

Incident Controller	Jane McEntee / William Rainger		
Incident Management Team Members	As per roster		
Action Plan Number	#06	AP Timeframe	7 Days
Incident	COVID-19 Case August 2021 (17/8) - OB-21-109884-AK (C-0042)		
IMT status	Stood Up with EOC		
Date / Time approved		Operational Phase covered	25/09/2021 to 1/10/2021
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. The Auckland region is at Alert L3. A new outbreak cluster has occurred and transmission continues in the region with some cases being highly mobile and including multiple transitional housing facilities. Proportion of unlinked cases continue to require resourcing. Māori and Pasifika communities greatly impacted. Cases and contacts with complex needs. Higher rate of hospitalisation than previous outbreaks and one death. ARPHS is the lead agency for outbreak management across Auckland. ARPHS workforce are experiencing the effects of extreme fatigue due to the long hours staff are working and the cumulative effect of constant outbreaks for the last 3 years. Planning is occurring for delegating Covid case and contact management, revising key priorities and considering changes to operations models based on current context. 		

	<ul style="list-style-type: none"> • Support Pasifika Community • Support Māori whanau • Effective communications and PIM • Adapting to workforce constraints •
<p>Plan of Action</p>	<ul style="list-style-type: none"> • Case investigation, contact tracing, and ongoing case and contact management. • Progress source investigation. • Complete records in NCTS. • Advice and assistance with contact groups testing strategy and any wider community testing. • Support wellbeing and manaaki requirements for cases and contacts. • All functions continue to support response • Continue stakeholder engagement and communications. • Monitor internal capacity and demand.
<p>Specific Tasks & Information Flow</p>	<ul style="list-style-type: none"> • All CIMS roles rostered • All CIMS roles emails enacted.
<p>Immediate tasks</p>	<p>Incident controller:</p> <ul style="list-style-type: none"> • Liaise with NRHCC, DHB's, 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. <p>Clinical Partner: in partnership with Incident Controller:</p> <ul style="list-style-type: none"> • support implementation of the Outbreak Strategy • liaison with MoH clinical colleagues • decision making on clinical aspects and risks • oversee and monitor outbreak response and trajectory • review source investigation documents • 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.

Planning:

- Action Plan published and updated weekly
- Chair capacity and demand meeting
- Develop strategies to support Covid activities
- Develop SOPs to support Covid activities
- Provide workforce modelling and projections
- 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 reports to ARPHS, regionally and nationally
- Source investigation and unlinked cases investigation
- 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 equipment and resources
- Staff well-being (sustenance for staff working weekends and overtime).

Operations:

- Case and contact management
- Support allocations and workload management across Operations
- Ensure an appropriate public health response
- Ensure cluster management
- Manage and assess risks including clinical safety
- Deliver Operational Plan 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.
- Coordinate operational outbreak management activities with NRHCC, NITC and other PHUs.

Communications:

- Maintain public information and stakeholder collateral
- Continue reporting and communication with internal and external stakeholders
- Manage media inquiries

Welfare/Wellbeing:

- Monitor staff wellbeing – ARPHS response staff are tired and stressed from the demands of dealing with COVID-affected cases and contacts (many are in a distressed state)
- Create wellbeing plan
- Maintain health and safety plan

Pae Ora:

-
- Support case and contact management

	<ul style="list-style-type: none"> • Evaluate and revise Pae Ora Model • Lead response for Māori whanau cluster <p>Pacific Team:</p> <ul style="list-style-type: none"> • • Support case and contact management • Focus on effective relationship management <p>Recovery</p> <ul style="list-style-type: none"> • Obtain approval and sign off of Initial Recovery Plan and Strategic Recovery Plan for implementation • Maintain and theme feedback in the After Action Review Tracker • Support and progress debriefing activities as required • Support medium and long term planning activities.
Tasks following transition to HCEG-led regional response	TBC
Limiting Factors	<ul style="list-style-type: none"> • Staff wellbeing, fatigue and stress • Sustaining roles and responsibilities • Capacity and surge requirements, workforce constraints • Identifying, attaining and retaining skilled personnel • Ability to respond to other emergent events (eg concurrent disease outbreak) • National PHU capacity • Physical space in the ARPHS office
Coordination Measures	TBC
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

	<ul style="list-style-type: none"> • Roster system that is suitable for all users • A streamlined national coordinated response led by NITC.
Information Flow	<p>All information is saved in:</p> <p>https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/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	All communications between staff should cc the appropriate EOC email account.
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	Planning Manager
AP Approved by	ARPHS Controller
Distribution	ARPHS IMT



Incident Controller	Jane McEntee / William Rainger		
Incident Management Team Members	As per roster		
Action Plan Number	#07	AP Timeframe	7 Days
Incident	COVID-19 Case August 2021 (17/8) - OB-21-109884-AK (C-0042)		
IMT status	Stood Up with EOC		
Date / Time approved		Operational Phase covered	2/10/2021 to 8/10/2021
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. The Auckland region is at Alert L3 with a plan to roll out a three stage roadmap to ease restrictions over the next few weeks. Covid outbreak spread to Waikato Transmission continues in the region. Projected increase in R value. Modelling suggests R = 1.2 (20% increase every 4 days) Māori and Pasifika communities greatly impacted. Cases and contacts with complex needs. Higher rate of hospitalisation than previous outbreaks and one death. ARPHS is the lead agency for outbreak management across Auckland. ARPHS workforce are experiencing the effects of extreme fatigue due to the long hours staff are working and the cumulative effect of constant outbreaks for the last 3 years. Planning is occurring for delegating Covid case and contact management, revising key priorities and considering changes to 		

	operations models based on current context.
Action Taken	<p>Details of operational plan:</p> <ul style="list-style-type: none"> • Case and Contact Management ongoing. • ARPHS-wide BCP enacted. • Workforce surge monitoring and signaling ongoing requirements with DHBs and other organisations providing surge staff. • Levers for reducing and sharing workload include a focused control strategy, using alternative providers and delegations models. • Developing a ‘Living with Covid’ Contingency Strategy • Escalation to the region and MoH current state and pressures • Transferring of some responsibilities to other agencies. • Working closely with NRHCC on activities and resource requirements. • All areas of CIMS on-going.
Aim / Goal (for this AP timeframe)	<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. Stop on-going transmission. 7. Support affected communities. 8. Ensure a safe and sustainable response with effective use of regional workforce supply. 9. Ensure clear communication and documentation.
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 • Identify, confirm and isolate confirmed cases • Progress transmission chains analysis. • Contact management (delegation to NITC, external providers and PHUs, retaining high risk settings; prioritise Māori and Pacific cases;

Response:

- Maintain Risk and Issues Register
- Support IMT, EOC and response activities.
- Support Operations troubleshooting.
- **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
- Chair capacity and demand meeting
- Develop strategies to support Covid activities
- Develop SOPs to support Covid activities
- Provide workforce modelling and projections
- 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 reports to ARPHS, regionally and nationally
- Source investigation and unlinked cases investigation
- 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
- Support allocations and workload management across Operations
- Ensure an appropriate public health response
- Ensure cluster management
- Manage and assess risks including clinical safety
- Deliver Operational Plan 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 implementation of the new team (including the mobile team).**
- Coordinate operational outbreak management activities with NRHCC, NITC and other PHUs.
- **Coordinate delegations of cases, contacts and EE to 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
- Manage media inquiries and information for daily standup and MOH media releases

Welfare/Wellbeing:

- Monitor staff wellbeing – ARPHS response staff are tired and stressed from the demands of dealing with COVID-affected cases and contacts (many are in a distressed state)
- Create wellbeing plan

	<ul style="list-style-type: none"> • Maintain health and safety plan <p>Pae Ora:</p> <ul style="list-style-type: none"> • Support case and contact management • Evaluate and revise Pae Ora Model • Lead response for Māori whanau cluster • Stand up mobile unit <p>Pacific Team:</p> <ul style="list-style-type: none"> • Support case and contact management • Focus on effective relationship management <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.
Tasks following transition to HCEG-led regional response	TBC
Limiting Factors	<ul style="list-style-type: none"> • Staff wellbeing, fatigue and stress • Sustaining roles and responsibilities • 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
Coordination Measures	TBC
Resource Needs	<ul style="list-style-type: none"> • Suitably skilled and trained personnel

	<ul style="list-style-type: none"> • 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.
Information Flow	<p>All information is saved in:</p> <p>https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/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	All communications between staff should cc the appropriate EOC email account.
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	Planning Manager
AP Approved by	ARPHS Controller
Distribution	ARPHS IMT



Incident Controller	Jane McEntee / William Rainger		
Incident Management Team Members	As per roster		
Action Plan Number	#08	AP Timeframe	7 Days
Incident	COVID-19 Case August 2021 (17/8) - OB-21-109884-AK (C-0042)		
IMT status	Stood Up with EOC		
Date / Time approved		Operational Phase covered	9/10/2021 to 15/10/2021
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. The Auckland region is at Alert L3 with a plan to roll out a three stage roadmap to ease restrictions dependent on the outbreak trajectory. . Transmission continues in the Auckland and Waikato regions. Projected increase in R value. Modelling suggests R = 1.2-1.3. Māori and Pasifika communities greatly impacted. Cases and contacts with complex needs. Higher rate of hospitalisation than previous outbreaks and one death. ARPHS is the lead agency for outbreak management across Auckland. Planning is underway for ARPHS to shift from the current scope of “clinical public health” to “population public health” with responsibilities for symptom checking, testing and Manaaki transferred to other agencies which can scale up to their response. ARPHS workforce are experiencing the effects of extreme fatigue due to the long hours’ staff are working and the cumulative effect of constant outbreaks for the last 3 years. 		

	<ul style="list-style-type: none"> •
Action Taken	<p>Details of operational plan:</p> <ul style="list-style-type: none"> • Core public health activities are ongoing with support from other public health units, DHBs and contact tracing providers. Levers for reducing and sharing workload include a new strategy for the current situation, using alternative providers and delegations to PHUs and NITC. • ARPHS-wide BCP enacted. • Workforce surge monitoring and signaling ongoing requirements with DHBs and other organisations providing surge staff. • Development continues on the Living with Covid Strategy and operating framework. • Escalation to the region and MoH current state and pressures • Transferring of some responsibilities to other agencies. • Working closely with NRHCC on activities and resource requirements. • All areas of CIMS on-going.
Aim / Goal (for this AP timeframe)	<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. Stop on-going transmission. 7. Support affected communities. 8. Ensure a safe and sustainable response with effective use of regional workforce supply. 9. Ensure clear communication and documentation.
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 • Identify, confirm and isolate confirmed cases • Progress transmission chain analysis.

	<ul style="list-style-type: none"> • Contact management (delegation to NITC, external 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
<p>Plan of Action</p>	<ul style="list-style-type: none"> • Case investigation, contact tracing, and ongoing case and contact management. • Reduce burden on intelligence, operations functions. • Complete records in NCTS. • Support wellbeing and manaaki requirements for cases and contacts. • All functions continue to support response • Continue stakeholder engagement and communications. • Monitor internal capacity and demand.
<p>Specific Tasks & Information Flow</p>	<ul style="list-style-type: none"> • All CIMS roles rostered • All CIMS roles emails enacted.
<p>Immediate tasks</p>	<p>Incident controller:</p> <ul style="list-style-type: none"> • Liaise with NRHCC, DHB's, 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. <p>Clinical Partner: in partnership with Incident Controller:</p> <ul style="list-style-type: none"> • 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
- Chair capacity and demand meeting
- Develop strategies to support Covid activities
- Develop SOPs to support Covid activities
- Provide workforce modelling and projections
- 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 reports to ARPHS, regionally and nationally
- Source investigation and unlinked cases investigation
- 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
- Support allocations and workload management across Operations
- Ensure an appropriate public health response
- Ensure cluster management
- Manage and assess risks including clinical safety
- Deliver Operational Plan 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 implementation of the new team (including the mobile team).
- Coordinate operational outbreak management activities with NRHCC, NITC and other PHUs.
- Coordinate delegations of cases, contacts and EE to 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
- Manage media inquiries and information for daily standup and MOH media releases

Welfare/Wellbeing:

- Monitor staff wellbeing – ARPHS response staff are tired and stressed

	<p>from the demands of dealing with COVID-affected cases and contacts (many are in a distressed state)</p> <ul style="list-style-type: none"> • Create wellbeing plan • Maintain health and safety plan <p>Pae Ora:</p> <ul style="list-style-type: none"> • Support case and contact management • Evaluate and revise Pae Ora Model • Lead response for Māori whanau cluster • Stand up mobile unit <p>Pacific Team:</p> <ul style="list-style-type: none"> • Support case and contact management • Focus on effective relationship management <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 • Sustaining roles and responsibilities • 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
<p>Resource Needs</p>	<ul style="list-style-type: none"> • Suitably skilled and trained personnel • Case and contact management expertise • Leadership competencies and breadth in lead roles

	<ul style="list-style-type: none"> • 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.
Information Flow	<p>All information is saved in:</p> <p>https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/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	All communications between staff should cc the appropriate EOC email account.
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	Planning Manager
AP Approved by	ARPHS Controller
Distribution	ARPHS IMT



Incident Controller	Jane McEntee / William Rainger		
Incident Management Team Members	As per roster		
Action Plan Number	#09	AP Timeframe	7 Days
Incident	COVID-19 Case August 2021 (17/8) - OB-21-109884-AK (C-0042)		
IMT status	Stood Up with EOC		
Date / Time approved		Operational Phase covered	16/10/2021 to 22/10/2021
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. The Auckland region is at Alert L3 Transmission continues in the Auckland region Projected increase in R value. Modelling suggests R = 1.2-1.3. In this situation we can expect around 100 cases/day by the end of October. Māori and Pasifika communities greatly impacted. Cases and contacts with complex needs. Higher rate of hospitalisation than previous outbreaks and one death. ARPHS is the lead agency for outbreak management across Auckland. ARPHS workforce are experiencing the effects of extreme fatigue due to the long hours staff are working and the cumulative effect of constant outbreaks for the last 3 years. 		
Action Taken	<p>Details of operational plan:</p> <ul style="list-style-type: none"> Core public health activities are ongoing with support from other public health units and contact tracing providers. Levers for reducing and sharing workload include a new strategy for the current situation, 		

	<p>using alternative providers and delegations to PHUs and NITC.</p> <ul style="list-style-type: none"> • Progress suppression strategy • Progress with urgency to transfer some responsibilities to other agencies e.g. Manaaki to NRHCC • • ARPHS-wide BCP enacted. • Workforce surge monitoring and signaling ongoing requirements with DHBs and other organisations providing surge staff. • Escalation to the region and MoH current state and pressures • Working closely with NRHCC 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. Stop on-going transmission. 7. Support affected communities. 8. Ensure a safe and sustainable response with effective use of regional workforce supply. 9. Ensure clear communication and documentation.
<p>Objectives / Priorities</p>	<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 • Identify, confirm and isolate confirmed cases • Progress transmission chain analysis. • Contact management (delegation to NITC, external 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

	<ul style="list-style-type: none"> • Support Pasifika Community • Support Māori whānau • Effective communications and PIM • Adapting to workforce constraints
<p>Plan of Action</p>	<ul style="list-style-type: none"> • Case investigation, contact tracing, and ongoing case and contact management. • Reduce burden on intelligence, operations functions. • Complete records in NCTS. • Support wellbeing and manaaki requirements for cases and contacts. • All functions continue to support response • Continue stakeholder engagement and communications. • Monitor internal capacity and demand.
<p>Specific Tasks & Information Flow</p>	<ul style="list-style-type: none"> • All CIMS roles rostered • All CIMS roles emails enacted.
<p>Immediate tasks</p>	<p>Incident controller:</p> <ul style="list-style-type: none"> • Liaise with NRHCC, DHB's, 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. <p>Clinical Partner: in partnership with Incident Controller:</p> <ul style="list-style-type: none"> • 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. <p>Response:</p> <ul style="list-style-type: none"> • 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
- Chair capacity and demand meeting
- 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 reports to ARPHS, regionally and nationally
- Source investigation and unlinked cases investigation
- 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
- Support allocations and workload management across Operations
- Ensure an appropriate public health response
- Ensure cluster management
- Manage and assess risks including clinical safety
- Deliver Operational Plan 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, NITC and other PHUs.
- Coordinate delegations of cases, contacts and EE to 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
- Manage media inquiries and information for daily standup and MOH media releases

Welfare/Wellbeing:

- Monitor staff wellbeing – ARPHS response staff are tired and stressed from the demands of dealing with COVID-affected cases and contacts (many are in a distressed state)
- Create wellbeing plan
- Maintain health and safety plan

Pae Ora:

	<ul style="list-style-type: none"> • Support case and contact management • Evaluate and revise Pae Ora Model • Lead response for Māori whanau clusters • Operational oversight of Pae Ora mobile unit <p>Pacific Team:</p> <ul style="list-style-type: none"> • Support case and contact management • Focus on effective relationship management <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 • Sustaining roles and responsibilities • 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
<p>Resource Needs</p>	<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

	<ul style="list-style-type: none"> • Roster system that is suitable for all users • A streamlined national coordinated response led by NITC.
Information Flow	<p>All information is saved in:</p> <p>https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/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	All communications between staff should cc the appropriate EOC email account.
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	Planning Manager
AP Approved by	ARPHS Controller
Distribution	ARPHS IMT

Incident Controller	Jane McEntee / William Rainger		
Incident Management Team Members	As per roster		
Action Plan Number	#010	AP Timeframe	7 Days
Incident	COVID-19 Case August 2021 (17/8) - OB-21-109884-AK (C-0042)		
IMT status	Stood Up with EOC		
Date / Time approved		Operational Phase covered	23/10/2021 to 29/10/2021
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. The Auckland region is at Alert L3. Transmission continues in the Auckland region. Projected increase in R value. Modelling suggests R = 1.2-1.3. In this situation we can expect around 100 cases/day by the end of October. Māori and Pasifika communities greatly impacted. Cases and contacts with complex needs. Higher rate of hospitalisation than previous outbreaks and one death. ARPHS is the lead agency for outbreak management across Auckland however progress is occurring on the NITC upskilling for ccm. ARPHS workforce are experiencing the effects of extreme fatigue due to the long hours' staff are working and the cumulative effect of constant outbreaks for the last 3 years. 		
Action Taken	<p>Details of operational plan:</p> <ul style="list-style-type: none"> Core public health activities are ongoing with support from other public health units and contact tracing providers. Levers for reducing and sharing workload include a new strategy for the current situation, 		

	<p>using alternative providers and delegations to PHUs and NITC.</p> <ul style="list-style-type: none"> • Supporting NITC with upskilling in ccm • Progress suppression strategy. • Progress care in the community pathway with NRHCC ARPHS-wide BCP enacted. • Workforce surge monitoring and signaling ongoing requirements with DHBs and other organisations providing surge staff. • Escalation to the region and MoH current state and pressures • Working closely with NRHCC 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. Stop on-going transmission. 7. Support affected communities. 8. Ensure a safe and sustainable response with effective use of regional workforce supply. 9. Ensure clear communication and documentation.
<p>Objectives / Priorities</p>	<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 • Identify, confirm and isolate confirmed cases • Progress transmission chain analysis. • Contact management (delegation to NITC, external 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

	<ul style="list-style-type: none"> • 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. • Reduce burden on intelligence, operations functions. • Complete records in NCTS. • Support wellbeing and manaaki requirements for cases and contacts. • 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, DHB's, 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. <p>Clinical Partner: in partnership with Incident Controller:</p> <ul style="list-style-type: none"> • 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. <p>Response:</p> <ul style="list-style-type: none"> • 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
- Chair capacity and demand meeting
- Develop strategies to support Covid activities
- Develop SOPs to support Covid activities
- Provide workforce modelling and projections
- 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 reports to ARPHS, regionally and nationally
- Source investigation and unlinked cases investigation
- 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
- Support allocations and workload management across Operations
- Ensure an appropriate public health response
- Ensure cluster management
- Manage and assess risks including clinical safety
- Deliver Operational Plan 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, NITC and other PHUs.
- Coordinate delegations of cases, contacts and EE to 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
- Manage media inquiries and information for daily standup and MOH media releases

Welfare/Wellbeing:

- Monitor staff wellbeing – ARPHS response staff are tired and stressed from the demands of dealing with COVID-affected cases and contacts (many are in a distressed state)
- Create wellbeing plan
- Maintain health and safety plan

Pae Ora:

	<ul style="list-style-type: none"> • Support case and contact management • Evaluate and revise Pae Ora Model • Lead response for Māori whanau clusters • Operational oversight of Pae Ora mobile unit • Planning expansion of Pae Ora mobile unit <p>Pacific Team:</p> <ul style="list-style-type: none"> • Support case and contact management • Focus on effective relationship management <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 • Sustaining roles and responsibilities • 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
<p>Resource Needs</p>	<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

	<ul style="list-style-type: none"> • Facilities and IT • Roster system that is suitable for all users • A streamlined national coordinated response led by NITC.
Information Flow	<p>All information is saved in:</p> <p>https://arphs.hanz.health.nz/sites/N_ID/IllnessandDiseases/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	All communications between staff should cc the appropriate EOC email account.
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	Planning Manager
AP Approved by	ARPHS Controller
Distribution	ARPHS IMT