



Incident Controller	Jane McEntee / William Rainger		
Incident Management Team Members	As per roster		
Action Plan Number	021	AP Timeframe	14 Days
Incident	COVID-19 Case August 2021 (17/8) - OB-21-109884-AK (C-0042)		
IMT status	Stood Up with EOC		
Date / Time approved	30/1/2022	Operational Phase covered	22/01/2022 – 04/02/2022
ARPHS Response Level	RED		
Situation Summary	<p>Brief description of the situation:</p> <ul style="list-style-type: none"> An unexpected community case of COVID-19 was reported 17/8/21, with unknown link to border. WGS has confirmed a connection to the NSW clusters. New Zealand moved to RED setting on 23/1/2021 due to Omicron variant in the community. The current Omicron cases have links to the Auckland and Nelson/Marlborough regions. Delta transmission continues in the Auckland region; Māori and Pasifika communities are greatly impacted. Omicron variant is impacting Asian communities. Omicron variant outbreak planning continues based on the NRHCC model (5 phases) – a framework with supporting actions is being developed and refined with a focus on preparations to pivot from ARPHS doing contact tracing to exposure event management focusing on vulnerable populations and critical workforce within approximately 2 weeks (by early February 2022). This will need to adjust to the release of national planning (expected 26/1/22) around the 3 phases of outbreak management signalled by the government on 23/1/22. Reconnecting NZ policy is continuing at this stage with borders due to open on 28th February. Future planning is required and will be progressed in the next couple of weeks. A further devolved model has been established regionally with home isolation (Whānau HQ) and case and contact management occurring through NITC. Ongoing support from other PHUs, although this is 		

	<p>reducing due to cases occurring in other regions.</p> <ul style="list-style-type: none"> • NITC-CBG is working as a separate team under NITC and will manage low-medium complexity cases. • Coordination hubs (MRCH and PaRCH) stood-up to support an equitable regional response; support provided by ARPHS. • ARPHS workforce is experiencing the effects of fatigue due to the cumulative effect of constant outbreaks for the last 3 years. • Pre-planning for January for quarantine-free travel from Australia has been paused following Cabinet decision to delay opening to late February. • A number of significant policy changes were implemented before the Christmas period. The Rainbow chart has been updated (most recently 23/1/22) and lengthened isolation and quarantine periods, which is likely to change again when Omicron cases surge.
<p>Action Taken</p>	<p>Details of operational plan:</p> <ul style="list-style-type: none"> • Progress implementation of Omicron outbreak framework. • Support national and regional clinical governance structures especially for Whānau HQ. • Core public health activities are ongoing with support from other public health units and NITC. • ARPHS-wide BCP enacted. • Ongoing rapid review policy work and updating of documentation. • Working closely with NRHCC on regional preparedness activities and resource requirements. • Working closely with NITC on activities and resource requirements. • All areas of CIMS on-going.
<p>Aim / Goal (for this AP timeframe)</p>	<ol style="list-style-type: none"> 1. Act in accordance with Te Tiriti o Waitangi including Māori health equity. 2. Ensure an equitable response. 3. Support workforce welfare. 4. Establish the outbreak response and plan ahead as to potential trajectory. 5. Identify the outbreak source. 6. Suppress on-going transmission. 7. Support affected communities. 8. Ensure a safe and sustainable response with effective use of regional

	<p>workforce supply.</p> <p>9. Ensure clear communication and documentation.</p>
Objectives / Priorities	<p>Response Priorities:</p> <ul style="list-style-type: none"> • Ensuring staff well-being. • Operate in accordance with Outbreak Strategies and frameworks. • Ensure clear locus of control related to ARPHS accountabilities. • Engage, Isolate and Refer confirmed Delta cases. Stamp It Out approach for suspected/confirmed Omicron cases (until manage it approach approved). • Contact management (delegation to NITC and their contracted providers, and PHUs, retaining high risk settings; prioritise Māori and Pacific cases; maintain high level awareness of high risk workplaces). • Ensure processes and resources for emerging environments and exposure events. • Support Pasifika Community. • Support Māori whānau. • Effective communications and PIM. • Adapting to workforce constraints.
Plan of Action	<ul style="list-style-type: none"> • Case investigation, contact tracing, and ongoing case and contact management. • Exposure event management. • Further strategic intent discussions and documentation. • Ensure timely referrals to regional services. • All functions continue to support response. • Continue stakeholder engagement and communications. • Monitor internal capacity and demand.
Specific Tasks & Information Flow	<ul style="list-style-type: none"> • All CIMS roles rostered. • All CIMS roles emails enacted.
Immediate tasks	<p>Incident controller:</p> <ul style="list-style-type: none"> • Liaise with NRHCC, DHBs, and MoH. • Chair and manage decision making at IMT. • Identify and support risk mitigation.

- Revise Outbreak strategy, Strategic planning and priorities.
- Staff health and wellbeing.

Clinical Partner: in partnership with Incident Controller:

- Support implementation of the Outbreak Strategy.
- Liaison with MoH and regional/national clinical colleagues.
- Decision making on clinical aspects and risks.
- Oversee and monitor outbreak response and trajectory.
- Advocacy re load on ARPHS to external agencies.
- Strategy for next period- ongoing meetings with MoH and NRHCC.

Response:

- Maintain Risk and Issues Register.
- Support IMT, EOC and response activities.
- Support Operations troubleshooting.
- Provide expert advice on emergency management and response mechanisms.
- Monitor individuals' and team wellbeing during incident management and identify psychological and social impacts on self, team and functions and share these with welfare function.

Planning:

- Action Plan published and updated weekly.
- Develop strategies to support Covid activities.
- Develop SOPs to support Covid activities.
- Develop operations models and frameworks.
- Support operational decision making for issues or new situations.
- Support the implementation of national models and frameworks.

Intelligence:

- Provide accurate and timely epidemiological and surveillance reports to ARPHS, regionally and nationally.
- Receive and prioritise data/information requests; respond as needed to intelligence request to inform Alert Level settings.
- Maintain and distribute Situation Report.

Logistics:

- Develop workforce strategy.
- Monitor outbreak resource requirements and source additional surge workforce.
- Maintain roster in alignment with workforce planning model.
- Ensure resourcing meets the cultural requirements for an equitable response.
- Provide training to existing and new staff.
- Provide onboarding requirements for new staff (resource and security).
- Maintain lists including health and safety requirements for individual staff.
- Manage site requirements/facilities.
- Manage IT requirement.
- Sourcing of other incidentals and supplies.
- Catering for response staff.

Operations:

- Case and contact management.
- Exposure event management.
- Ensure appropriate public health risk assessment and management of high risk settings.
- Manage and assess risks including clinical safety.
- Deliver Operating Model structure and supporting documentation.
- Ensure strong linkages and relationships for internal and external public health management.
- Ensure appropriate cultural management of cases and contacts.
- Support kaupapa Māori approaches and Pae Ora team (including the mobile team).
- Coordinate operational outbreak management activities with NRHCC, CBG, NITC and other PHUs.
- Support welfare of the staff.

Communications:

- Maintain public information and stakeholder collateral.
- Continue reporting and communication with internal and external stakeholders.

	<ul style="list-style-type: none"> • Support the development of information packs and website materials. • Manage media inquiries and information for daily standup and MOH media releases. • Support the development of national communication messaging about the changing role of contact tracing and public health. <p>Welfare/Wellbeing:</p> <ul style="list-style-type: none"> • Monitor staff wellbeing. • Create and implement a wellbeing plan. • Maintain health and safety plan. <p>Pae Ora:</p> <ul style="list-style-type: none"> • Support case and contact / exposure event management. • Evaluate and revise Pae Ora Model. • Lead response for Māori whanau clusters and exposure events. • Support MRCH operations. <p>Pacific Team:</p> <ul style="list-style-type: none"> • Support case and contact / exposure event management. • Focus on effective relationship management. • Support PRCH set-up and operations. <p>Recovery</p> <ul style="list-style-type: none"> • Lead the development of the Recovery Plan and transition from Response through to BAU. • Engage and consult with key stakeholders and partners in preparation for managing the recovery process. • Lead/facilitate meetings, debriefs and reviews with a wide range of participants to collect, record and monitor recovery needs. • Maintain and theme feedback in the After Action Review Tracker. • Assemble and manage resources for recovery, proportionate to the scale and complexity. • Support medium and long term planning activities.
<p>Limiting Factors</p>	<ul style="list-style-type: none"> • Staff wellbeing, fatigue and stress. • Workforce competency. • Sustaining roles and responsibilities.

	<ul style="list-style-type: none"> • Capacity and surge requirements, workforce constraints. • Identifying, attaining and retaining skilled personnel. • Ability to respond to other emergent events (eg concurrent disease outbreak). • Physical space in the ARPHS office.
Resource Needs	<ul style="list-style-type: none"> • Suitably skilled and trained personnel. • Case and contact management expertise. • Leadership competencies and breadth in lead roles. • Culturally competent staff. • IMT function management capacity and availability. • PIM and Communications – internal and external. • Facilities and IT. • Roster system that is suitable for all users. • A streamlined national coordinated response led by NITC, including technology enhancements.
Information Flow	<p>All information is saved in:</p> <p>https://arphs.hanz.health.nz/sites/N_ID/InnessandDiseases/COVID-19</p>
Public information Plan	<ul style="list-style-type: none"> • Stakeholder communications including cultural response support from NRHCC. • Public messaging. • Regional communication framework.
Communications	<p>All communications between staff should cc the appropriate EOC email account.</p>
Organisation	<p>Details of any HR or Staff welfare issues:</p> <p>Resourcing of response to be considered to ensure staff welfare.</p>
Recovery	<p>Consider the Continuous Quality Improvement process in parallel with response.</p> <p>A surge protocol shared and confirmed with the region to streamline processes and timeframes of deployment to allow staff to rest and recover.</p>
AP Prepared by	<p>Planning Manager</p>
AP Approved by	<p>ARPHS Controller</p>

