika CCM and Tautua Teams- capacity concerns
- Updating ARPHS Pasifika specific fact sheets (language specific)
- A/w finalising of Pasifika Leadership Role
- Ongoing preparedness and communications with the community leaders/communities for preparing families for home isolation-all Pasifika ethnicities.

Logistics

Discussion/Actions / Tasks

Staff

- No further surge staff required.
- Assisting Carolyn with fixed term recruitment

Other

- No meals being delivered this weekend due to overstocked freezers.
- Confusion with work from home issues. Rosters haven't the capacity to service requests or troubleshoot.

HR Staff Wellbeing

Discussion/Actions / Tasks

- Hub Q&A – how staff data will be managed if become case
- Onsite support from Raewynn until end of March
- Looking into wellbeing packs (Janine from Comms working on)

PIM / Communications

Discussion/Actions / Tasks

- Request for messaging for Samoan communities with church cluster – work with NRHCC and Cause Collective
- Website content review – secondary contacts and move to positive result texting etc
- Further communications with Indian communities with NRHCC and Asian and Migrant
- Further work on all-staff comms on WFH including wellbeing support

Response

Discussion/Actions / Tasks

- Support development of 'Transition' Plan through Recovery in to BAU – DRAFT with Controller for review
- Engaged with Lifelines and AEM to discuss potential Omicron impact on critical services. Sent stakeholder update email 01/02
- Supporting the development of BCP and BAU information to assist 'Working From Home' and delivery of BAU
- Border agencies (JEOC) will need clarity on roles and responsibility once border begins to open.
- ALL functions reminded to log any identified risks in the appropriate Register. Link to Risk Register https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/COVID-19/-%20CIMS%20Activation/03%20Response%20Manager/Risks/COVID-19%20Response%20High-Level%20Risk%20Register.xlsx?Web=1

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- Debrief (After Action Review Tracking): function leads to track and capture structure
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Date: 09/02/2022	Time: 1200hrs	SitRep #: 113	Response day: 178
Prepared by: Intelligence Manager		Approved by: Incident Controller	
IMT location: Zoom and Room 330, Level 3, Building 15, GCC		IMT email: 9 (2) (a) ████	

IMT: Jane McEntee, Julia Peters, Jona Ukmata, Ally Holden, Janice Miller, Tofa Ramanlal / Kathryn Charman, Donna Campbell / Rhonda Cornes, Masae Tuaoimaalii, Mirah Sharma, Helen Hayes, Keith Suddes or delegates

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*For information on Risk Assessment please refer to Appendix 1

Current Status across Auckland Region: as at 00:00hrs

Date	Community Cases Total	New	Confirmed MIF (new)	Total Deaths
04/02	10,614	98	37	28
9/02	11,277	135	54	28

Incident Controller

Discussion/Actions / Tasks

Key priorities for the day:
- Plan required to confirm role for Phase 2

Clinical

Issues and risks:
- PHCM staff thin on ground – needing support with appointment and calendar management.
- Infection pressure at border- test positivity about 3% and up to 6% (cf 0.4% a month ago). All MIQ cases now Omicron with increasing 7-day rolling average.
- Reconnecting NZ policy still aiming for border opening on 28 Feb which feels very at odds with omicron planning. We need to pick up border opening in Planning within 2 weeks.
- Coordination of response across multiple agencies- significant challenge and risk.
- ARPHS having to provide leadership on national-level issues. Takes away resource from rest of our response.

Priorities:
- Close management of contacts and source investigation.
- Bruce has been brought in to support investigation.
- Omicron planning processing and case classification which is technically more challenging and requiring PHMS input and SOP updates.
- Support national and regional clinical governance structures especially for CIQ.
- Staff wellbeing – ONGOING

Planning

Priorities:
- Linking with the region on testing, texting, regional plan – still awaiting details, 5-10 day time frame (as of 25/1/22) for launch of text notifications, self-investigation portal signalled by MoH.
- Changed in isolation period, with further changes signalled as the OB develops.
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- Identify workforce/ workload capacity
- Developing questions and enablers to share with region and MoH
- Clear Omicron planning – Framework, priorities. The focus this week has been on preparation to pivot from contact tracing to Exposure Event (EE) Management in the next 2 weeks, clarifying high risk EEs (critical services and Māori and Pasifika communities), and processes. Overall draft work plan compiled to guide work compiled. Require central advise on critical services and exemptions, but planning continues in this absence.
- Supporting handover of residential housing EE Management to NRHCC from next week.

Intelligence

Discussion/Actions/Tasks.
- Case numbers are rising more slowly than expected – there were 135 cases yesterday.
- Case numbers are highest in the Asian and Pacific populations
- Maori case numbers increased in the last 24 hours with 15 cases
- Concentrating efforts to report on high-risk exposure events in the coming weeks – working with NCTS to implement changes
- Supporting Ops with the referral process for EE management – working through the process to get EEs into NCTS via SHED or nominated pathway

- New surveillance reports (including Maori and Pacific dedicated reports) will be produced in the next few days. Ron is sharing Satscan and SATURN outputs with MOH.
- Info re new residential housing facilities to be sent to NRHCC.

Operations

Discussion/Actions/Tasks

- Historical cases – ongoing discussions with CBG re management. Escalations now to go through exemptions
- Border workers – CBG to interview unless Case is Risk 6-9 – CBG to confirm today
- Signalled proposal for EE for schools to go CBG
- MRCH – Plan for Team Pae Ora SMO to continue to provide clinical support until 15/02; Medical team to confirm today
- MIQ referrals: new script in place to limit MIq referrals to homeless and transitional housing residents. Waiting NRHCC update an on new process for accomdation
- Transitional Housing – ongoing liaison with NRHCC re transition for their Housing Team to manage RHF EE;
- CTUT Tool: start with Teams 09/02. Workplace Pack will be updated 09/02
- EE SOP updated and out with teams.
- Review of answer services script
- Prioritising on-going messaging re "ART structure" with wider team, EE management
- Working from home project – WIP; prioritising messaging with Teams
- On-going clarification re roles of other stakeholders in phase 2 and 3

Pae Ora

Discussion/Actions/Tasks

- Thin on staffing and resources
- Focus on how Omicron cases develop in community.
- Not changing now the prioritization process but updating daily the amount of cases able to handle.
- Miscommunication issue – need to align advice given to cases from all agencies
- Tangi Exposure events – cultural competency is essential, management guidance required
- Focus on NCTS
- Identified EE for Māori communities – Tangihanga, Kohanga reo, Kura (exluding secondary school) and Marae events (not rigid – open to other high risk EEs)
- Developing guidelines for triage team's engagement with Pae Ora

Pacific Team

Discussion/Actions/Tasks

- Prioritising input for managing Exposure events with planning team-guidelines for identifying high risk EE
- Working with planning on escalation of Pasfiika EE's and triggers needed
- Continued engagement with PaRCH for support in Case and Household support, not managing DC's from EE's.
- Staffing resource for Pasifika CCM and Tautua Teams- capacity concerns
- Ongoing preparedness and communications with the community leaders/communities for preparing families for home isolation-all Pasifika ethnicities-zoom meetings with EE's communities-Communication of public health being prioritised
- Updating ARPHS Pasifika specific fact sheets (language specific)
- A/w finalising of Pasifika Leadership Role

Logistics

Discussion/Actions / Tasks

Staff
- No further surge staff required.
- Assisting Carolyn with fixed term recruitment

Other
- Confusion with work from home issues. Rosters haven't the capacity to service requests or troubleshoot.

HR Staff Wellbeing

Discussion/Actions / Tasks
- Hub Q&A – how staff data will be managed if become case
- Onsite support from Raewynn until end of March
- Looking into wellbeing packs (Janine from Comms working on)

PIM / Communications

Discussion/Actions / Tasks
- Change workplace pack so it includes the online portal and spread sheets
- Consider linking to the national packs even though not perfect to lessen inconsistency of approach
- Phase 2 comms, working with the region on timing and collateral - positive test text, change in iso/Q
- Website content review
- Further work on all-staff comms on WFH including wellbeing support

Response

Discussion/Actions / Tasks
- Support CRU Response Manager with development of Operations Plan (where required)
- Support development of 'Transition' Plan through Recovery in to BAU – DRAFT with Controller for review
- Supporting the development of BCP and BAU information to assist 'Working From Home' and delivery of BAU
- Border agencies (JEOC) will need clarity on roles and responsibility once border begins to open.
- ALL functions reminded to log any identified risks in the appropriate Register. Link to Risk Register https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/COVID-19/-%20CIMS%20Activation/03%20Response%20Manager/Risks/COVID-19%20Response%20High-Level%20Risk%20Register.xlsx?Web=1

Recovery

Discussion/Actions / Tasks
- Recovery function – On Hold pending Omicron OB response 28/01/2022
- Strategic Transition (Recovery) Framework and Transition Action Plan awaiting approval.
- Initial Transition Action Plan submitted – DRAFT with Controller for review 21/01/2022
- Wellbeing Report submitted to senior management for review 04/02 (▮▮▮▮▮)
- Continuing to work with teams, receiving feedback
- Debrief (After Action Review Tracking): function leads to track and capture structure
  - 9 (2) (a) ▮▮▮▮▮▮▮▮ capturing feedback and suggestions

Risk Register
- *Tracking of debrief topics and improvement opportunities (please email ideas or issues for review to Response Manager - arphsresponsemanager@adhb.govt.nz).*
- *After Action Review section of the OB Closure/Summary document can be found here. https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/COVID-19/-%20CIMS%20Activation/11%20Recovery/AfterActionReview*
- *Standard practice for wellbeing and sustainable rostering principles underway, managed by other functions.*

Initial Recovery Plan
- Working DRAFT approved 15/10/2021.
- Located here: *\\arphs.hanz.health.nz@SSL\DavWWWRoot\sites\N_ID\IllnessandDiseases\COVID-19\- CIMS Activation\11 Recovery\Plans*

ARPHS COVID-19 IMT Situation Report (SitRep)

Incident Name: COVID-19		Incident Controller: Jane McEntee	
Date: 14/02/2022	Time: 1200hrs	SitRep #: 114	Response day: 180
Prepared by: Intelligence Manager		Approved by: Incident Controller	
IMT location: Zoom and Room 330, Level 3, Building 15, GCC		IMT email: 9 (2) (a) ▮▮▮▮▮▮▮▮	

IMT: Jane McEntee, Maria Poynter, William Rainger, Julia Peters, Ally Holden, Janice Miller, Jo Goodfellow, Stefan Smith, Collin Tukuitonga, Masae Tuaoimaalii, Mirah Sharma, Helen Hayes, Keith Suddes or delegates

ZOOM Meeting attendees: Jane McEntee, Maria Poynter, Jo Goodfellow, Janine Kendall, Janice Miller, Sue Waters, Mirah Sharma, Keith Suddes, Masae Tuaoimaalii, Collin Tukuitonga, Simon Bowen, Kathy Bendickson

SitRep distribution list: ARPHS IMT. **SitRep location:** CIMS Activation > Intelligence > SitRep
Action Plan location: CIMS Activation > Planning > Action Plan
Outbreak folder location: COVID-19 > Outbreaks Community > C-0042
IMT Risk register location: CIMS Activation > Response Manager > Risks
Workforce Requests and Recruitment: Northern Region Sharepoint
Requisition form:
- **Personnel – CLICK HERE** (located in the CIMS Activation, Logistics Folder)
- **Resources - CLICK HERE** (located in the CIMS Activation, Logistics Folder)

Response Objectives:

Response Priorities:
1. Operating in accordance with the Outbreak Strategy
2. Ensuring focus of control
3. Case investigation and interrupting transmission
4. Identify, confirm and isolate confirmed cases
5. Contact management (delegation to NITC and PHUs, retaining high risk settings; prioritise Māori and Pacific cases; maintain high level awareness essential workers)
6. On-going stakeholder management through SPOC
7. Effective communications and PIM
8. Adapting to workforce constraints
9. Ensure staff wellbeing.

COVID-19 Alert Levels		ARPHS		Risk Assessment	
National	**Regional**	**EOC Status**	**IMT Status**		
Traffic Light System applies	TLS - Red 23/01/2022	RED Activated (18/8)	RED Activated (18/8)	R3	🔺 S 🔻

For information on Risk Assessment please refer to Appendix 1

Current Status across Auckland Region: as at 00:00hrs

Date	Community Cases		Confirmed MIF (new)	Total Deaths
	Total	New		
11/02	11,831	340	11	28
14/02	12609	253 NCTS=508	11	28

Incident Controller

Discussion/Actions / Tasks

- Awaiting confirmation from Government/MoH as to when the country will move to Phase 2, unable to move ahead of this
- Need to determine workforce requirements for phase 2 – skillsets required; numbers; gaps and where best these resources should be deployed
- Need to ensure workforce for next 2 to 3 weeks
- Priority to continue to work through details of our exposure event response

Key priorities for the day:
- Need to determine workforce requirements for phase 2
- Agree response changes as required to manage demand
- Continue to ensure health and safety of staff with focus on managing hours worked

Clinical

Issues and risks:
- Very concerned that national strategy/tactics is lagging behind were the OB is at. ARPHS needs to actively plan for phase 3 including what we will stop doing.
- Large number of high risk EEs- prisons, ARCs, Pacific community events, 105/111 call centre, border workers, HCWs.
- PHMS staff thin on ground.
- Reconnecting NZ policy border opening on 28 Feb - picking up border opening in Planning within 2 weeks.
- Coordination of response across multiple agencies- significant challenge and risk.

Priorities:
- Omicron planning processing and case classification which is technically more challenging and requiring PHMS input and SOP updates.
- Support national and regional clinical governance structures especially for CIQ.
- Staff wellbeing – ONGOING

Planning

Priorities:
- Management of covid case in house.
- Supporting Operations with document management on the Hub.
- Working on FAQ's.
- Linking with the region on testing, texting, regional plan – still awaiting details, 5-10 day time frame (as of 25/1/22) for launch of text notifications, self-investigation portal signalled by MoH.
- Changed in isolation period, with further changes signalled as the OB develops.
- Region concerned with supply and demand for testing.
- Identify workforce/ workload capacity
- Developing questions and enablers to share with region and MoH
- Clear Omicron planning – Framework, priorities. The focus this week has been on preparation to pivot from contact tracing to Exposure Event (EE) Management in the next 2 weeks, clarifying high risk EEs (critical services and Māori and Pasifika communities), and processes. Overall draft work plan compiled to guide work compiled. Require central advise on critical services and exemptions, but planning continues in this absence.
- Supporting handover of residential housing EE Management to NRHCC.

- Engagement with NRHCC on end to end process.

Intelligence

Discussion/Actions/Tasks.
- Case numbers are continuing to increase. 64% of cases are amongst Pacific peoples
- There is significant discrepancy between Episurv (253), and Ministry / NCTS reporting (508)
- The Ministry has moved to using NCTS numbers for reporting purposes.
- ARPHS reporting will be updated with NCTS numbers from this afternoon.
- Auto case creation will go live in Episurv on 17/02
- New automated surveillance report is now live, Maori and Pacific dedicated reports being developed next.

Operations

Discussion/Actions/Tasks

- CBG to manage schools, there is a lack of visibility in their linking cases to EE's.
- Critical resource issues, resignation of Operations Manager & shortage of Administrators.
- Review SHED resourcing with Kathy Bendickson.
- Concern about Operations Team working remotely.
- Border workers – CBG interviewing since 27/01
- Signalled proposal for EE for schools to go CBG
- MRCH – Plan for Team Pae Ora SMO to continue to provide clinical support until 15/02;
- MIQ referrals: new script in place to limit MIQ referrals to homeless and transitional housing residents. Waiting NRHCC update an on new process for accommodation
- Transitional Housing – ongoing liaison with NRHCC re transition for their Housing Team to manage RHF EE;
- CTUT Tool implementation
- EE SOP updated and out with teams.
- Review of answer services script
- Working from home project – awaiting some equipment
- On-going clarification re roles of other stakeholders in phase 2 and 3
-

Pae Ora

Discussion/Actions/Tasks
- SOP required for management of Kohang Reo, Kura etc.
- Concern raised about the number of stakeholders managing the process.
- Focus on how Omicron cases develop in community.
- Work with Planning, Operations and MRCH on management of high risk Māori Communities EEs.
- Identified EE for Māori communities – Tangihanga, Kohanga reo, Kura (exluding secondary school) and Marae events (not rigid – open to other high risk EEs)
- Developing guidelines for triage team's engagement with Pae Ora

Pacific Team

Discussion/Actions/Tasks
- Prioritising input for managing Exposure events with planning team-guidelines for identifying high risk EE
- CBG escalation Pasifika input needed of ECE/language nests high risk-impacts
- Triggers of high risk Pasifika EE's continued work with planning
- Continued Support PaRCH with processes
- Staffing resource for Tautua Teams- capacity concerns on-going

- Continued zoom meetings with EE's communities and leaders-Communication of public health being prioritised
- Support with PFL with families in Auckland of Moana Pasifika players in Queenstown
- Finalising of Pasifika Leadership Role

Logistics

Discussion/Actions / Tasks

Staff
- No further surge staff required.
- Assisting Carolyn with fixed term recruitment

Other
- No meals being delivered this weekend due to overstocked freezers.
- Confusion with work from home issues. Rosters haven't the capacity to service requests or troubleshoot.

HR Staff Wellbeing

Discussion/Actions / Tasks
- MRCH- rapid process has caused levels of concern
- Hub Q&A – how staff data will be managed if become case
- Ongoing support from Raewynn until end of March
- Looking into wellbeing packs (Janine from Comms working on)

PIM / Communications

Discussion/Actions / Tasks
- Working with Planning on Exposure Event processes.
- Awaiting updated ADHB advice re: staff travel once borders re-open. Will reflect in ARPHS comms
- Pasifika meeting this afternoon for briefing on Cause Collective comms planning
- Possible MEDINZ required (NRHCC would action) re: updated RHP and no need for primary care to advise us of new COVID cases.
- Continue to await Phase 2 activation and advice, particularly in relation to contemporaneous isolation, isolation times, testing regimes and clock 'resetting'. Significant work to update website.
- Comms to alleviate high demand in SHED. Webpage pointing MOP, business and HCW to key information elsewhere – link from home page and email contact form. Answer services script.
- Working on business stakeholder engagement plan with NRHCC, approach to MBIE

Response

Discussion/Actions / Tasks
- Support CRU Response Manager with development of Operations Plan (where required)
- Support development of 'Transition' Plan through Recovery in to BAU – DRAFT with Controller for review
- ALL functions reminded to log any identified risks in the appropriate Register. Link to Risk Register https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/COVID-19/-%20CIMS%20Activation/03%20Response%20Manager/Risks/COVID-19%20Response%20High-Level%20Risk%20Register.xlsx?Web=1

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