Monday 16th August – COVID ready steering group escalation tool scenario test.

Scenario: it is 4pm and Prime Minister just had press conference to say there is 1 community case in Wellington and North Island going into lockdown alert level 4 from midnight tonight.

Triggers

COMMUNITY PREVALENCE: Very Low

VOLUME OR COMPLEXITY OF POSSIBLE / ACTUAL PATIENTS WITH COVID-19: Moderate

WELLBEING OF OUR PEOPLE: Moderate WORKFORCE CAPACITY: Moderate

EXTERNAL: Low

VOLUME OR COMPLEXITY OF NON COVID-19 WORK: Mild

Controls

Environmental Settings and Access to Hospital & Community Services Which we Currently Provide

Promote the use of COVID-19 tracer app – To go compulsory?

Physical distancing signage and physical changes to spaces – to review

Compulsory use of face coverings and supply face coverings at entrances – to align with government Prioritise Māori and Pacific visitor access., for compassionate care – need better definition Limit commercial onsite food offerings – re wording and think about how to frame this one

Delivery of Usual Care and Services (eg planned care): modality & volume including ethical prioritisation

Work with regional DHBs and private sector to identify alternative facilities or patient flows if required – we would start the process, Sally Roberts to take this point and figure out how it can be done Default to telehealth and virtual consultations where appropriate – Work in progress with NRHCC and will have an update by the end of the week – probably would need to change wording to 'implement' Implement alternative models and modalities of care where hospital-based care is not essential – to review wording

Deployment of our People & Resources

Empower community to guide us around leadership and to direct ways in which ADHB can support Māori and Pasifika communities – to be reviewed, wording

Identify and empower Māori and Pasifika staff to take lead roles in establishing community links – to be reviewed, wording

Ensure staff who could be deployed understand contingency plans and their roles in those plans – to review wording on this one

Monitor and evaluate stock and resource use and adjust use and prioritisation as appropriate – we need to be clear who the owner is

Supportive Measures for our People's Safety & Wellbeing

Utilise leadership structures to build and prioritise wellbeing and teamwork – could be BAU Prepare teams for escalating scenarios – to work on wording, have refresh and plans done Initiate staff tracing/contact pathways and management. – needs testing IPC

Inform and deploy vulnerable staff to safe work arrangements – Occ Health to review and come back to us with a plan

Put plans in place for staff with work restrictions that exist when there is COVID-19 in the community – would communicate and review, vaccinated staff vs. non vaccinated staff Support staff to access local testing if they have COVID/ILI symptoms – BAU

Patient Streaming Pathways

Activate critical care escalation plan - stage 1 - work has been done around it, need review to see what needs to be done, Kerry reviewing and will catch up

Review and agree ARC flows with regional ARC steering group (in and out of hospital) - BAU

Training & Education

Limit training and education to real-time clinical training related to COVID management – IPC, Sally R to work around this one

Undertake training and education in managing whānau distress and conflict relating to quarantine. Engage with Kaumatua and community groups – to work on it when the time comes, keep it red Undertake additional training and upskilling of surge capacity staff - consider unforeseen consequences of deploying staff – to work on it when the time comes, keep it red Train or practise ways of working which can change and adapt in response to the COVID situation – to keep it red and work around it maintain OFF

Focus on teams and communication - address specific issues relating to communication and staff identification for example when in PPE – IPC, Sally R to work on this one