From: Alex Pimm (ADHB)

To: Health System Readiness & Response Planning

Cc: Tricia Sloan; "Keriana Brooking"; Covid 19 (ADHB); Michael Shepherd (ADHB); Joanne Bos (ADHB); Jo Wright

(Nursing Director) (ADHB)

Subject: Workforce request - ADHB ITU nurses
Date: Friday, 27 August 2021 15:09:56
Attachments: Request for ICU Nurses 27-08-21.docx

Kia ora,

As discussed, we are requesting national assistance to support Auckland DHBs with trained ITU nurses.

The attached document provide more detail on the request and background information. In summary, we are asking for:

Up to 30 trained/experienced ITU registered nurses, available to work in Auckland for the next six weeks.

To discuss the request further, please contact:

Joanne Bos, Interim Associate Director, Cardiovascular Services –
Joanne Wright, Nurse Director, Cardiovascular Services –

Ngā mihi,

Alex

Alex Pimm

Director | Patient Management Services Incident Controller | COVID-19 Response & Vaccination Team

Te Toka Tumai (Auckland District Health Board)

Level 4 | Building 1 | Auckland City Hospital

Mob: E-mail:

Working in partnership, enabling self-management, promoting independence.

Welcome Haere Mai | Respect Manaaki | Together Tuhono | Aim High Angamua

From: Keriana Brooking [mailto

Sent: Wednesday, 25 August 2021 15:18

To: Alex Pimm (ADHB) < >; Tricia Sloan < >; Health

System Readiness & Response Planning <

Subject: Please send National Request for Assistance here

BE CYBER SMART - This email is from an external sender - Please do not click links or open attachments from unknown sources - Forward suspicious emails to healthalliance.co.nz

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Appendix 1 Page 1 of 255



Forum:	COVID-19 Incident Management Team	
Submitted by:	Joanne Bos, Interim Associate Director, Cardiovascular Services, Auckland DHB	
	lo Wright, Nurse Director, Cardiovascular Services, Auckland DHB	
Date:	26 August 2021	
Subject:	Request for additional ICU nurses from out of region	

Purpose

The purpose of this paper is to request assistance from DHBs outside of the northern region to support the ICUs within the northern region in response to the latest COVID-19 outbreak, which is predominately affecting the Auckland metro area. The specific request is for ICU-trained nurses.

Issue

The Auckland metro DHBs have sufficient physical ICU capacity and non-nursing resources to meet the modelled demand for adult ICU beds for COVID-positive patients (likely 7 – 20 patients) and maintain an acceptable level of other acute care and very urgent planned care. However, due to a high number of vacancies and recruitment challenges, a higher than usual proportion of junior nurses, high sick leave and absense associated with exposure to locations of interest, and the need to continue to manage acute and urgent patients, there are insufficient trained ICU nurses in the region to fully resource the available physical capacity.

This is exacerbated by the model of care for COVID-positive patients that requires more nurses per patient than the standard ICU model of care to support safe PPE use and mitigate the risk of exposure to other patients and staff.

The DHBs cannot cease providing acute and urgent care for patients and often these patients require ICU-level care (e.g. trauma, burns, neurosurgery, cardiac surgery, transplant). Many of the these patients are receiving quaternary level care that cannot be provided outside of the region so there is no option for them to be treated elsewhere. The specialist nature of these services also means that the patients are often from outside of the region.

Transferring ICU patients out of Auckland is another option. However a high proportion of the ADHB and CMDHB ICU patients are sub-specialty patients and this option would also separate critically ill patients from their whānau. This would be considered for specific patients and also as a last resort if there are not enough staff.

The Auckland metro DHBs are therefore seeking assistance from other DHBs who have ICU-trained nurses to enable them to continue to provide acute and urgent ICU-level care for patients when COVID-positive patients have been admitted to their ICU facilities.

Requirement

The requirement is for up to 30 ICU-trained nurses as follows:

- 1. Current practicing certificate and currently working in an adult ICU.
- 2. A minimum of 18 months adult ICU experience.

Appendix 1 Page 3 of 255



- 3. Willingness to relocate to Auckland for a minimum of 6 weeks to work in either Auckland or Counties Manukau DHBs ICU facilities (major trauma, burns, transpalants, general ICU and cardiovascular ICU).
- 4. Ideally with cardiac or major trauma experience, but not essential.

These nurses will not be asked to nurse COVID-positive patients, unless the Auckland DHBs are not able to do this with their current ICU nursing workforce. This is unlikely.

An assessment process will be applied to ensure suitability of skills and experience and training will be provided.

Travel, accommodation and remuneration

Travel, accommodation and remuneration arrangements will be co-ordinated nationally but will not be a cost to the home DHB for these nurses.

Nurses will be guaranteed to receive at least their usual pay.

Request

The non-northern region DHBs with ICU facilities are requested to:

- 1. Agree in principle to assign available ICU nurses to the Auckland metro DHBs
- 2. Agree that this request takes priority to any return to planned care beyond P1
- 3. Determine the capacity in their ICU nursing workforce to release nurses for 6 weeks
- 4. Identify nurses who would be willing to temporarily relocate to Auckland

Appendix 1 Page 4 of 255



Minutes Critical Care Board 27 August 2021

Minutes of the Provider Group COVID meeting held on 27 August 2021 Via Zoom, Auckland City Hospital, Grafton commencing at 3:30pm

Group members:

John Beca
Michael Shepherd
Andrew McKee

Barry Snow Joanne Bos
Emma Maddren
Kerry Benson-Cooper
Michael Gillham

Anne-Marie Pickering

Welcome & Apologies

Attendance: Kerry Benson-Cooper, Emma Maddren, Mike Gillham, Joanne Bos, Andrew McKee, Barry Snow. Michael

Shepherd, John Beca

Declined: Anne Marie Pickering

DISCUSSION

John Beca gave an introduction and a brief update – main discussion around the below.

Discussion: If we get more than 3 patients and are using CVIVU-HDU, what do we need to do from a patient flow and staffing point of view to maintain the Non-COVID ICU work.

- Mike Shepherd gave an update around the modelling sent around completed by Garry Jackson.
- What determines ICU admission further guidelines given today for clarity.

Confirmed plan across region

- 9 ICU AIIS beds in region. Plan for these is
- WDHB will take 2 patients
- ADHB will take 3 patients after 9 AIIS full will take next 6 to CVICU-HDU
- CMDHB will take 4 patients after first 15 will take next 2
- General Consensus 17 ICU beds regionally that should be sufficient

Other issues

- WDHB decant non-COVID patients there if appropriate and also provide patient transfers across region.
- An update of inpatient beds was given to those in attendance.
- Patient flow discussions around pathways was had.
- Capacity discussions continue and further nursing conversations will occur on Monday.

Resourcing additional beds:

- Nurse training continuing through DCCM and CVICU
- External Nursing Mercy Ascot CE discussion around possible support. ICU nurses are limited, continued discussion. (Mike Shepherd to send email)
- Paper requesting ICU nurses nationally to assist in Auckland has been circulated to exec leads and ICU CDs waiting to hear results
- Initial discussion around a Plan C if all ICU capacity full: e.g. transfer of patients either pre-surgery or from ICU to ICUs outside Auckland, further regional plan (e.g. MMH becomes a covid unit)

Further Update:

- Comms piece to be delivered ICU staff and around the country. KBC to draft and distribute to CCB members for feedback.



Minutes Critical Care Board 01 September 2021

Minutes of the Provider Group COVID meeting held on 01 September 2021 Via Zoom, Auckland City Hospital, Grafton commencing at 1:00pm

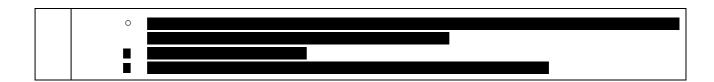
Iohn Beca		Barry Snow Joanne Bos Emma Maddren Kerry Benson-Cooper
	Welcome & Apologie	es
	Attendance: Kerry Be Declined: Anne Marie	nson-Cooper, Emma Maddren, Joanne Bos, Andrew McKee, Barry Snow. Michael Shepherd, John Beca Pickering
	DISCUSSION	
	 Increasing a little Inpatients expect Inpatients expect Confirmed plan across Continues to increase Continues to increase CVICU- HDU – age ward overflow). Middlemore – confirmed further explore a patients. Resourcing additional Patients are being For patients who unclear. Andrew ICU Nurses – research 	s region rease inpatients and support across all DHBs. . reed that with increase in patient numbers, CVICU-HDU will be protected for ICU patients (i.e. not enfirmed that they can only have patients in rooms currently allocated as airflow is problematic. care is challenging for services requiring ICU/HDU postop and this capacity being reduced. Need to alternative (i.e. ward based) models of care potentially for some vascular, thoracic and renal ransplant



Minutes Critical Care Board 03 September 2021

Minutes of the Provider Group COVID meeting held on 03 September 2021 Via Zoom, Auckland City Hospital, Grafton commencing at 1:00pm

Barry Snow Joanne Bos Group members: Emma Maddren John Beca Kerry Benson-Cooper Michael Shepherd Jo Wright Andrew McKee Janine Rouse Anne-Marie Pickering Sapna Sheth Welcome & Apologies Attendance: Kerry Benson-Cooper, Emma Maddren, Joanne Bos, Andrew McKee, Barry Snow. Michael Shepherd, John Beca, Anne Marie Pickering Declined: Sapna Sheth DISCUSSION John Beca/Mike Shepherd gave an introduction and a brief update. Update on patients in ICU – across the region and in ADHB. Overview regarding patients and transfers. An update of inpatient beds was given to those in attendance. If ADHB got to 8-9 ICU patients, what would Plan B be - regional discussion today at 10am. Can one hospital be turned into a COVID centre? Responses regionally and still remains unanswered response. Northland offered assistance as have 4 NP beds and only 1 patient in ICU. Patients need to be intubated for 0 transfer. Middlemore could take 1 more which would mean unable to cover for burns. 0 Further discussion with regional meeting at 3pm and then Mike/Peter Watson would be joining to discuss further. Other options: Send either non COVID or COVID patients out of Auckland – options? **Exploring options of Satellite HDUs?** WDHB capacity/ CMDHB capacity? ICU Nurses: ICU Nurses – Jo Wright gave and update – 1st nurse starting on Monday. Orientation all ready to go. TAS is about to issue the secondment letter today. Reassurance that her DHB has put her forward, Occ Health confirmed. Agreed staff profiles to be given so that DHBs can look at skills required – regionally. Check experience across nurses for where each nurse will be working and the orientation needed. ICU Nurses: 4/5 Canterbury and 3 from Southern. 1 educator in CVICU – any options of other coaches/senior nurses adding to educator time Other Discussions: **Further Update:**





Minutes Critical Care Board 07 September 2021

Minutes of the Provider Group COVID meeting held on 07 September 2021 Via Zoom, Auckland City Hospital, Grafton commencing at 2:00pm

roup members:	
hn Beca	Joanne Bos
lichael Shepherd	Emma Maddren
ndrew McKee	Kerry Benson-Cooper
nne-Marie Pickering	Jo Wright
arry Snow	Janine Rouse Sapna Sheth
Welcome & Apolog	gies
	Benson-Cooper, Emma Maddren, Joanne Bos, Andrew McKee, Barry Snow, Michael Shepherd, Jo
Beca, Anne Marie P	
Declined: Sapna Sh	eth
DISCUSSION	
and the second s	epherd gave an introduction and a brief update.
	te required – following walk through.
Bed modelling	
- NY 10	
Regional Meeting -	
Regional Meeting - Bed Modelling	regionally discussed.
Regional Meeting - Bed Modelling Within this gro	regionally discussed. up a discussion was had as to what this might look like for us.
Regional Meeting - Bed Modelling Within this gro Consultation a	regionally discussed. oup a discussion was had as to what this might look like for us. nd then combined approach with our input.
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Regional Meeting - Bed Modelling Within this gro Consultation at Looking at mod Other issues CVICU – 1 MIQ	regionally discussed. Sup a discussion was had as to what this might look like for us. Ind then combined approach with our input. Idelling that has come out of Australia and UK.

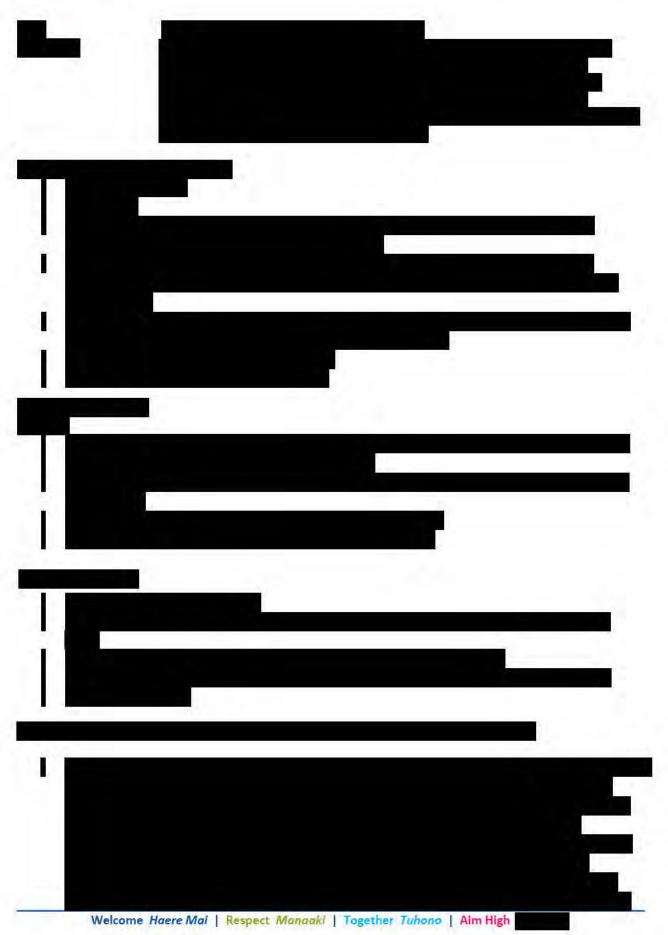


Minutes Critical Care Board 13 September 2021

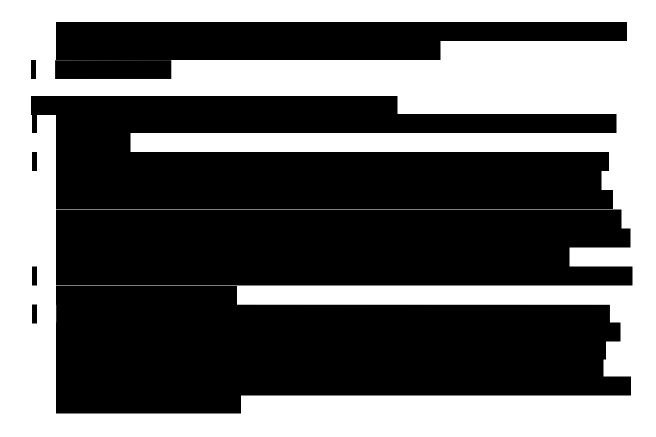
Minutes of the Provider Group COVID meeting held on 13 September 2021 Via Zoom, Auckland City Hospital, Grafton commencing at 4:00pm

Group members: John Beca Michael Shepherd Andrew McKee Anne-Marie Pickering Barry Snow	Joanne Bos Emma Maddren Kerry Benson-Cooper Jo Wright Janine Rouse Sapna Sheth
Welcome & Apologie	s enson-Cooper, Emma Maddren, Joanne Bos, Barry Snow, Michael Shepherd, John Beca, Anne Marie
	Sapna Sheth, Janine Rouse
DISCUSSION	
No real update o Planned facilities Nursing training b Regional Meeting - di National ICU caplooking at curren unmet need. No Gary Jackson and modera Other issues Staff Training – si	rechange at the moment. regroup and planned bed base. has started for ICU nurses. scussion acity conversations continue to be taking place – overall picture was reasonably accurate. This is t utilisation and projections based on population changes and some generous assumptions around MoH ICU COVID modelling has been seen yet. n's data review looking at projections for admission rates next year assuming well vaccinated levels tely tight boarder control – will share with the group. urge training and ICU nurses continue. PACU nurses (L8) and CV ward nurses are being trained. hes coming in undergoing orientation.

COVID-19 Response and Recovery Team MEETING NOTES







Clinical Care/ Ops

No issues in terms of staffing or capacity



- Redeployment visibility on where is our people spreadsheet
- Weekend re capacity and whether we can bring any other capacity down for Saturday and Sunday to support staffing

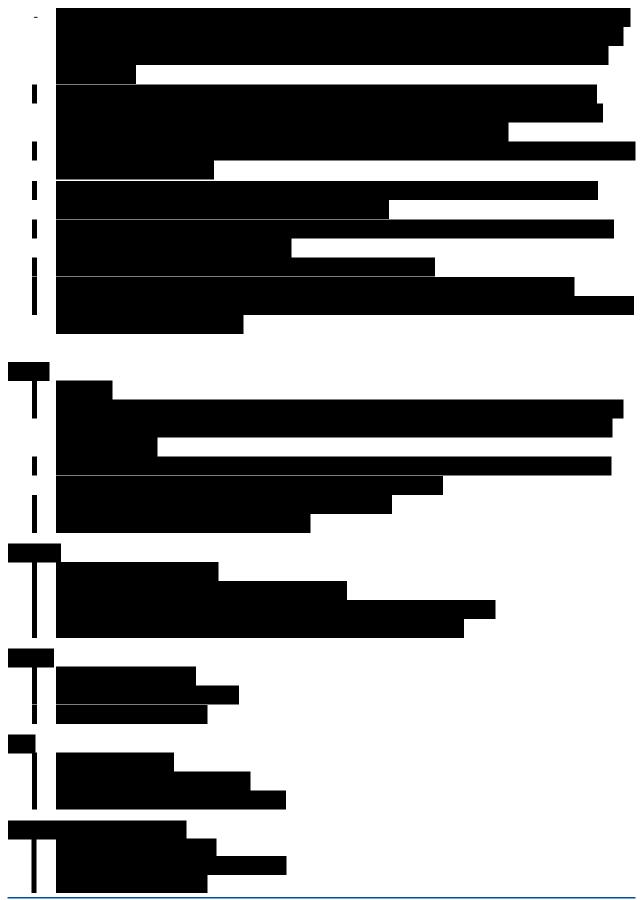


- No changes to the escalation tool ICU training is progressing well
- Regional decision to put a call out for volunteers around the country for ICU trained nurses and working through what the HR would look like





COVID-19 Response and Recovery Team MEETING NOTES





COVID-19 Response and Recovery Team MEETING NOTES





COVID-19 Response Team A G E N D A

Date and Time: Friday, 27 August 2021 (11.30am – 12.30pm)

Venue: Via Zoom / Building 32 - Level 5 - CEC A+ Trust Room

Members: Abby Donaldson, Ailsa Claire, Alex Pimm, Anthony Hawke, Carly Orr, Debra Ellis,

Emma Maddren, Greg Williams, Hineroa Hakiaha, Ian Dittmer, Ian Costello, Jane Lees, Jennie Montague, John Beca, Kieron Millar, Liz Boucher, Margaret Dotchin, Margaret Wilsher, Marina Reyes, Mark Edwards, Maxine Stead, Mel Dooney, Michael Shepherd, Sarah Horn, Taylor Carter, Tess Mann, Wendy Stanbrook-

Mason.

Items	s for discussion		
No.	Items for discussion	Lead	
1.	Last Meeting notes		
2.	National Outbreak Update	Alex Pimm	
3.	Outbreak update - Testing	Mark Edwards	
	- Contact Trace - Staff Tracking		
4.	People/ Welfare - Deployments - Training Incl. PPE - Vulnerable Staff and un-immunised staff	Mel Dooney	
5.	Clinical Care/ Operations - Daily Ops - CAG/CTAG Pathways and Protocols - IPC Practice	Marg Dotchin/ Ian Dittmer	
6.	Planning - Planned Care (Duncan Bliss) - Recovery - Ti Tiriti	Liz Boucher Hineroa Hakiaha/ Anthony Hawke	
7.	Supply/Facilities/ Logistics - Supplies - Facilities - Labs	lan Costello/ Kieron Millar	
8.	Communication and Engagement (PIM) - Internal - External/Media	Carly Orr/ Maxine Stead	
9.	Requests for Decision - PPE - N95 Central Fit testing - Community Screening tool - Request for ICU Nurses	Taylor Carter lan Dittmer	
10.	Information Papers	lan Dittme:	
11.	 Interim advice for home visiting health professionals V10 Other emerging issues 	lan Dittmer	
12.	Any other business	All	



COVID-19 IMT 27/08/21 Request for decision

National COOs Meeting	
Joanne Bos, Interim Associate Director, Cardiovascular Services, Auckland DHB Jo Wright, Nurse Director, Cardiovascular Services, Auckland DHB	
Date: 26 August 2021	
Request for additional ICU nurses from out of region	

Purpose

The purpose of this paper is to request assistance from DHBs outside of the northern region to support the ICUs within the northern region in response to the latest COVID-19 outbreak, which is predominately affecting the Auckland metro area. The specific request is for ICU-trained nurses.

Issue

The Auckland metro DHBs have sufficient physical ICU capacity and non-nursing resources to meet the modelled demand for adult ICU beds for COVID-positive patients (likely 7 – 9 patients) and maintain an acceptable level of other acute care and very urgent planned care. However, due to a high number of vacancies and recruitment challenges, a higher than usual proportion of junior nurses, high sick leave associated with exposure to locations of interest, and the need to continue to manage acute and urgent patients, there are insufficient trained ICU nurses in the region to fully resource the available physical capacity.

This is exacerbated by the model of care for COVID-positive patients that requires more nurses per patient than the standard ICU model of care to support safe PPE use and mitigate the risk of exposure to other patients and staff.

The DHBs cannot cease providing acute and urgent care for patients and often these patients require ICU-level care (e.g. trauma, burns, neurosurgery, cardiac surgery, transplant). Many of the these patients are receiving quaternary level care that cannot be provided outside of the region so there is no option for them to be treated elsewhere. The specialist nature of these services also means that the patients are often from outside of the region.

Transferring ICU patients out of Auckland is another option. However a high proportion of the ADHB and CMDHB ICU patients are sub-specialty patients and this option would also separate critically ill patients from their whanau. This would be considered for specific patients and also as a last resort if there are not enough staff.

The Auckland metro DHBs are therefore seeking assistance from other DHBs who have ICU-trained nurses to enable them to continue to provide acute and urgent ICU-level care for patients when COVID-positive patients have been admitted to their ICU facilities.

Requirement

The requirement is for ICU-trained nurses as follows:

- 1. Current practicing certificate and currently working in an adult ICU
- A minimum of 18 months adult ICU experience



COVID-19 IMT 27/08/21 Request for decision

- 3. Willingness to relocate to Auckland for a minimum of 6 weeks to work in either Auckland or Counties Manukau DHBs ICU facilities (major trauma, burns, transpalants general ICU and cardiovascular ICU)
- 4. Ideally with cardiac or major trauma experience, but not essential

These nurses will not be asked to nurse COVID-positive patients, unless the Auckland DHBs are not able to do this with their current ICU nursing workforce. This is unlikely.

An assessment process will be applied to ensure suitability of skills and experience and training will be provided.

Travel, Accommodation and Remuneration

Travel, accommodation and remuneration arrangements will be co-ordinated nationally but will not be a cost to the home DHB for these nurses.

Nurses will be guaranteed toreceive at least their usual pay.

Request

The non-northern region DHBs with ICU facilities are requested to:

- 1. Agree in principle to assign available ICU nurses to the Auckland metro DHBs
- Agree that this request takes priority to any return to planned care beyond P1
- 3. Determine the capacity in their ICU nursing workforce to release nurses for 6 weeks
- 4. Identify nurses who would be willing to relocate to Auckland

Approved by IMT.

To go to- Holl HAS

CNOS | CMOS

ITU network.

Appendix 1

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COVID-19 Response Team MEETING NOTES

Date Attendees Friday 27, August 2021 (1130hrs – 12hrs)

Ailsa Claire, Alex Pimm, Anthony Hawke, Carly Orr, Debra Ellis, Emma Maddren, Greg Williams, Hineroa Hakiaha, Ian Dittmer, Ian Costello, Jane Lees, Jennie Montague, John Beca, Kieron Millar, Liz Boucher, Margaret Dotchin, Margaret Wilsher, Marina Reyes, Mark Edwards, Maxine Stead, Mel Dooney, Michael Shepherd, Minnie Fuangkhajornfung, Sarah Horn, Taylor Carter, Tess Mann, Vanessa

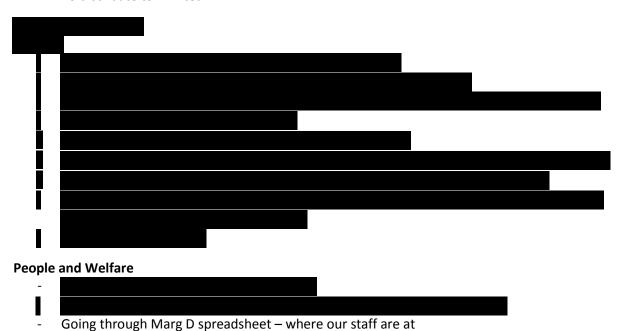
Duthie, Vicki Nuttall, Wendy Stanbrook-Mason.

National outbreak situation update



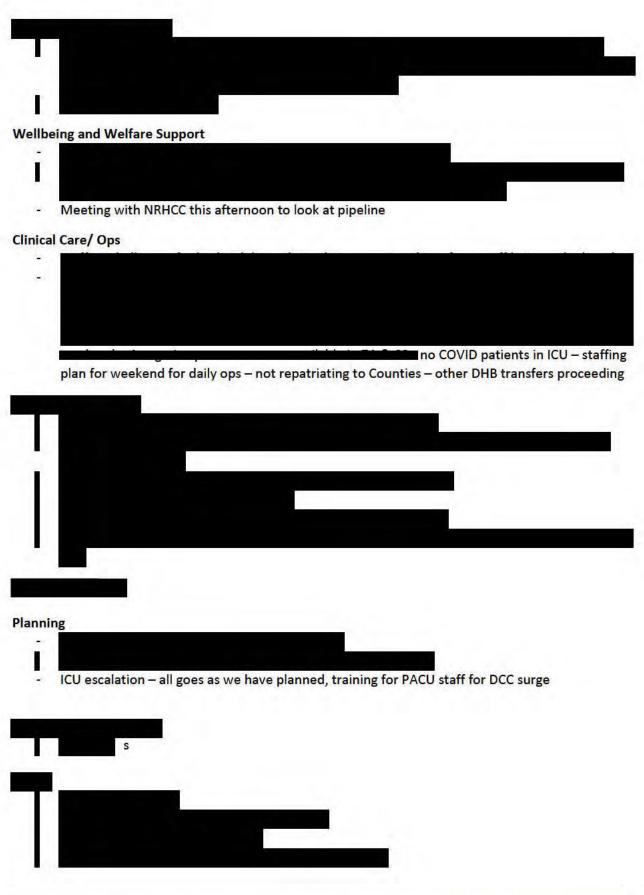
Forecast Graph – Model by Dr Gary Jackson from Counties

- Forecast based on the first few days of cases
- Peak around 90, today was 73 (slightly lagging behind due to lab turnaround times)
- Testing delay, due to people getting to testing centres and delayed swabs results reports
- Increase over the past 5 days on admissions
- Mike S we predict increasing as per model and working numbers around it
- All of Auckland predictions
- Will be revised as we go through
- To distribute to IMT team















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COVID-19 Response Team A G E N D A

Date and Time: Saturday, 28 August 2021 (11.30am – 12.30pm)

Venue: Via Zoom

Members: Abby Donaldson, Ailsa Claire, Alex Pimm, Anthony Hawke, Carly Orr, Debra Ellis,

Emma Maddren, Greg Williams, Hineroa Hakiaha, Ian Dittmer, Ian Costello, Jane Lees, Jennie Montague, John Beca, Kieron Millar, Liz Boucher, Margaret Dotchin, Margaret Wilsher, Marina Reyes, Mark Edwards, Maxine Stead, Mel Dooney, Michael Shepherd, Taylor Carter, Tess Mann, Vicki Nuttall, Wendy Stanbrook-

Mason.

Items	for discussion		
No.	Items for discussion	Lead	
1.	Last meeting notes		
2.	National outbreak situation update	Alex Pimm	
3.	ACH outbreak update	Mark Edwards	
	- Testing		
	- Contact tracing		
	- Staff tracking		
4.	People/welfare	Mel Dooney	
	- Deployments	•	
	- Training and PPE use		
	- Vulnerable staff		
	- Unvaccinated staff		
5.	Clinical care/operations	Marg Dotchin/	
	- Daily operations	lan Dittmer	
	- CAG/CTAG updates and changes to pathways/protocols		
	- IPC practice issues		
6.	Planning	Liz Boucher	
•	- Planned care	2.2 2 3 3 3 1 3 1	
	- Escalation planning and recovery	Hineroa Hakiaha/	
	- Ti Tiriti and Māori health	Anthony Hawke	
7.	Supply/facilities/logistics	lan Costello/	
•	- Supplies	Kieron Millar	
	- Facilities	KICI OII WIIIII	
	- Laboratory capacity		
8.	Communication and engagement	Carly Orr/	
J.	- Internal	Maxine Stead	
	- External – media and public	IVIANITE Stead	
9.	Requests for decision		
J.	- Mercy Hospice Admissions	Sam Titchener	
	- PPE - N95 Central Fit testing	Taylor C	
10.	- Ward 68 negative pressure rooms	Mike S/Alex P	
10.	Information Papers	Joanna Das	
	- Adult ICU capacity	Joanne Bos	
	- Rapid Works - Ward 68 Cost Estimate 26.08.20221	Mike S/ Alex P	
	- Ward 68 Rapid Response Plan 26.08.2021	Mike S/ Alex P	
	- Generic System Sketches	Mike S/ Alex P	



COVID-19 Response Team A G E N D A

11.	Other emerging issues	All
12.	Any other business	All

COVID-19 Response Team MEETING NOTES



Date Attendees Friday 27, August 2021 (1130hrs – 12hrs)

Ailsa Claire, Alex Pimm, Anthony Hawke, Carly Orr, Debra Ellis, Emma Maddren, Greg Williams, Hineroa Hakiaha, Ian Dittmer, Ian Costello, Jane Lees, Jennie Montague, John Beca, Kieron Millar, Liz Boucher, Margaret Dotchin, Margaret Wilsher, Marina Reyes, Mark Edwards, Maxine Stead, Mel Dooney, Michael Shepherd, Minnie Fuangkhajornfung, Sarah Horn, Taylor Carter, Tess Mann, Vanessa

Duthie, Vicki Nuttall, Wendy Stanbrook-Mason.

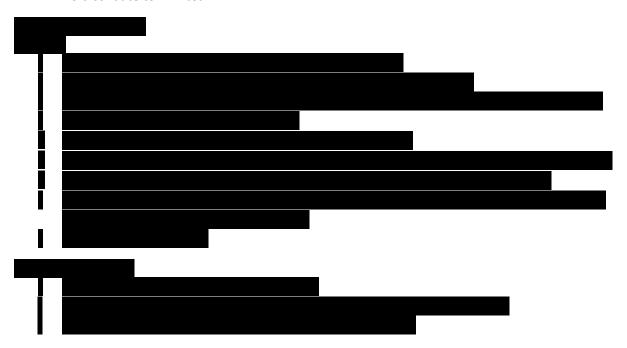
National outbreak situation update

- 73 new cases reported in the last 24 hours



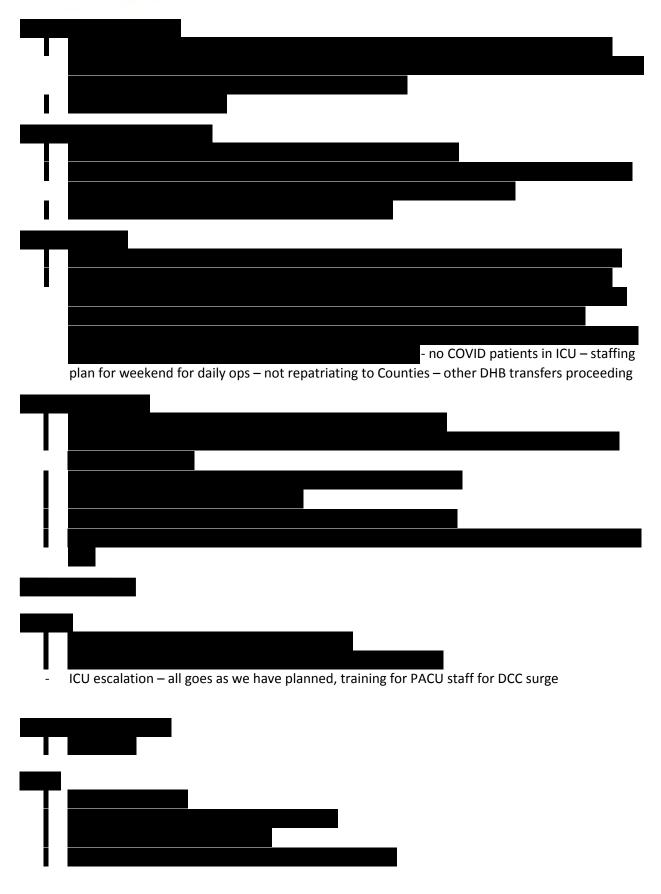
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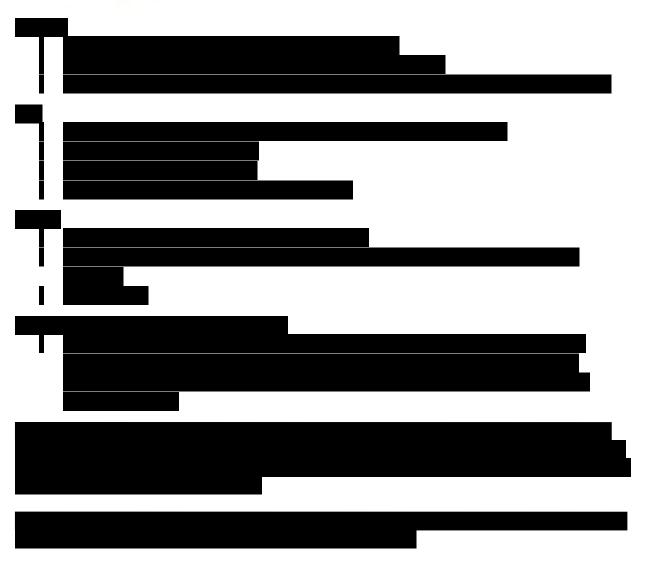












Request of Decision - Request for ICU Nurses

- Additional ICU workforce to support ICU across the regions
- John B cohort that's required will take out the cardiovascular ICU area
- Significant limitations to ICU nursing capacity
- Request for additional ICU nurses from out the region

Decision: to support this as a national



All information papers need to be approved by the relevant Function group SLT Lead prior being for inclusion on the next IMT agenda (5pm day prior).

(Issue / Information to be entered in the EOC Admin Action, Issue and Decision Tracker on MS Teams)

Function Group:	Adult Intensive Care		
Submitted by:	Joanne Bos		
(Name, Role, Service)	Interim Associate Director, Cardiovascular Services		
Date:	25 August 2021 Presented on 28/08/21		
Issue / Decision:	The IMT is requested to note that:		
Adult intensive care capacity is currently reduced due to nurvacancies and high numbers of sick calls and there is a risk to be insufficient capacity to meet acute demand.			
	2. Prioritised actions have been agreed to ensure that a minimum number of acute adult ICU beds are available as often as possible.		
	3. A plan has been agreed regarding the order of ICU admission for COVID-19 patients, should this be required. However, this is dependent on improvements to the airflow in the CVICU HDU, which is being resolved by the Facilities work stream.		
	6. Plans for DCCM and CVICU to train non-ICU nurses and provide refresher training for ex-ICU nurses have been developed and are being implemented. This will provide a pool of additional nurses to call on to support the ICU nursing workforce if required. The number that can be trained per week is limited due to constrained senior nurse capacity and a high proportion of junior nurses in both units.		
	7. CVICU is identifying all staff trained as spotters for donning and doffing and will identify additional non-clinical staff that could be trained to do this role to reduce the demand on nurses		
	8. Both the COVID-19 management and surge plans are heavily reliant on ICU-trained nurses, so the current constrained ICU nurse workforce and recruitment and retention challenges present a significant risk to these plans.		
	9. The regional COVID ICU surge plan is being refreshed, which may include		

diversion of non-quaternary ICU patients to the other DHBs.				DHRs
	10. Options to utilise private capacity to reduce demand on CVICU and to source additional ICU nurses from outside the region are being explored.			
	11	iai ico fidises from	outside the region	are being explored.
Information for noting: (Include in description if action to be taken is included within the Directorate Safety Plan, if applicable)	Both CVICU and DCCM have physical beds that are not resourced in their current budgets and both are unable to fully resource their budgeted bed base due to nursing vacancies. The following table shows current state. This does change daily depending on unplanned leave. Unplanned leave is currently high and may remain so for some days.			
иррпсиысу	Unit	Physical Beds	Resourced Beds	Staffed Beds
	CVICU	26	22	17
	DCCM	24	17	14
	_		nent both in NZ and	
	appointments are r	nade there is a sign	mand is high and ev dificant time lag betw at impact the latest	

will ha	ve on our recruitment strategies.
	rsing Capacity for COVID patients
	number of COVID patients in the adult ICUs exceeds three, additional
	ill be required to ensure that acute patients can continue to get ICU
	needed. A different nursing model of care will also be required to
	the best use of our ICU-trained nurses. The following plan has been
agreed	
1.	GSU OR and PACU nurses are being trained to support DCCM. A 2-
	day course has been approved for this and this training has started
	with 6 nurses being trained the week of 23 August.
2.	If the volume of surgery reduces, OR and PACU nurses from within
	ACH will also be trained to support DCCM
3.	Nurses who are CVICU-trained will receive refresher training.
	Nurses from within the directorate who could be trained to provide
	support to ICU nurses will be identified and trained. A plan to train
	20 nurses, 4 per week is being implemented, starting the week of 23
	August with refresher training.

4. The Cardiovascular directorate is undertaking a stocktake of non-

then identify and train additional staff within the directorate if

nursing staff trained to be spotters (for donning and doffing) and will

required.

It should be noted that the number of additional nurses that can be trained is limited due to constrained senior nurse capacity and a high proportion of new starts in both units.

Training plans for both units are included as appendices.

Non-ADHB Capacity

The regional ICU surge plan is being refreshed based on the current scenario and surge modelling. The other regional DHBs also have limited physical capacity and workforce to care for COVID patients who need ICU-level care, so a plan is required that makes best use of the available capacity. This may include diversion of non-quaternary ICU patients to the other regional DHBs to free up capacity.

Mercy Hospital is the only private hospital in Auckland that provides cardiac surgery. This hospital is currently closed. There may be an opportunity to utilise this facility for DHB patients. This is being explored

It is likely that ICUs in non-northern region DHBs will have very low capacity and there may be an opportunity for some of their ICU-trained nurses to be relocated to Auckland to assist with the COVID response. This also is being explored.

If necessary, medical staff with ICU experience could also be sourced from other DHBs to provide additional support

Summary

Nursing vacancies, high levels of sick leave and recruitment challenges are constraining current adult ICU capacity, creating a daily risk of insufficient acute ICU capacity. This constrained workforce is also a significant risk to the ICU COVID management and surge plans, which are heavily dependent on nursing resources. In addition to this the lack of rooms that provide protection from airborne infectious diseases is also a risk to COVID management and surge plans.

Describe how Te Tiriti o Waitangi and Health	Additional ICU nurses will ensure that some of our		
Equity have been considered in this request	most vulnerable patients can continue to get access		
	to essential healthcare services. Any Māori ICU		
	nurses from outside the region who volunteer to		
	come to Auckland will be provided with access to		
	the DHB Kaimahi Māori support resources, and		
	buddied with a Māori directorate team member.		
What are potential risks of breaching Te Tiriti o	ICU capacity for non-COVID patients will be scarce		

Waitangi and amplifying health inequities if this decision is approved?	even if additional nurses volunteer to come to Auckland. It is essential that vulnerable Māori get equitable access to ICU-level care
Does this incur a financial cost?	No
If yes, what is the estimated cost and start date if known?	\$
Does this information require reversing in the future? (e.g. during the summer or winter seasons)	No
Consultation for interdependencies with other services, systems or IMT functions completed with: (Ensure recommendation is agreed by other involved parties prior to submission)	DCCM and CVICU and Chair of Critical Care Board
Has this recommendation been approved by an SLT Function / Work Stream Lead?	Yes – John Beca

Response Lead:		
Decision: (Noted / Approved / Declined / Comment)		
Date of Decision:	Reference	

2020 06 04 information paper form template: Approval: Response Lead: Alex Pimm. Approved 04/06/2020

COVID Rapid ICU nursing training for COVID Surge Response

Background

To manage potential surges in COVID patients who require ICU care such has been seen internationally, CVICU must plan to maximise the ability of the unit to care for these patients. One limiting factor that has been identified is the current number of ICU trained nurses. Several ways to grow this workforce have been explored including: identifying ex-ICU staff that could support CVICU if and when required, creating a surge model of care for ICU nursing utilising non-ICU trained nurses, and rapid up skilling of non-ICU trained nurses to be able to care for patients requiring HDU and ICU level care. This paper outlines the rapid training plan for non-ICU trained nurses to work in CVICU.

Objective

In response to a surge in Covid ICU cases where demand for ICU beds exceeds resource availability, CVICU has a plan to provide ICU refresher training to 16 nurses initially. These nurses will be mainly from ward 42 with previous ICU experience. We currently have 10 nurses from ward 42 and are seeking interest from previously ICU trained nurses from other areas within and outside the directorate. If available, and barring time and resource constraints we would like to train further 4 nurses to have a team of 20.

Plan

These nurses will assist CVICU in one of two ways

- Care for ventilated Covid patients under the supervision of an experienced proficient ICU RN under revised MOC (i.e. 1 ICU RN +1 Ward 42 RN to 2 patients or 1+2:3)
- Care for HDU type patients in another area (for example ward 42) if we need to decant non Covid HDU patients or require more RNs to care for acute/urgent HDU patients

The training will comprise of a mixture of orientation and bed space teaching amounting to 32 hours per nurse or four 8 hour shifts

1st shift: 4 hour introduction to CVICU lead by education team or senior CVICU nurse (outside bedspace)

It would be beneficial if we could free up a senior staff nurse from clinical duties in order to facilitate induction training for the nurses 1st shift. This will allow the education team to focus rather on refreshing current staff through simulation training on a day to day basis.

2nd -4th shift: bedside teaching only. Ward nurse to workload share with preceptor trained nurse in CVICU. Learning goals to focus around competencies required to manage the revised model of care for Covid 19 patients which involves the rapid trained nurses supporting the CVICU nurses to care for more than one ventilated patient safely.

Action

We have identified 10 nurses from ward 42 who will undergo the Rapid ICU training. Four of those nurses already have been fully orientated to CVICU as part of 2020 surge training conducted in CVICU. These four nurses will only need 16 hours or 2 shifts to refresh their original training and these 4 will have completed refresher by end of this week.

The plan is to buddy 4 nurses each week. We are limited in the amount of staff we can have orientating on a given shift due to the fact that we are currently already training 8 new permanent staff in CVICU

We have requested any interest from other units in the directorate if they are able to free up some previously trained ICU nurses as well as contacting ex ICU staff to see where and if they can pick up a refresher shift.

Report prepared by: Sapna Sheth and Chelsey Mayson 24 August 2021

DCCM Training Plan for COVID Response Team 2021

Source	Training	Numbers	MOC	Restrictions to practice	Risks
Peri-op (starting with GSU, moving to ORs and then PACUs)	Rapid ICU familiarisation Training, 2 day course	We are able to train 5 staff twice weekly	To work under supervision of a trained ICU Nurse in a bedspace, or to be a spotter or to be a member of a proning team	Will receive assistance with Tracheal suctioning, medication bolus, equipment and line changes. Will not run CRRT.	Will only be able to occur if staff are able to be released from Peri-op.
Clinical Nurse Manager/PAR teams previously in DCCM	One preceptored day re-orientation to DCCM	6	To work in a bedspace, with indirect supervision required	If no other staff available will receive assistance to run CRRT	
Ex 2020 COVID response available within ACH	One preceptored day re-orientation to DCCM	3	To work in a bedspace, with indirect supervision required	If no other staff available will receive assistance to run CRRT	Need to be released from current role
Ex DCCM nurses available within ACH	One preceptored day re-orientation to DCCM	2	To work in bedspace, minimal supervision required	Support as usual	Need to be released from current role
Ex DCCM nurses available outside of ACH	One preceptored day re-orientation to DCCM	3-6		Will vary depending on experience	Only able to be utilised if additional FTE approved and recruitment/ onboarding processes shortened

COVID-19 DCCM Nurse Training Framework

No ICU experience to work under **direct** supervision (Rapid Familiarization Training)

2 hours H&S 2 hours skill stations 4 hours theory and independent study ICU experience to work under indirect supervision

2 hours H&S 1 hour orientation book 2 hours skill stations 3-7 hours independent study No ICU experience to work under **indirect** supervision

2 hours H&S 1 hour orientation book 2 hours condensed theory 3 hours skill stations

Additional 8 hours theory

1x Orientation Shift

*more shifts mutually decided at end of each orientation shift as funding allows ≥ 3x Orientation Shift *more shifts mutually decided at end of each orientation shift ≥ 5x Orientation Shift *more shifts mutually decided at end of each orientation shift

Education Resources

- · DCCM resource book
- DCCM condensed orientation
- · Ko Awatea online learning
- Skill stations / lectures

Essential Training

- POCT
- · Ventilation safety
- · Airway management basics
- Medications
- Haemodynamics and Lines
- · Patient assessment
- Essential cares
- · Admit / Discharge / Transport
- · CADD pain pump
- CRRT*

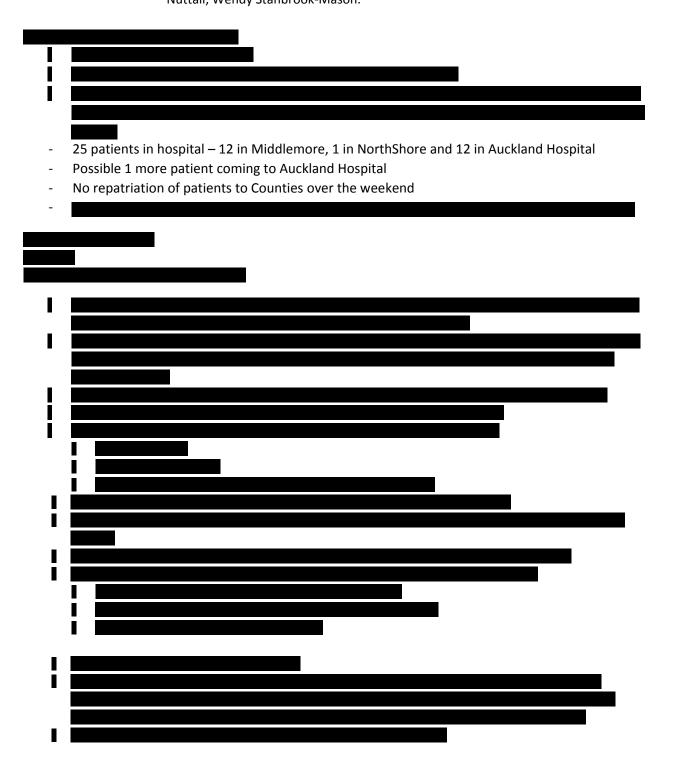
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COVID-19 Response Team MEETING NOTES

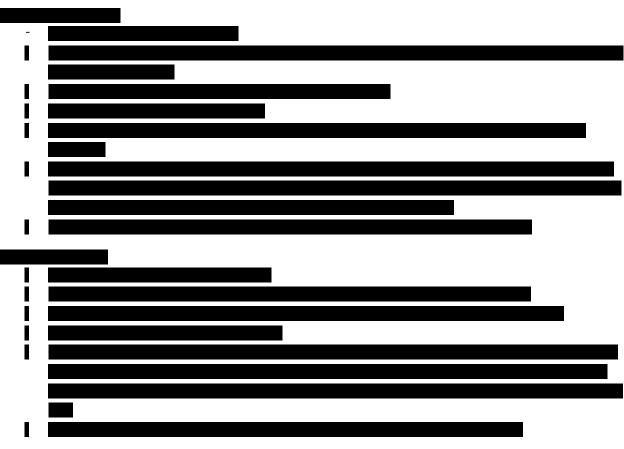


Date Attendees Saturday 28, August 2021 (1130hrs – 12hrs)

Alex Pimm, Carly Orr, Debra Ellis, Emma Maddren, Greg Williams, Hineroa Hakiaha, Ian Dittmer, Ian Costello, Jane Lees, Jennie Montague, John Beca, Kieron Millar, Liz Boucher, Margaret Dotchin, Margaret Wilsher, Marina Reyes, Mark Edwards, Maxine Stead, Mel Dooney, Michael Shepherd, Taylor Carter, Tess Mann, Vicki Nuttall, Wendy Stanbrook-Mason.

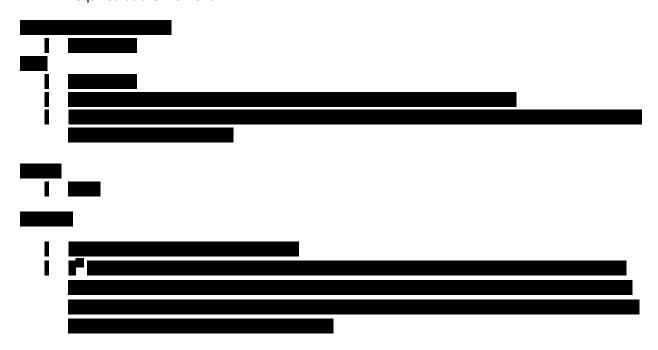






Planning

Liz B— nothing to update from yesterday — ICU up skilling proceeding and no changes to the tool required at the moment







1	
 -	

Information Paper - Adult ICU capacity (Joanne B)

- John B overview of ICU point of view outlines there is a good plan across the region and terms of escalation for Covid related and ICU capacity –internally the main issue is that we are 8 bed short of resource capacity because of vacancy across the two adult units lack of nurses and outlines strategy on how to deal with that including training additional nurses within ADHB from related areas also looking externally like to get nurses from Mercy ICU request around the country physical work to support being outlined as well across the country are a aware of this request challenge is see how many nurses will come to work here ICUs around the country are half empty offering to take patients and need to have a discussion regarding we want to keep the patients here but if we get in a position where unable to care for patients we will have to talk about that but not a first option
- Mike S To feedback Jo Wright if we get nurses from outside orientation plan to come to IMT and include ADHB values as Ti Tiriti priorities Hineroa when maori and non-maori to let them

di 1

COVID-19 Response Team MEETING NOTES



aware of Ti Tiriti and Equity – Maori people to be linked to Alexis and non-maori to be orientated from Ti Tiriti and equity and other ADHB values perspective

- Liz B – organization orientation and HR perspective has been started – to send this orientation paper when finished to Hineroa



From: Michael Shepherd (ADHB)

Sent: Wednesday, 01 September 2021 22:59 **To:** Jo Wright (Nursing Director) (ADHB)

Cc: Margaret Dotchin (ADHB)

Subject: Re: ICU nurses

Brilliant Thanks Jo

Cheers Mike

On 1/09/2021, at 3:20 PM, Jo Wright (Nursing Director) (ADHB) <

> wrote:

Hi Mike and Margaret

Scheduled a zoom with Mel and Vaughn 445 to work out the process and some FAQ's regarding accommodation travel etc, I think that they will have a bit of this already sorted. Zoom tomorrow at 1300 with CMDHB ADHB ND's NUMs , WDHB have indicated just want to be kept up to date so will keep Kate Gilmour and Jos up to date. From looking at an email TAS have set up a central repository for people to contact them, I think that if that's the case we need to link with it so we can have some control over it. Will aim to have the process and some FAQ's ready by this time tomorrow .

I'll let you know how we go Jo

Ngā mihi

Jo Wright Nurse Director Cardiovascular Directorate Auckland District Health Board

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From: Michael Shepherd (ADHB)

Sent: Tuesday, 07 September 2021 16:37

To: Jo Wright (Nursing Director) (ADHB); Margaret Dotchin (ADHB)

Subject: RE: ICU nurses

That is really great Well done and Thanks

Mike Shepherd (he/him)

Interim Director of Provider Services

Ph: 09 Ext: | Mob

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

Welcome Haere Mai | Respect Manaaki | Together Tühono | Aim High Angamua

From: Jo Wright (Nursing Director) (ADHB)
Sent: Tuesday, 07 September 2021 3:27 PM

To: Margaret Dotchin (ADHB) < >; Michael Shepherd (ADHB) <

Subject: ICU nurses

Hi Margaret and Mike

We have received 12 expressions via nurse profile forms, met with ADHB CVICU and DCCM and CMDHB ICU and divided the nurses into 3 tranches 1 nurse here 2nd day

- Tranche 1.0 Monday next week 4 nurses
- Tranche 2 20th 3 Nurses
- Tranche 3 29th 4 nurses

Split

CMDHB x 5

ADHB across 2 ICU's x7

We have orientation programmes and process in place.

I've shared with CMDHB

Kept WDHB up to date

Jo

Ngā mihi

Jo Wright Nurse Director Cardiovascular Directorate Auckland District Health Board

recipients only. If you are not the intended recipient, please delete this email and notify the sender immediately. Auckland DHB accepts no responsibility for changes made to this email or to any attachments after it has been sent.

From: Michael Shepherd (ADHB)

Sent: Thursday, 02 September 2021 10:13

To: Jenny Parr (CMDHB)

Cc: Margaret Dotchin (ADHB); Jo Wright (Nursing Director) (ADHB); Vanessa Thornton

(CMDHB)

Subject: RE: ICU nurses

Thanks Jenny

Cheers Mike

----- Original message -----

From: "Jenny Parr (CMDHB)" <

Date: 2/09/21 10:11 (GMT+12:00)

To: "Michael Shepherd (ADHB)" <

Cc: "Margaret Dotchin (ADHB)" < , "Jo Wright (Nursing Director) (ADHB)"

>, "Vanessa Thornton (CMDHB)"

Subject: Re: ICU nurses

Kia Ora

Ok from that perspective. Their concern was they'd have to cancel planned care to help us so ensuring an even approach around the country will be reassuring.

Nga mihi

Jenny

Jenny Parr RN Dip HE (Midwifery) DHSc FCNA(NZ)

Chief Nurse and Director of Patient and Whaanau Experience

tel:

Sent from my iPhone

On 2 Sep 2021, at 08:45, Michael Shepherd (ADHB) <

Thanks guys

Good points re HDU and cumulative

I'm sorry but we are going to have to speak to planned care because that is one of the points of this. Including national service planned care.

This has been agreed at CEO and COO and MoH.

Making sure that we don't result in uneven waits across country is going to be a key part of this.

Has been talk of starting P3 cardiac for example in South





Kia Ora

Thanks for sight of this.

I think we could make more of the cumulative impact of ICU admissions, that these tend to be unvaccinated people and the delta effect on the nature of their care (or something)

I don't think we should frame this around planned care at all given the impact is on them as much as us. The national services is an important point.

I wonder if we could make a point about HDU experience. The ward patients are sick and need HDU level care - single organ failure with NIV. This is our current need.

Nga mihi

Jenny

Jenny Parr RN Dip HE (Midwifery) DHSc FCNA(NZ) Chief Nurse and Director of Patient and Whaanau Experience

tel: Sent from my iPhone

On 2 Sep 2021, at 07:32, Margaret Dotchin (ADHB) <

Kia ora Mike and Jenny

Mike - Thanks for pulling this together to support the messaging nationally regarding metro Auckland call for ICU nurses from other DHB's. As discussed there was much discussion yesterday on the national DoN zoom and a lack of clarity of why, when and how this will occur.

Jo Wright is now working closely with Jacky Wynne-Jones at CMDHB. It appears the logistics and co-ordination is going to occur through TAS for transport / accommodation etc. Jacky and Jo will co-ordinate the selection (right skills), timing, distribution across CMDHB and ADHB and orientation of those ICU nurses who are available.

Jenny, given this message of clarification is going out from metro Auckland – are you happy with it. Jos, has said that they are unlikely to need any support and just wants to be kept in the loop.

Ngā mihi

M

Margaret Dotchin (she/her)

Chief Nursing Officer

<image001.jpg>

<image002.png>

https://careers.adhb.govt.nz/covid-19-vaccination-and-immunisation/

From: Michael Shepherd (ADHB)

Sent: Wednesday, 01 September 2021 11:44 PM

To: Margaret Dotchin (ADHB) <

Subject: ICU nurses

Hi Marg

You happy with this?

Cheers Mike

Hi

Sorry if the messaging around Metro Auckland's request for ICU nurses has been a little unclear.

We thank you for the work you have already been doing on this.

We fully recognise that everyone across NZ is under great pressure and we are all unable to deliver as much planned care as we would like.

Why are we asking?

Yes we 'only' have 9 ICU/HDU COVID patients currently But

- these are resource intensive patients, with PPE protocols requiring additional resource and it includes 1 ECMO patient
- we continue to have staff vacancies due to COVID contacts in community
- we had staff vacancies prior to this
- we need to maintain ability delivery of number of other acute and national services eg burns, neurosurgery, transplant, complex cardiac surgery
- we need to be able to continue to deliver time critical planned care for the Northern region

And

- we know some of these patients are likely to have very long lengths of stay

- we anticipate further COVID patients will require ICU
- we want to plan for worst case scenario
- we know that any staff will require orientation and so we considered it prudent to proceed with this request sooner in preparation.

There is a reasonable chance that we will not need as much support, in which case of course we will not retain the nurses in Auckland.

We also know that complex planned care needs to be monitored across New Zealand to make sure that the situation is equitable. We are working with the Ministry of Health and the COO group to monitor this.

There have been a number of questions about more of the detail about how it will actually work for our nurses. We will be sending around further information around this soon.

Thanks again

Cheers

Mike

On behalf of the Metro Auckland DHBs

Tess Mann (ADHB) Michael Shepherd (ADHB) From: Wednesday, 25 August 2021 22:35 Sent: To: Mel Dooney (ADHB); Mark Edwards (ADHB) Subject: RE: Nurse request We think we will stick to ICU nurses Keep it 'simple' Mike Shepherd (he/him) Interim Director of Provider Services Ph: 09 Ext: | Mob: Te Toka Tumai (Auckland District Health Board) Level 12 | Building 01 | Auckland City Hospital Welcome Haere Mai | Respect Manaaki | Together Tühono | Aim High Angamua From: Mel Dooney (ADHB) Sent: Wednesday, 25 August 2021 10:34 PM To: Mark Edwards (ADHB) < >; Michael Shepherd (ADHB) < **Subject:** Re: Nurse request Hi I would have thought the PEHS risk was low to no risk given if we can pull of the fact their home DHB continues to pay them & we get cross charged. What we will need is some ability to ghost roster them (without payroll) in that case. It will have all sorts of Union ER stuff re: redeployment conditions Are we only talking nurses or do we need docs / others as well. M Sent from my iPhone On 25/08/2021, at 10:28 PM, Mark Edwards (ADHB) < > wrote: Hi all, Heads up. If we manage to source some nurses we cannot afford to delay them witha complicated PEHS process. Can we consider them like an internal transfer? Mark

From: Michael Shepherd (ADHB) <

To: Margaret Dotchin (ADHB)

Sent: Wednesday, 25 August 2021, 22:15

Cc: Mark Edwards (ADHB); Mel Dooney (ADHB)

Subject: FW: Nurse request

Hello Sorry forgot to copy you key people in Apologies M

Mike Shepherd (he/him)

Interim Director of Provider Services
Ph: 09 Ext: | Mob:

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

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From: Michael Shepherd (ADHB)

Sent: Wednesday, 25 August 2021 10:15 PM

Subject: Nurse request

Hi Jo and Jo

Tomorrow can we have a 1 pager requesting ICU trained nursing staff from around the country Rationale

Moving patients is hard in COVID environment

There is a bunch of stuff that we have to do anyway - quaternary

ICU nursing is our biggest pitfall

We have physical space and have enough of other workforce

Maybe 1 month secondment ideal

(Would take 2 weeks)

Pay for transport

Would put them up in accommodation (we would need to sort a suitable spot)

Ideally local DHB would keep paying them

Seek ADHB Occ Health exemption

I personally think we should take them now to orientate etc

We can always use them in other ways

Welcome other components – no doubt I have missed plenty

Cardiac expertise particularly helpful I would imagine but I'm not sure we should be picky ©

Sooner we can get this sent around the country the better I think

Cheers

Mike

Mike Shepherd (he/him)

Interim Director of Provider Services

Ph: 09 Ext: | Mob:

di 1

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

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From: Michael Shepherd (ADHB)

Sent: Thursday, 26 August 2021 07:03

Mark Edwards (ADHB)

To: Mark Edwards (ADHB) **Subject:** RE: Nurse request

Thanks:)

Cheers Mike

------ Original message ------From: "Mark Edwards (ADHB)" < >
Date: 26/08/21 06:22 (GMT+12:00)
To: "Michael Shepherd (ADHB)" < >

Subject: FW: Nurse request

Just FYI.

Should be no pre-employment screening hold-up.

Yes - could do a simple declaration that they sign similar to the contractor declaration: No health issues, no need for additional supports or accommodations, no known TB exposure or relevant symptoms, immune to relevant illnesses.

If they're coming from another DHB, that OH unit should be able to provide us their relevant Occ health records directly for immunity - many will be able to do so via healthlink so it embeds straight into their medtech file.

Α

Get Outlook for iOS

From: Mark Edwards (ADHB) <

Sent: Wednesday, August 25, 2021 10:28 PM

To: Jennie Montague (ADHB); Taylor Carter (ADHB); Alexandra Muthu (ADHB); Ann Whitfield (ADHB)

Cc: Mel Dooney (ADHB) **Subject:** Fwd: Nurse request

Hi all,

Heads up.

ı di 1 If we manage to source some nurses we cannot afford to delay them with acomplicated PEHS process. Can we consider them like an internal transfer?

Mark

From: Michael Shepherd (ADHB) <

Sent: Wednesday, 25 August 2021, 22:15

To: Margaret Dotchin (ADHB)

Cc: Mark Edwards (ADHB); Mel Dooney (ADHB)

Subject: FW: Nurse request

Hello

Sorry forgot to copy you key people in

Apologies

M

Mike Shepherd (he/him)

Interim Director of Provider Services

Ext: | Mob: Ph: 09

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

Welcome Haere Mai | Respect Manaaki | Together Tühono | Aim High Angamua

From: Michael Shepherd (ADHB)

Sent: Wednesday, 25 August 2021 10:15 PM

To: Jo Wright (Nursing Director) (ADHB) < >; Joanne Bos (ADHB) < Cc: Anne-Marie Pickering (ADHB) < >; Alex Pimm (ADHB) < >; Kerry Benson-Cooper (ADHB) < >; Andrew McKee (ADHB) < >; John Beca

(ADHB) <

Subject: Nurse request

Hi Jo and Jo

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Seek ADHB Occ Health exemption

I personally think we should take them now to orientate etc

We can always use them in other ways

Welcome other components – no doubt I have missed plenty
Cardiac expertise particularly helpful I would imagine but I'm not sure we should be picky ©

Sooner we can get this sent around the country the better I think

Cheers

Mike

Mike Shepherd (he/him)

Interim Director of Provider Services

Ph: 09 Ext: | Mob:

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

Welcome Haere Mai | Respect Manaaki | Together Tühono | Aim High Angamua

From: Michael Shepherd (ADHB)
Sent: Thursday, 26 August 2021 11:19

To: Andrew McKee (ADHB)
Subject: RE: Nurse request

Yeah I thought a 1 month rotation though

But I guess some people might want longer

Cheers Mike

----- Original message -----

From: "Andrew McKee (ADHB)" < Date: 26/08/21 11:14 (GMT+12:00)

To: "Michael Shepherd (ADHB)" <

Subject: RE: Nurse request

Should be for more than a month though

From: Michael Shepherd (ADHB)

Sent: Thursday, 26 August 2021 7:47 a.m. **To:** Andrew McKee (ADHB); Alex Pimm (ADHB)

Subject: RE: Nurse request

Let's get the ask clear today please then we can send out.

we will get it in the neck if we don't go via IMTs but also I want to make sure we are all saying the same thing

So

Yes

But later today and we need a key contact maybe Jo W

Cheers

Mike

----- Original message -----

From: "Andrew McKee (ADHB)" <

Date: 26/08/21 07:40 (GMT+12:00)

To: "Alex Pimm (ADHB)" < , "Michael Shepherd (ADHB)"

Subject: RE: Nurse request

Are you happy for me to forward to other ICU directors around the country?

From: Alex Pimm (ADHB)

Sent: Wednesday, 25 August 2021 10:38 p.m.

To: Michael Shepherd (ADHB)

Cc: Jo Wright (Nursing Director) (ADHB); Joanne Bos (ADHB); Anne-Marie Pickering (ADHB); Kerry Benson-Cooper

(ADHB); Andrew McKee (ADHB); John Beca (ADHB)

Subject: Re: Nurse request

Don't worry about pay, transport or accommodation at this point. I've asked for that to be part of the national coordination process and had agreement from MoH to the same (so let's be prepared to do it if needed!).

A

Alex Pimm

Director | Patient Management Services
Incident Controller | COVID-19 Response & Vaccination Team
Te Toka Tumai (Auckland District Health Board)
Level 4 | Building 1 | Auckland City Hospital

Mob: E-mail:

Working in partnership, enabling self-management, promoting independence.

Welcome Haere Mai | Respect Manaaki | Together Tuhono | Aim High Angamua

On 25/08/2021, at 22:14, Michael Shepherd (ADHB) <

wrote:

Hi Jo and Jo

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Welcome other components – no doubt I have missed plenty
Cardiac expertise particularly helpful I would imagine but I'm not sure we should be picky ☺

Sooner we can get this sent around the country the better I think

Cheers Mike

Mike Shepherd (he/him)

Interim Director of Provider Services

Ph: 09 Ext: | Mob

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

Welcome Haere Mai | Respect Manaaki | Together Tühono | Aim High Angamua

From: Michael Shepherd (ADHB)
Sent: Thursday, 26 August 2021 15:57

To: Joanne Bos (ADHB)

Cc: Anne-Marie Pickering (ADHB); Alex Pimm (ADHB); Kerry Benson-Cooper (ADHB);

Andrew McKee (ADHB); John Beca (ADHB); Jo Wright (Nursing Director) (ADHB)

Subject: RE: Nurse request

Attachments: Request for ICU Nurses.docx

Awesome

Few minor additions from me I am happy when others are

Next steps

- Go to National ICs
- Then (1 hour later) go to COOs and ICU leads

Cheers

Mike

From: Joanne Bos (ADHB)

Sent: Thursday, 26 August 2021 2:51 p.m.

To: Michael Shepherd (ADHB)

Cc: Anne-Marie Pickering (ADHB); Alex Pimm (ADHB); Kerry Benson-Cooper (ADHB); Andrew McKee (ADHB); John

Beca (ADHB); Jo Wright (Nursing Director) (ADHB)

Subject: RE: Nurse request

Draft paper attached. Please send me your feedback.

Regards

Joanne

From: Michael Shepherd (ADHB)

Sent: Wednesday, 25 August 2021 10:15 PM

Subject: Nurse request

Hi Jo and Jo

Tomorrow can we have a 1 pager requesting ICU trained nursing staff from around the country Rationale

- Moving patients is hard in COVID environment
- There is a bunch of stuff that we have to do anyway quaternary
- ICU nursing is our biggest pitfall
- We have physical space and have enough of other workforce

Maybe 1 month secondment ideal

(Would take 2 weeks)

Pay for transport

Would put them up in accommodation (we would need to sort a suitable spot)

di 1

Ideally local DHB would keep paying them Seek ADHB Occ Health exemption

I personally think we should take them now to orientate etc We can always use them in other ways

Welcome other components – no doubt I have missed plenty Cardiac expertise particularly helpful I would imagine but I'm not sure we should be picky ©

Sooner we can get this sent around the country the better I think

Cheers Mike

Mike Shepherd (he/him)

Interim Director of Provider Services

Ph: 09 Ext: | Mob:

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

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Michael Shepherd (ADHB) From:

Sent: Wednesday, 01 September 2021 15:50

To: Jess Smaling; Andrew Connolly (CMDHB); Jo Brown (ADHB); Ailsa Claire (ADHB)

Margaret Dotchin (ADHB) Cc:

Subject: RE: ICU nurses + Cardiac Surgery

Hi Guys

Look forward to discussing this at 5

We are shaping up Metro Auckland clarity about how we will manage ICU nursing offers - led by Jo Wright - CV nurse director ADHB

Agree that we need to manage this in a way which does not cause other harm

It sounds like we need to be a bit clearer with our national colleagues that these nurses will

- Be assessed for suitability
- Require orientation
- Will be likely used in batches
- Will be used to manage COVID, other acute demand and urgent planned care including P1 and national
- Will be returned if not needed of course and possible returned after orientation for a period to see how things go

We need to do some comms on this by the sounds of things with our National colleagues and should have included DON nationally more

Cheers Mike

Mike Shepherd (he/him)

Interim Director of Provider Services

Ph: 09 Ext: | Mob:

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

Welcome Haere Mai | Respect Manaaki | Together Tühona | Aim High Angamua

From: Jess Smaling [mailto

Sent: Wednesday, 01 September 2021 12:33 PM

To: Andrew Connolly (CMDHB) < ; Jo Brown (ADHB)

>; Ailsa Claire (ADHB) <

Cc: Michael Shepherd (ADHB) <

Subject: RE: ICU nurses + Cardiac Surgery

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Hi Andrew - we've had that very conversation with Southern, who are engaging with Waikato too. We'll pick this up nationally with our usual tertiary leads late this afternoon, following the receipt of the workforce plans at 4pm.



Great – agree

Options re cardiac seem to only be around Southern taking some from Waikato. I'll obviously support whatever is most effective solution for all parts of the system

Key question would be how soon SDHB could do this – it was to say take a week to really organise then SDHB can send three ICU nurses to Auckland immediately and always send them back in a week if that was also an option?? – communication to me from COO at SDHB (Patrick Ng).

Seems Waikato are in the proverbial re cardiac so need to consider if they have to keep their ICU nurses or if they can do cardiac, limit other planned care and still send nurses.

Seems CDHB can supply 5 nurses and still do their own urgent ICU stuff including cardiac.

Unsure re CCDHB.

Andrew

```
From: "Jo Brown (ADHB)" <
Date: Wednesday, 1 September 2021 at 12:22 PM
To: "Ailsa Claire (ADHB)" <
                                                        >, "Andrew Connolly (CMDHB)"
Cc: "Michael Shepherd (ADHB)"
                                      >, 'Jess Smaling'
Subject: RE: ICU nurses + Cardiac Surgery
```

Kia ora

Update to the below following a discussion with Jess and John Hazeldine:

There is evidently a Northern region CE discussion at 1330 today and this will be discussed

There is also a national meeting led by Keriana with the Regional CE's to identify what workforce support has been identified in those regions

We need to confirm communication channels and process following that 4pm call with a couple of things to note:

- National process to support with transport and accommodation is in place to facilitate the volunteers being in action in the Auckland region
- Process to address shortfall/gap in request for ICU nurse volunteers
- NRHCC/RPG coordination of the deployment within Auckland metro of ICU nurse volunteers

MOH (Jess/John) to bring forward meeting of Tertiaries to agree a plan and timeframes to get Band 2 (Waikato) and 3 (largely ADHB) Cardiac patients distributed to Cardiac centres nationally

Ngā mihi

Jo

Joanne Brown NRHCC Lead – Regional Provider Capacity Planning and Response Funder Hospitals – Auckland DHB

From: Jo Brown (ADHB)

Sent: Wednesday, 1 September 2021 11:19 a.m.

To: Ailsa Claire (ADHB)

Cc: Michael Shepherd (ADHB); Andrew Connolly (CMDHB); 'Jess Smaling'

Subject: ICU nurses + Cardiac Surgery

Importance: High

Kia ora Ailsa

Since we spoke I have spoken to Andrew Connelly and Jess Smaling.

Andrew and I propose the following:

- All DHBs are to send 5 x ICU nurses to Auckland region (I x ICU bed requires 5.2 FTE) excluding the Cardiac Centres who need to prioritise taking:
 - The Waikato Band 2 (3-10 days) patients who are waiting outside the clinical waiting time guideline (n= 9)
 - The ADHB Band 3 (11-30 days) patients who are waiting outside the clinical waiting time guideline (n = 29)

Southern DHB have already offered to take the Waikato patients or send 3 ICU nurses to Auckland

If each DHB sends 5 nurses this is equivalent to them losing 1 x bed and they will need to adjust their Planned Care scaling up accordingly

Northland DHB is to be excluded from this request because:

- Any loss of ICU capacity may lead to increased demand on Auckland metro ICU bed capacity
- Their capacity is included in the Northern region COVID bed management response

Where there are DHBs requesting an exception to this requirement, then we propose that that needs to be considered and approved on a case by case basis by MOH CMO and this exception should be considered only for those smallest DHBs such as Whanganui, West Coast, Wairarapa where the impact on local ICU capacity has a flow on effect to their tertiary centres

Jess is getting an update from her team re ICU

Ngā mihi Jo

Joanne Brown
NRHCC Lead – Regional Provider Capacity Planning and Response
Funder Hospitals – Auckland DHB

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From: Michael Shepherd (ADHB)

Sent: Wednesday, 01 September 2021 22:57

To: Ailsa Claire (ADHB)

Subject: Fwd: ICU nurses + Cardiac Surgery

Just FYI

Got to the point where

Waikato - keeps their nurses and tries to fix their cardiac problem

Rest send us nurses We will see how many

We will monitor cardiac and other wait lists to make sure we are all going as 'well' as each other

We will of course send nurses back if not needed

Cheers

Mike

Begin forwarded message:

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Hi Andrew – we've had that very conversation with Southern, who are engaging with Waikato too. We'll pick this up nationally with our usual tertiary leads late this afternoon, following the receipt of the workforce plans at 4pm.

From: Andrew Connolly (CMDHB) < >
Sent: Wednesday, 1 September 2021 12:28 pm

To: Jo Brown (ADHB) < >; Ailsa Claire (ADHB) < >
Cc: Michael Shepherd < >; Jess Smaling < >
Subject: Re: ICU nurses + Cardiac Surgery

Great - agree

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Key question would be how soon SDHB could do this – it was to say take a week to really organise then SDHB can send three ICU nurses to Auckland immediately and always send them back in a week if that was also an option?? – communication to me from COO at SDHB (Patrick Ng).

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Unsure re CCDHB.

Andrew

From: "Jo Brown (ADHB)" < >
Date: Wednesday, 1 September 2021 at 12:22 PM

To: "Ailsa Claire (ADHB)" < >
Cc: "Michael Shepherd (ADHB)" < >, "Andrew Connolly (CMDHB)" < >
Subject: RE: ICU nurses + Cardiac Surgery

Kia ora

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MOH (Jess/John) to bring forward meeting of Tertiaries to agree a plan and timeframes to get Band 2 (Waikato) and 3 (largely ADHB) Cardiac patients distributed to Cardiac centres nationally

Ngā mihi Jo

Joanne Brown

NRHCC Lead – Regional Provider Capacity Planning and Response Funder Hospitals – Auckland DHB

From: Jo Brown (ADHB)

Sent: Wednesday, 1 September 2021 11:19 a.m.

To: Ailsa Claire (ADHB)

Cc: Michael Shepherd (ADHB); Andrew Connolly (CMDHB); 'Jess Smaling'

Subject: ICU nurses + Cardiac Surgery

Importance: High

Kia ora Ailsa

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Andrew and I propose the following:

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Ngā mihi Jo

Joanne Brown
NRHCC Lead – Regional Provider Capacity Planning and Response
Funder Hospitals – Auckland DHB

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From: Michael Shepherd (ADHB)
Sent: Saturday, 28 August 2021 09:02

To: Margaret Dotchin (ADHB); Margaret Wilsher (ADHB)

Subject: Fwd: Workforce request - ADHB ITU nurses **Attachments:** Request for ICU Nurses 27-08-21.docx

Hi

This has gone out through IC and some fledgling national process But of course would always help via your networks too please

Cheers Mike

Begin forwarded message:

From: "Alex Pimm (ADHB)" <
Date: 27 August 2021 at 3:09:56 PM NZST

To: Health System Readiness & Response Planning <
Cc: Tricia Sloan <
, "Covid 19 (ADHB)" <
, "Michael Shepherd (ADHB)" <
, "Jo Wright (Nursing Director) (ADHB)" <

Subject: Workforce request - ADHB ITU nurses

The second second second

Kia ora,

As discussed, we are requesting national assistance to support Auckland DHBs with trained ITU nurses.

The attached document provide more detail on the request and background information. In summary, we are asking for:

Up to 30 trained/experienced ITU registered nurses, available to work in Auckland for the next six weeks.

To discuss the request further, please contact:

Joanne Bos, Interim Associate Director, Cardiovascular Services –
Joanne Wright, Nurse Director, Cardiovascular Services –

Ngā mihi, Alex

Alex Pimm

Director | Patient Management Services Incident Controller | COVID-19 Response & Vaccination Team

Te Toka Tumai (Auckland District Health Board)

Level 4 | Building 1 | Auckland City Hospital

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From: Keriana Brooking [mailto] Sent: Wednesday, 25 August 2021 15:18 To: Alex Pimm (ADHB) < >; Tricia Sloan < >; Health						
System Readiness & Response Planning <						
Subject: Please send National Request for Assistance here						
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From: Michael Shepherd (ADHB)
Sent: Saturday, 28 August 2021 12:29

To: Vaughn Wood (ADHB); Jo Wright (Nursing Director) (ADHB)

Cc: Liz Boucher (ADHB)

Subject: Orientation in case we get some ICU nurses

Ηi

I hear you are working on this

Thanks!

Can you please make sure it is strong in Organisational values and

Strategic priorities – in particular Te Tiriti and Equity

Cheers

Mike

From: Michael Shepherd (ADHB)
Sent: Friday, 03 September 2021 10:07

To:

Subject: FW: Metro Auckland ICU nurse request

Hi Joy

I thought you had some you could send?

Did I miss something?

M

Mike Shepherd (he/him)

Interim Director of Provider Services

Ph: 09 Ext: | Mob:

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

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From: Keriana Brooking [mailto

Sent: Friday, 03 September 2021 10:05 AM

To: Michael Shepherd (ADHB) <

Subject: RE: Metro Auckland ICU nurse request

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Kia ora koutou

Thanks for this, I have shared this with Allison and Tricia at TAS along with discussing this with them now.

Given the urgency of the MIQ request, most of the effort has been focused this week on that ask.

It would be far to say we have had muted response from DHBs to the ICU request although some DHBs may have responded directly.

We would like to re-group today so this email has been helpful. The letter from the Ministry re planned care to all DHB CEOs also provides some clarity.

We know there have been discussions in the tertiary network, cardiac network and Andrew as MOH acting CMO has contributed to the mix.

Your email has clearly articulated the demand and I imagine there is detail coming around effective date etc.

Supply is at that stage limited to Southern, Canterbury, Nelson-Marlborough, Hutt Valley, Mid-Central, Taranaki, Hawkes Bay, Lakes and Bay of Plenty, if we take Waikato, Cap Coast and the small DHBs off the table, accepting 7 of the DHBs on this list are not tertiary. I have spoken with Fionnagh Dougan on Tuesday night and she believes they

are excluded due to a pre-existing arrangement with ADHB (re cardiac) and the need to retain ICU staff for quarantine related presentations.

Let's work this through today with the intent to get a further request out to eligible DHBs this afternoon. Please let us know if you are also discussing this with someone in the Ministry so we can avoid double ups for you and us.

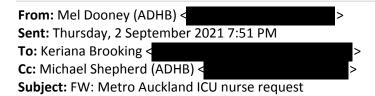
Ngā mihi

Keriana Brooking (she/her) Te Tumu Whakarae (Chief Executive Officer)							
Hawke's Ba	ay District Health I	Board					
Private Bag	9014, Hastings 41	56					
T: ++64 6	F: ++ 64	6	M: ++	-			
Email:			ı				
W: www.hawkesbaydhb.govt.nz							
Tauwhiro	Rāranga te tira	He kauani	uanu <i>l</i>	Ākina			

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https://www.publicservice.govt.nz/our-work/diversity-and-inclusion/pronoun-use-in-email-signatures/

This email may be sent to you outside your normal working hours. I do not expect a reply until you are "back at work". Mauriora



Apologies Keriana for the delay in getting back to you re: number of ICU nurses.

I had a chat with Mike tonight ... he had sent out email below earlier to the COOs which you may have seen. He is very happy for you to call him on the mobile below to further clarify.

What I gleened from my chat with him (some of it is different from what you discussed this am);

- We would ideally take 15 Tertiary qualified ICU nurses for 6 weeks. This could be 30 people for 3 weeks but we would still need to orientate them all for ~a week or so before deployment ... so likely makes for more total ICU nurse time away from the rest of NZ.
- Likely split: 2 teams of 5 for ADHB, & 1 for CMDHB
- In his view getting from the tertiaries is not off the table, & is in fact preferable largely because the service changes that have been agreed are limited to the spinal decision (which impacts CMDHB rather than ADHB). The decision amongst the tertiaries is not to move the cardiac patients around. Also apparently the RoNZ tertiaries were going to start their P2/P3 work from next week, & instead decided to go with less beds available /not doing that work & sending nurses to Auckland. This is seen as more equitable for NZ as a whole.
- This does not apply to Waikato (their P1 cardiac wait list can not support sending anyone).
- Also nursing staff from smaller ICUs (non-Tertiary) from the other DHBs are likely to require a lot more orientation and be less helpful to the overall juggle we have to do in ADHB/CMDHB staffing.

Mike – if I have missed vital bits / got stuff wrong please feel free to jump in & correct.

Ngā mihi

Mel Dooney (she / her)

Chief People Officer Auckland DHB

From: Michael Shepherd (ADHB)

Sent: Thursday, 2 September 2021 6:06 p.m.

To: Mel Dooney (ADHB)

Subject: FW: Metro Auckland ICU nurse request

FYI

Mike Shepherd (he/him)

Interim Director of Provider Services
Ph: 09 Ext: | Mob

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

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From: Michael Shepherd (ADHB)

Sent: Thursday, 02 September 2021 4:07 PM

Subject: Metro Auckland ICU nurse request

HI Tess

Can you please send to National COOs

Hi

Sorry if the messaging around Metro Auckland's request for ICU nurses has been a little unclear.

We thank you for the work you have already been doing on this.

We fully recognise that everyone across NZ is under great pressure and we are all unable to deliver as much planned care as we would like

Why are we asking?

Yes we 'only' have 10 ICU/HDU COVID patients currently

But

- these are resource intensive patients, with PPE protocols requiring additional resource and it includes 1 ECMO patient
- we also have a significant number of unwell ward patients who need HDU level care single organ failure with NIV
- they have a significant cumulative bed day impact
- we continue to have staff vacancies due to COVID contacts in community
- we had staff vacancies prior to this
- we need to maintain ability delivery of number of other acute and national services eg burns, neurosurgery, transplant, complex cardiac surgery
- we need to be able to continue to deliver time critical planned care for the Northern region

<u>And</u>

- we know some of these patients are likely to have very long lengths of stay
- we anticipate further COVID patients will require ICU
- we want to plan for worst case scenario
- we know that any staff will require orientation and so we considered it prudent to proceed with this request sooner in preparation.

There is a reasonable chance that we will not need as much support, in which case of course we will not retain the nurses in Auckland.

We also know that complex planned care needs to be monitored across New Zealand to make sure that the situation is equitable. We are working with the Ministry of Health and the COO group to monitor this.

There have been a number of questions about more of the detail about how it will actually work for our nurses. We will be sending around further information around this soon and TAS are helping with the coordination.

Thanks again

Cheers
Mike Shepherd
On behalf of the Metro Auckland DHBs

Mike Shepherd (he/him)

Interim Director of Provider Services

Ph: 09 Ext: | Mob:

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

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From: Michael Shepherd (ADHB)

Sent: Thursday, 02 September 2021 18:06

To: Mel Dooney (ADHB)

Subject: FW: Metro Auckland ICU nurse request

FYI

Mike Shepherd (he/him)

Interim Director of Provider Services
Ph: 09 Ext: | Mob:

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

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From: Michael Shepherd (ADHB)

Sent: Thursday, 02 September 2021 4:07 PM

To: Tess Mann (ADHB) <

Cc: Ailsa Claire (ADHB) >; Margaret Dotchin (ADHB) >; JennieMontague (ADHB) >; Jenny Parr (CMDHB) >; Jo Brown(ADHB) >; Jo Wright (Nursing Director) (ADHB) >

Subject: Metro Auckland ICU nurse request

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Welcome Haere Mai | Respect Manaaki | Together Tühono | Aim High Angamua



Frequently Asked Questions for Staff Being Re-deployed into Northern Region ICUs

As at 10 September 2021

Introduction

Below are some questions and answers to provide you with information for your redeployment. If you have further questions please email . We will update this guidance as required.

How will my travel and accommodation be organised?

TAS is managing the logistics around travel and accommodation and will liaise with you about the arrangements. TAS will also arrange travel from the airport to your accommodation. If you are travelling in a group, a shuttle will take you to your accommodation from the airport. The shuttle driver will have a sign for your group 'ICU Nurses'.

Your personal email and mobile are critical for these arrangements. TAS will ask for your Airpoints number if you have one; this will allow you to get live updates via your Air NZ app.

If I drive to my placement will car parking be provided?

Yes, TAS will source accommodation with parking and pay for any parking costs.

What about my travel to and from the ICU each day?

If you are using your own car because you have travelled by car on re-deployment, then your mileage will be covered – please keep a note of your mileage and claim this via your home DHB. This is over and above your daily allowance. If you have flown to your re-deployment, then you will be offered taxi chits to get to and from your rostered workplace. Please ask about this at your Orientation. During your shift, keep a check that you have a chit for your journey home. If not, speak to the Charge Nurse or shift lead. If you are deployed to Middlemore Hospital, further information on travelling by train from Britomart Station to Middlemore Hospital is provided in your letter.

What type of accommodation will I be staying in?

Accommodation is in apartment style units which are centrally located or near the airport. You will be able to do your own washing and cooking here. You will not be sharing accommodation and it will be just for you and not family.

Will I be self-catering, or will meals be provided?

You will be able to cook your own meals in your apartment. Hospital Cafeterias are open in Alert Level Four. Your self-catering is covered by the daily allowance arrangement. The local Countdown at Victoria St is 300m away and has a special time for Essential Workers to do their shopping from 7.00 -8.00am. Take your essential worker letter with you.

What is the 'Daily Allowance' and what are the rules around it?

A daily allowance provides those on deployment assistance with any self-catering and other personal incidentals. This will be paid by your home DHB while you are on deployment during the Auckland COVID-19 response. The period of payment will cover the spell of your deployment and, accrue at a rate of \$75 per overnight stay. You will claim this via your home DHB reimbursement process.

Will I need to take my uniform, or will one be provided? What else do I need to take?

Yes, take your scrubs/uniform (if you have one), your DHB ID/Access card and your vaccination card or, your portal login details to prove your vaccination status. As above, your accommodation will have laundry facilities.

You will be provided with any PPE that is required to be worn. If you have a reusable N95 Mask that you have been specially fitted for, please bring this with you.

Will I get an orientation?

Yes, your host DHB will arrange your orientation and you will be given full training to undertake all duties associated with your temporary assignment. TAS will provide your details in advance to the host DHB so they will be ready for you.

You will be provided with a health and safety induction and this will include the use of any appropriate PPE and provision and training in relevant policies and procedures and day to day expectations.

Will I have a key contact person at the ICU I am going to?

Yes, you will have a person who manages your orientation and placement and will be given a contact number for this person. These details will have been sent to you in your travel letter.

Will I have to wear a N95?

Yes, you will be required to wear a N95. You will need to get fit tested for a respirator mask. Ideally this fit testing should happen in your home DHB before you are redeployed. TAS can assist to have this arranged for you through the GMHR in your home DHB.

Will I be required to have a COVID-19 Test regularly?

Yes, under the Required Testing Order you will have to have a COVID-19 Swab every 7 days. There is on site testing, meaning that you can get your swab whilst at work.

If you are to return to another healthcare role you have a 48 hour stand down period in which you require a negative swab before you can return to work.

What will I be paid?

The terms and conditions of your employment will remain unchanged. You will retain your current pay or, be paid the respective pay for the hours worked, whichever is the greater, whilst on temporary assignment to the ICU.

How will I be paid for extra hours?

Your host DHB will inform your home DHB GMHR of shifts worked and this will be reflected in your pay slip. This will be assessed at the end of your deployment. If you are not assigned to a shift immediately after your orientation, you will still be paid as per your home DHB arrangements.

What shifts are available to work?

ICUs operate 24/7 so the requirement includes nights and weekend work. These are 12-hour shifts.

What happens when I finish my assignment?

Stand down from further work for 48 hours <u>and</u> until they have received a negative result from a test taken after their last shift in the ICU.

Your stand-down time will be paid as if you were rostered on for this time.

Further information is provided in the attached MoH COVID-19 Returning healthcare Workers Guidance – No 3: Healthcare workers that are seconded to Alert Level 4 non-MIQF settings, and are returning to work in non-MIQF settings in other regions – note ICU RN are included in this section.

What about getting back home - who will arrange this travel?

UNCLASSIFIED

TAS will arrange your travel home if you require flights. Email your travel requests to

These can be booked once your end of assignment and travel dates

(factoring in stand-down) are confirmed and, they will be flexi-fares. TAS will also arrange a taxi/shuttle to the airport for you and email you a confirmation of this booking with Auckland Co-op Cabs.

Can I go home for a visit on my rostered days off during my placement?

This will be determined on a case-by-case basis and likely to be dependent on the duration of your placement.



Date of secondment	Name of Nurse	Length of Secondment	Host DHB and area	Home DHB	Contact at Home DHB
7 th September	Transc i	6 weeks	CVICU ADHB	Bay of Plenty	Home Drib
13 th September		21 days	DCCM ADHB	Lakes	
13 th September	on	21 Days	CMDHB Middlemore ICU complex	Taranaki	
13 th September	es	21 Days	CMDHB Middlemore ICU	Southern	
20 th September		21 Days	CMDHB Middlemore ICU complex	Canterbury	
20 th September		21 Days	ADHB CVICU	CCDHB	
20 th September		21 Days	ADHB DCCM	ССДНВ	
20 th September		6 weeks	ADHB CVICU	Southern	
20 th September		21 days	CMDHB Middlemore ICU complex	CCDHB	
20 th September		14 Days	ADHB DCCM	Mid Central DHB	
27 th September		21 Days	ADHB DCCM	Canterbury	
27 th September	nt	21 days	ADHB DCCM	Canterbury	
4 th October		21 Days	ADHB DCCM	Lakes	
4 th October		21 days	CMDHB Middlemore ICU complex	Taranaki	
4 th October		21 Days	Waiarapa DHB/CCDHB	CMDHB Middlemore ICU Complex	
11 th October		Check how long for Rose please	Southern	CMDHB Middlemore ICU complex	
11 th October		Check how long for Rose please	Hauora Tairawhiti	CMDHB Middlemore ICU comlex	

ICU Nurses Rapid Response First profile list for TAS

Date of secondment	Name of Nurse	Length of Secondment	Host DHB and area	Home DHB	Contact at Home DHB
7 th September		6 weeks	CVICU ADHB	Bay of Plenty	
13 th September		21 days	DCCM ADHB	Lakes	
13 th September		21 Days	CMDHB Middlemore ICU complex	Taranaki	
13 th September		21 Days	CMDHB Middlemore ICU	Southern	
20 th September		21 Days	CMDHB Middlemore ICU complex	Canterbury	
20 th September		6 weeks	ADHB CVICU	Southern	
27 th September		21 Days	ADHB DCCM	Canterbury	-
27 th September		21 days	ADHB DCCM	Canterbury	
4 th October		21 Days	ADHB DCCM	Lakes	
4 th October	_	21 days	CMDHB Middlemore ICU complex	Taranaki	

Date of secondment	Name of Nurse	Length of Secondment	Host DHB ICU	Home DHB	CCN at Home ICU	Travel Bked
7 th September		6 weeks	CVICU ADHB	Bay of Plenty		N/A
13 th September		21 days	DCCM ADHB	Lakes		In Bound
13 th September		21 Days	CMDHB Middlemore ICU complex	Taranaki		In Bound
13 th September		21 Days Confirming if SDHB agrees to extend to 6 weeks	CMDHB Middlemore ICU	Southern		In Bound
20 th September		21 Days	CMDHB Middlemore ICU complex	Canterbury		In Bound
20 th September		6 weeks	ADHB CVICU	Southern		In Bound
27th September		21 Days	ADHB DCCM	Canterbury		In Bound
27 th September		21 days	ADHB DCCM	Canterbury		In Bound
4 th October		21 Days	ADHB DCCM	Lakes	_	In Bound
4 th October		21 days	CMDHB Middlemore ICU complex	Taranaki		In Bound
20 th Sept		21 Days	ADHB CVICU	ССДНВ		To be booked
20 th Sept		21 Days	ADHB DCCM			To be booked
20 th Sept		21 Days	CMDHB Middlemore ICU complex			To be booked
4 th Oct		21 Days	CMDHB Middlemore ICU complex	Wairarapa & CCDHBs		To be booked
To be confirmed		Available 2 weeks from 4 Oct		MidCentral DHB		

ICU Nurses Rapid Response Deployment to Auckland City Hospital and Middlemore Hospital

Date of secondment	Name of Nurse	Length of Secondment	Host DHB ICU	Home DHB	CCN at Home ICU	Travel Bked
To be confirmed		Available 2 weeks from 20 th Sept		MidCentral DHB		
To be confirmed				Taranaki DHB		
To be confirmed						
To be confirmed						1

From: Alex Pimm (ADHB)

To: Health System Readiness & Response Planning

Cc: Tricia Sloan; "Keriana Brooking"; Covid 19 (ADHB); Michael Shepherd (ADHB); Joanne Bos (ADHB); Jo Wright

(Nursing Director) (ADHB)

Subject: Workforce request - ADHB ITU nurses
Date: Friday, 27 August 2021 15:09:56
Attachments: Request for ICU Nurses 27-08-21.docx

Kia ora,

As discussed, we are requesting national assistance to support Auckland DHBs with trained ITU nurses.

The attached document provide more detail on the request and background information. In summary, we are asking for:

Up to 30 trained/experienced ITU registered nurses, available to work in Auckland for the next six weeks.

To discuss the request further, please contact:

Joanne Bos, Interim Associate Director, Cardiovascular Services –
Joanne Wright, Nurse Director, Cardiovascular Services –

Ngā mihi,

Alex

Alex Pimm

Director | Patient Management Services Incident Controller | COVID-19 Response & Vaccination Team

Te Toka Tumai (Auckland District Health Board)

Level 4 | Building 1 | Auckland City Hospital

Mob: E-mail:

Working in partnership, enabling self-management, promoting independence.

Welcome Haere Mai | Respect Manaaki | Together Tuhono | Aim High Angamua

From: Keriana Brooking [mailto

Sent: Wednesday, 25 August 2021 15:18

To: Alex Pimm (ADHB) < >; Tricia Sloan <

System Readiness & Response Planning <

Subject: Please send National Request for Assistance here

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SCHEDULE

0700-1100	Manawa Awhi Level 15
Please consider a tea	Staff ID collectionUniforms
break	IT orientation (Emails, RCP, Koawatea Learn, Datix, Trendcare, WFC)
	Mandatory training
1100 – 1230	CVICU Level 4 Ward 48
	Welcome pack
	Competency book
	Orientation roster
	Unit tour
1230-1300	Local Health and Safety Induction
1300-1330	Lunch
1330 – 1430	POCT ABG training
	• ACT
	Glucose
1430-1530	Donning and Doffing
	Mask fitting
	Introduction to Standard Operating Procedures for COVID



SCHEDULE

	,
0730-0900	 Introduction to ICU Bed-space Set-up Safety checks Patient assessment CVICU Bypass Chart + Medication Chart CVICU Bundles Guardrails and Standardized Infusions
0900-1000	Drager Ventilators and Oxylog
1000 – 1030	MORNING TEA
1030 – 1200	Pacing: Basic Theory
1200 – 1300	Post-op Cares Following Cardiac Surgery
1300 – 1330	LUNCH
1330 – 1400	Cardiac Output
1400 – 1530	Koawatea time

From: <u>Jo Brown (ADHB)</u>

To: NRHCC Administration; ADHB IMT Controller (ADHB); Allsa Claire (ADHB); Alberto Areias (HealthSource);

Alex Pimm (ADHB); ARPHS Emergency Incident Controller (ADHB); Donna Neal (ADHB); Incident Control Centre (WDHB); John Cartwright (CMDHB); Justin Rawiri (ADHB); Liz Boucher (ADHB); Major Disasters Only - Incident Controller (CMDHB); Mark Shepherd (WDHB); Michael Shepherd (ADHB); NRHCC Incident Controller; Paula Martin (NDHB); Pauline McGrath (CMDHB); Sarah Hoyle (NDHB); Mark McGinley (NDHB); Shared Mailbox - IMT Incident Controller (NDHB); Stacey Wilson (CMDHB); Tamzin Brott (WDHB); Jonathan

Wallace (WDHB); Emma McDowall (ADHB); Stephanie Doe (WDHB); David Resoli (WDHB)

Vanessa Thornton (CMDHB); Peter Watson (CMDHB); Andrew Old (WDHB); Debbie Holdsworth (WDHB);

Jonathan Christiansen (WDHB); Vanessa Aplin (WDHB); Alison Hendry (CMDHB)

Subject: Bed management update 1630 1 September & Regional coordination nationally deployed staff to Auckland

region

Date: Wednesday, 01 September 2021 16:58:17

RPG 1630 bed update

Cc:

CMDHB 13 adult IP plus 3 ICU (2 ventilated)

- ADHB 11 adult IP plus 4 ICU (2 ventilated including 1 x ECMO) plus 2 pending
- WDHB 8 adult IP plus 1 ICU
- Total 32 adult IP plus 8 ICU (4 ventilated) plus 2 pending

Overnight plan - 1 to WDHB, 1 to ADHB, 1 to CMDHB, then 2 to ADHB



Regional coordination nationally deployed staff to Auckland region ICU nurses

- Jo Wright, Nurse Director Cardiac services has this in hand, liaising with lead nurses in other ICUs regionally
- Developing plan for orientation/placement/rostering of nurses including any requirements post placement in Auckland prior to return to home DHB



Ngā mihi Jo

Joanne Brown
NRHCC Lead – Regional Provider Capacity Planning and Response

Funder Hospitals – Auckland DHB

From: Health Info

To: O365.DHB - CEOs; O365.DHB - CEO EAs; O365.DHB - GMs Human Resources; O365.DHB - COOs;

O365.DHB - COOs EA

Cc: Tricia Sloan; Allison Plumridge; Peter Brown; Rose Laloli; Stephanie Calder

Subject: COVID - ADHB Workforce request - ICU nurses

Date: Friday, 27 August 2021 18:42:42

Attachments: ADHB Request for ICU Nurses 27-08-21.docx

Importance: High

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Kia ora koutou

We are forwarding to you (attached and below), on behalf of Auckland District Health Board, a request for national assistance to support Auckland DHBs with trained ICU nurses.

We are developing a national system to match DHB requests for staffing assistance with donor DHBs. As that system is not in place yet, please direct any queries to ADHB contacts listed below.

Ngā mihi

TAS on behalf of ADHB

From: Alex Pimm (ADHB) <	■	
Sent: Friday, 27 August 2021 3	3:10 PM	
To: Health System Readiness 8	& Response Planning <	•
Cc: Tricia Sloan <	; 'Keriana Brooking'	
√	>; Covid 19 (ADHB) <	>; Michael
Shepherd <	>; Joanne Bos (ADHB) <	; Jo Wright
(Nursing Director) (ADHB) <	—	
Subject: Workforce request -	ADHB ICU nurses	

Kia ora,

As discussed, we are requesting national assistance to support Auckland DHBs with trained ICU nurses.

The attached document provide more detail on the request and background information. In summary, we are asking for:

Up to 30 trained/experienced ICU registered nurses, available to work in Auckland for the next six weeks.

To discuss the request further, please contact:

Joanne Bos, Interim Associate Director, Cardiovascular Services —

Joanne Wright, Nurse Director, Cardiovascular Services —

Ngā mihi, Alex

Alex Pimm

Director | Patient Management Services Incident Controller | COVID-19 Response & Vaccination Team

Te Toka Tumai (Auckland District Health Board)

Level 4 | Building 1 | Auckland City Hospital

Mob:

E-mail:

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To: <u>Alex Pimm (ADHB)</u>

Subject: FW: Essential Travel Letters and Returning healthcare guideance

Date: Monday, 20 September 2021 15:50:14

Attachments: FINAL ICU Employee Profile pd

Importance: High

From: Rose Laloli [mailto:

Sent: Friday, 17 September 2021 11:57 a.m.

To: Susan Robertson (CMDHB); Jo Wright (Nursing Director) (ADHB)

Cc: Fiona Sinclair

Subject: RE: Essential Travel Letters and Returning healthcare guideance

Importance: High

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Susan I only have on file

@Jo do you have profiles for and that can be forwarded onto
Susan urgently

@Susan — is actually ADHB — mu error below and has a letter
Really urgent to get these letters in next 3 hours please
Thanks
Rose

From: Susan Robertson (CMDHB) <

Sent: Friday, 17 September 2021 11:04 am **To:** Rose Laloli <

Subject: RE: Essential Travel Letters and Returning healthcare guideance

Hi

Can you supply the profiles please - having trouble getting the information

From: Rose Laloli [mailto: Sent: Thursday, 16 September 2021 5:41 p.m.

To: Susan Robertson (CMDHB)

Cc: Tui Vito (CMDHB); Fiona Sinclair; COVID Response

Subject: RE: Essential Travel Letters and Returning healthcare guideance

Importance: High

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Appendix 1 Page 90 of 255

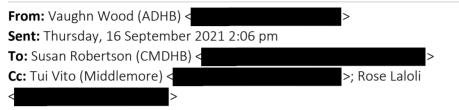
IN-CONFIDENCE

Hi Susan and Tui Vito

Checking in that you will have essential travel letters for Harriett Smithies and Kim Kimpay forwarded to me by **12noon tomorrow (Friday 17 Sept)** please

Regards

Rose



Subject: FW: Essential Travel Letters and Returning healthcare guideance

Importance: High

Hi Susan,

Please will you arrange letters for the ICU Nurses coming to MMH on Monday and provide these to Rose Laloli (Cc'd into this email)?

Regards, Vaughn

Essential Travel Letters

Would you please organise ETL for the following people who are traveling on Sunday 19 October



Sunday 3rd October

- CMDHB

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If you are looking for medical jobs in New Zealand, your career in health starts with us.

To: Alex Pimm (ADHB)

Subject: FW: Expression of interest for rotation to Akld ICUs

Date: Monday, 20 September 2021 15:52:06

Attachments: COVID-19 Rapid Response Employee Profile - Anna Lawson 15.9.21.pdf

From: Rose Laloli [mailto:

Sent: Wednesday, 15 September 2021 3:08 p.m.

To: Jo Wright (Nursing Director) (ADHB)

Subject: FW: Expression of interest for rotation to Akld ICUs

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Hi Jo

Attached is Anna Lawson profile for your consideration for ICU assignment I'm waiting for 2 more profiles
Rose



Rose Laloli

Team Leader, Integrated Community Services

Interim Team Leader, Business Support Services



M:

69 Tory Street, PO Box 23075, Wellington 6140

https://smex12-5-en-

ctp.trendmicro.com:443/wis/clicktime/v1/query?

url=www.tas.health.nz&umid=5e4f3981-2cd7-490d-9626-

34f7473b4d76&auth=b8880051a5968406de874aba71898a20c6add7f1-

797efcc408a993b7c8b206e7122770e8cb102d04



To: Alex Pimm (ADHB)
Subject: FW: Final profiles

Date: Monday, 20 September 2021 15:55:24

Attachments: ICU Rapid Resonse.docx

From: Jo Wright (Nursing Director) (ADHB) **Sent:** Monday, 20 September 2021 1:16 p.m. **To:** COVID Response; Vaughn Wood (ADHB)

Subject: Final profiles

Hi Rose

Hope you had a good weekend

We have reviewed the final 3 profiles this morning and would like

and to go to CMDHB Middlemore ICU complex please, they are keen for the start date to be 11th October if that is possible they can then start together.

Some nurses at CMDHB are requesting to work with COVID patients what is the position on this, they want to be part of the team and get the experience. From talking to the Nurse Manager at Middlemore and have already worked with an ICU nurse paired together with a COVID patient and and have requested to. At ADHB this has not come up. Are they allowed to do this with the agreement I've attached updated list. was only available for 10 days so the team did not want to take her.

Ngā mihi

Jo

Jo Wright Nurse Director Cardiovascular Directorate Auckland District Health Board

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Appendix 1 Page 93 of 255

To: <u>Alex Pimm (ADHB)</u>

Subject: FW: ICU nurses Rapid response

Date: Monday, 20 September 2021 15:59:44

From: Jo Wright (Nursing Director) (ADHB)
Sent: Thursday, 09 September 2021 11:17 a.m.

To: Jacqui Wynne-Jones (CMDHB); COVID Response; Janine Rouse (ADHB); Sandra Durrell (ADHB);

Vaughn Wood (ADHB); Jane Speirs (ADHB); Wendy Stanbrook-Mason (ADHB)

Cc: Margaret Dotchin (ADHB); Michael Shepherd (ADHB)

Subject: RE: ICU nurses Rapid response

Hi Jacqui I'll pass you onto Vaughn from HR, he has been in touch with Elizabeth Jeffs regarding paperwork from HR. the only nursing is the orientation package.

Jo

From: Jacqui Wynne-Jones (CMDHB)

Sent: Thursday, 09 September 2021 11:15 a.m.

To: Jo Wright (Nursing Director) (ADHB); COVID Response; Janine Rouse (ADHB); Sandra Durrell

(ADHB); Vaughn Wood (ADHB); Jane Speirs (ADHB); Wendy Stanbrook-Mason (ADHB)

Cc: Margaret Dotchin (ADHB); Michael Shepherd (ADHB)

Subject: RE: ICU nurses Rapid response

Hi Jo. Just had a question from our IMT. Is there any paper work for the DHB to do? Thanks, Jaqcui.

From: Jo Wright (Nursing Director) (ADHB)
Sent: Wednesday, 08 September 2021 4:15 p.m.

To: COVID Response; Janine Rouse (ADHB); Jacqui Wynne-Jones (CMDHB); Sandra Durrell (ADHB);

Vaughn Wood (ADHB); Jane Speirs (ADHB); Wendy Stanbrook-Mason (ADHB)

Cc: Margaret Dotchin (ADHB); Michael Shepherd (ADHB)

Subject: ICU nurses Rapid response

Hi Rose and everyone

Hope this is the same or almost as the spreadsheet you were sending me! I've spoken to

regarding dates and duration that they are able to release for. It is fairly evenly spread across ICU's and we still have another 7 profiles to come back to you at TAS. Lessons learnt really knowing how many nurses out of the profiles they can release at one time would be good to know and dates when available. Questions from talking to a few whom are coming

- Food I know you said a \$75 day allowance what facilities are there
- Transport some wanting to drive up so car parking, HOP card etc Lovely to work with you today Rose

Jo

Jo Wright (ADHB) Nurse Director Cardiovascular

To: Alex Pimm (ADHB)

Subject: FW: ICU nurses Rapid response

Date: Monday, 20 September 2021 16:00:50

Attachments: ICU Rapid Resonse.docx

From: Jo Wright (Nursing Director) (ADHB) Sent: Thursday, 09 September 2021 9:03 a.m.

To: Andrew McKee (ADHB)

Subject: FW: ICU nurses Rapid response

Keeping you up to date Andrew, 7 more profiles in the pipeline form Cap coast Mid central Jo

From: Jo Wright (Nursing Director) (ADHB)
Sent: Wednesday, 08 September 2021 4:16 p.m.

To: COVID Response

Subject: FW: ICU nurses Rapid response

From: Jo Wright (Nursing Director) (ADHB)

Sent: Wednesday, 08 September 2021 4:15 pm

To: 'COVID Response' > ; Janine Rouse (ADHB)

>; Jacqui Wynne-Jones (CMDHB) < Jacqui.Wynne
>; Sandra Durrell (ADHB) < >; Vaughn Wood

(ADHB) < >; Jane Speirs (ADHB) < >; Wendy

Stanbrook-Mason (ADHB) < > ; Michael Shepherd (ADHB)

Subject: ICU nurses Rapid response

Hi Rose and everyone

Hope this is the same or almost as the spreadsheet you were sending me! I've spoken to

regarding dates and duration that they are able to release for. It is fairly evenly spread across ICU's and we still have another 7 profiles to come back to you at TAS. Lessons learnt really knowing how many nurses out of the profiles they can release at one time would be good to know and dates when available. Questions from talking to a few whom are coming

- Food I know you said a \$75 day allowance what facilities are there
- Transport some wanting to drive up so car parking, HOP card etc Lovely to work with you today Rose

Jo

Jo Wright (ADHB) Nurse Director Cardiovascular

To: Alex Pimm (ADHB)

Subject: FW: ICU nurses support form other DHB"s

Date: Monday, 20 September 2021 15:57:20

From: Jo Wright (Nursing Director) (ADHB) Sent: Wednesday, 15 September 2021 3:12 p.m.

To: 'COVID Response'; Fenia Kalantzi (ADHB); Jane Speirs (ADHB)

Cc: Janine Rouse (ADHB); Sapna Sheth (ADHB); Chelsey Mayson (ADHB); Vaughn Wood (ADHB); Wendy

Stanbrook-Mason (ADHB); Fiona Sinclair

Subject: RE: ICU nurses support form other DHB's

Thank you Rose

In

From: COVID Response [mailto:

Sent: Wednesday, 15 September 2021 1:48 p.m.

To: Jo Wright (Nursing Director) (ADHB); Fenia Kalantzi (ADHB); Jane Speirs (ADHB); COVID Response **Cc:** Janine Rouse (ADHB); Sapna Sheth (ADHB); Chelsey Mayson (ADHB); Vaughn Wood (ADHB); Wendy

Stanbrook-Mason (ADHB): Fiona Sinclair

Subject: RE: ICU nurses support form other DHB's

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Britomart

Rose

From: Jo Wright (Nursing Director) (ADHB) <

Sent: Wednesday, 15 September 2021 1:22 pm

To: Fenia Kalantzi (ADHB) < >; Jane Speirs (ADHB) < >; COVID Response < >

Cc: Janine Rouse (ADHB) < >; Sapna Sheth (ADHB) < >; Chelsey Mayson (ADHB) < >; Vaughn Wood (ADHB)

>; Wendy Stanbrook-Mason (ADHB) <</p>

Subject: RE: ICU nurses support form other DHB's

Hi can you get back re who's meeting and what time please

Thanks

Jo

From: Fenia Kalantzi (ADHB)

Sent: Wednesday, 15 September 2021 12:55 p.m.

To: Jane Speirs (ADHB); Jo Wright (Nursing Director) (ADHB); COVID Response

Cc: Janine Rouse (ADHB); Sapna Sheth (ADHB); Chelsey Mayson (ADHB); Vaughn Wood (ADHB); Wendy

Stanbrook-Mason (ADHB); Fenia Kalantzi (ADHB) **Subject:** RE: ICU nurses support form other DHB's

Hi all,

Could you please confirm what time will the nurses be arriving at ADHB on Monday and who's meeting them?

We are happy to do it if no one else is available ©

Also, please let us know who will communicate this with them?

Update on what's been done so far:

Datix training booked - 8:30-9:00am IT Training booked - 9:00-11:00am

Logins and access to applications granted for Dom and requested for the rest.

Date of secondment	Name of Nurse	Length of Secondment	Host ADHB and area	Manager at ADHB
Monday, 20 September 2021		6 weeks	ADHB CVICU	
Monday, 20 September 2021		21 Days	ADHB CVICU	
Monday, 20 September 2021		21 Days	ADHB DCCM	
Monday, 20 September 2021		14 days	ADHB DCCM	

Kind regards,

Fenia Kalantzi

Business Support Advisor

Manawa Awhi / Nursing Development Unit

Te Toka Tumai | Auckland District Health Board | Level 15 | Building 1 | Auckland City Hospital

From: Jane Speirs (ADHB)

Sent: Wednesday, 15 September 2021 10:20 a.m.

To: Jo Wright (Nursing Director) (ADHB); COVID Response

Cc: Jacqui Wynne-Jones (CMDHB); Kathleen Devoy (CMDHB); Janine Rouse (ADHB); Sapna Sheth (ADHB); Chelsey Mayson (ADHB); Vaughn Wood (ADHB); Wendy Stanbrook-Mason (ADHB); Fenia Kalantzi (ADHB)

Subject: RE: ICU nurses support form other DHB's

Thank you Jo

Confirming Lesley Everett should read last name Everest.

Jane

Jane Speirs

Human Resources Consultant | Human Resources Department

Auckland District Health Board | Level 4 | Building 31 | Auckland City Hospital

Mobile: | Email:

From: Jo Wright (Nursing Director) (ADHB) Sent: Wednesday, 15 September 2021 10:18 a.m.

To: COVID Response

Cc: Jacqui Wynne-Jones (CMDHB); Kathleen Devoy (CMDHB); Janine Rouse (ADHB); Sapna Sheth (ADHB); Chelsey Mayson (ADHB); Vaughn Wood (ADHB); Jane Speirs (ADHB); Wendy Stanbrook-Mason (ADHB);

Fenia Kalantzi (ADHB)

Subject: RE: ICU nurses support form other DHB's

With attachment

Jo

From: Jo Wright (Nursing Director) (ADHB) Sent: Wednesday, 15 September 2021 10:16 a.m.

To: COVID Response

Cc: Jacqui Wynne-Jones (CMDHB); Kathleen Devoy (CMDHB); Janine Rouse (ADHB); Sapna Sheth (ADHB); Chelsey Mayson (ADHB); Vaughn Wood (ADHB); Jane Speirs (ADHB); Wendy Stanbrook-Mason (ADHB);

Fenia Kalantzi (ADHB)

Subject: ICU nurses support form other DHB's

Hi everyone updated list, I've colour coded arrived Green, next week Orange and red in the pipeline. Thanks Rose for your help and support, Chelsey would like contact details for Dom Gauthier and Fernah Peacey please.

Thanks

Jo

Ngā mihi

Jo Wright Nurse Director Cardiovascular Directorate Auckland District Health Board

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To: Alex Pimm (ADHB)

Subject: FW: ICU nurses support form other DHB"s

Date: Monday, 20 September 2021 15:57:41

Attachments: ICU Rapid Resonse.docx

From: Jo Wright (Nursing Director) (ADHB)

Sent: Wednesday, 15 September 2021 10:18 a.m.

To: COVID Response

Cc: Jacqui Wynne-Jones (CMDHB); Kathleen Devoy (CMDHB); Janine Rouse (ADHB); Sapna Sheth (ADHB); Chelsey Mayson (ADHB); Vaughn Wood (ADHB); Jane Speirs (ADHB); Wendy Stanbrook-

Mason (ADHB); Fenia Kalantzi (ADHB)

Subject: RE: ICU nurses support form other DHB's

With attachment

lo

From: Jo Wright (Nursing Director) (ADHB)

Sent: Wednesday, 15 September 2021 10:16 a.m.

To: COVID Response

Cc: Jacqui Wynne-Jones (CMDHB); Kathleen Devoy (CMDHB); Janine Rouse (ADHB); Sapna Sheth (ADHB); Chelsey Mayson (ADHB); Vaughn Wood (ADHB); Jane Speirs (ADHB); Wendy Stanbrook-

Mason (ADHB); Fenia Kalantzi (ADHB)

Subject: ICU nurses support form other DHB's

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Thanks Rose for your help and support, Chelsey would like contact details for Dom Gauthier and Fernah Peacey please.

Thanks

Jo

Ngā mihi

Jo Wright Nurse Director Cardiovascular Directorate Auckland District Health Board

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To: Alex Pimm (ADHB)

Subject: FW: ICU nurses to Auckland

Date: Monday, 20 September 2021 16:02:02

From: Jo Wright (Nursing Director) (ADHB) **Sent:** Wednesday, 08 September 2021 11:44 a.m. **To:** COVID Response; Vaughn Wood (ADHB)

Subject: ICU nurses to Auckland

Hi Rose and Vaughn I have talked to Taranaki nurse manager and here is the plan

for Middlemore CMDHB Monday 20th for 21 days

Then

following Janes return for 21 days

Thanks

Jo

Jo Wright (ADHB)

Nurse Director

Cardiovascular

Auckland District Health Board

To: Alex Pimm (ADHB)
Subject: FW: ICU profiles

Date: Monday, 20 September 2021 16:03:05

Attachments: image002.png

From: Jo Wright (Nursing Director) (ADHB) Sent: Tuesday, 07 September 2021 2:56 p.m.

To: 'Allison Plumridge'

Cc: Cecilia Lynch (NRA); Vanessa Aplin (WDHB); COVID Response; Vaughn Wood (ADHB)

Subject: RE: ICU profiles

Hi Alison thank you so much we will take all 12 nurses, we have allocated across CMDHB and ADHB in 2 tranches

In the flow chart it say *Host DHB to send Secondment agreement paperwork to TAS*, do you have a template for this please. We have some for a Monday start.

All very fantastic

Thanks Jo

Ngā mihi

Jo Wright Nurse Director Cardiovascular Directorate Auckland District Health Board

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From: Allison Plumridge [mailto:

Sent: Tuesday, 07 September 2021 8:23 a.m.
To: Jo Wright (Nursing Director) (ADHB)

Cc: Cecilia Lynch (NRA); Vanessa Aplin (WDHB); COVID Response

Subject: RE: ICU profiles

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Great - thanks for the update Jo.

Re , we can confirm that her VCA check is current until 2023. She also noted that "I would

only be happy going to DCCM as I left in December so can walk straight back in. They would be happy to have me back".

Will send more profiles through as we receive them and will continue contacting the ICU nurses today.

Ngā mihi Allison

Allison Plumridge

Director, Workforce

M:

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From: Jo Wright (Nursing Director) (ADHB) < Sent: Tuesday, 7 September 2021 8:02 AM **To:** Allison Plumridge < Cc: Cecilia Lynch < >; Vanessa Aplin < COVID Response < Subject: RE: ICU profiles Hi Allison

Thank you, we are meeting CMDHB and ADHB today so can make some decisions. yesterday to CVICU and has commenced her orientation all good so far Thanks Jo

Ngā mihi

Jo Wright **Nurse Director** Cardiovascular Directorate Auckland District Health Board

recipients only. If you are not the intended recipient, please delete this email and notify the sender immediately. Auckland DHB accepts no responsibility for changes made to this email or to any attachments after it has been sent.

From: Allison Plumridge [mailto:

Sent: Monday, 06 September 2021 6:13 p.m. To: Jo Wright (Nursing Director) (ADHB)

Cc: Cecilia Lynch (NRA); Vanessa Aplin (WDHB); COVID Response

Subject: ICU profiles

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IN-CONFIDENCE

Hi Jo

Attached are an initial 6 profiles for you to review. We have discovered that some nurses are currently are working visa's and cannot work at another location. We are following up with INZ on this but no ETA for resolution. This affects 2 potential ICU nurses from Sothern.

We are continuing to contact and source the profiles from the remaining ICU nurses on the list. Will continue to send through profiles once received.

Please let us know who you would like us to contact from the attached profiles. Please also let us know when you would like them to start, which DHB they will be working at and who will be their contact.

Ngā mihi Allison



Allison Plumridge

Director, Workforce

M:

69 Tory Street, PO Box 23075, Wellington 6140

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 $\underline{053c74921e6e\&auth=4208f9d292d4bb72367c9cdb6e8d9affc9f9dfab-}\\$

e916eb5d88513cc7a5a0907a7b0ad474e805a003



To: Alex Pimm (ADHB)

Subject: FW: ICU Rapid Response ADHB & CMDHB deployments

Date: Monday, 20 September 2021 15:52:31

From: Rose Laloli [mailto:

Sent: Monday, 13 September 2021 7:56 p.m. **To:** Jo Wright (Nursing Director) (ADHB)

Subject: RE: ICU Rapid Response ADHB & CMDHB deployments

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Ok will progress

From: Jo Wright (Nursing Director) (ADHB) <

Sent: Monday, 13 September 2021 6:04 pm
To: Rose Laloli

Subject: Re: ICU Rapid Response ADHB & CMDHB deployments

Hi Rise Janine from DCCM confirms they will take for 2 weeks

Jo

Sent from my iPhone

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IN-CONFIDENCE

Hi Jo

Attached is an updated list with cell ph nos for RNs

Please note:

- Travel and accommodation to be booked by TAS for additional 4 assignments
- Midcentral RNs () both only available for 2 weeks Auckland to accept or decline
- 3 Taranaki RNs to be confirmed/declined by Auckland
- We have another pool of RNs that need initial screen I'm doubtful whether

Tairawhiti and Whanganui DHBs both with L1 ICU RNs would be the right skill-set (welcome to advise that not suitable and I'll manage accordingly)

• I've left a message with to confirm if can be released for 6 weeks (Sarah commenced today)

Thanks Jo and speak tomorrow no doubt Rose

Rose Laloli

Team Leader, Integrated Community Services

Interim Team Leader, Business Support Services

M:

<image001.jpg>

69 Tory Street, PO Box 23075, Wellington 6140

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url=www.tas.health.nz&umid=aecbe40e-6577-44e2-ad65-

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b3dfeef78f93892164921281a4f0f59a0db96a47

<ICU Rapid Response ADHB Confirmed Assignment.docx>

To: Alex Pimm (ADHB)

Subject: FW: ICU Rapid Response ADHB & CMDHB deployments

Date: Monday, 20 September 2021 15:52:53

Attachments: ICU Rapid Response ADHB Confirmed Assignment.docx

From: Rose Laloli [mailto:

Sent: Monday, 13 September 2021 5:25 p.m. To: Jo Wright (Nursing Director) (ADHB)

Subject: ICU Rapid Response ADHB & CMDHB deployments

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IN-CONFIDENCE

Hi Jo

Attached is an updated list with cell ph nos for RNs Please note:

- Travel and accommodation to be booked by TAS for additional 4 assignments
- Midcentral RNs (and to accept or decline) both only available for 2 weeks Auckland to accept or decline
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- We have another pool of RNs that need initial screen I'm doubtful whether Tairawhiti and Whanganui DHBs both with L1 ICU RNs would be the right skill-set (welcome to advise that not suitable and I'll manage accordingly)
- I've left a message with Carla Snow to confirm if commenced today)

can be released for 6 weeks



Thanks Jo and speak tomorrow no doubt Rose

Rose Laloli

Team Leader, Integrated Community Services

Interim Team Leader, Business Support Services



M:

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url=www.tas.health.nz&umid=aecbe40e-6577-44e2-ad65-

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b3dfeef78f93892164921281a4f0f59a0db96a47

To: Alex Pimm (ADHB)

Subject: FW: ICU Rapid Response FROM TAS for Assignment to Auckland

Date: Monday, 20 September 2021 15:53:15

Attachments:



From: Rose Laloli [mailto:

Sent: Thursday, 09 September 2021 11:46 a.m.

To: Jo Wright (Nursing Director) (ADHB)

Subject: ICU Rapid Response FROM TAS for Assignment to Auckland

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IN-CONFIDENCE

Hi Jo

As discussion on phone – here is the next batch of 7 ICU profiles and summary of names.

Please note Sarah Bridges profile is attached as I don't think you had received – Sarah is scheduled on your roster for 13 Sept ADHB – Sarah's travel is being processed

Regards

Rose

Rose Laloli

Team Leader, Integrated Community Services Interim Team Leader, Business Support Services



M:

69 Tory Street, PO Box 23075, Wellington 6140

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ctp.trendmicro.com:443/wis/clicktime/v1/query? url=www.tas.health.nz&umid=3ca04c62-b2da-4c42-8144-

f0462907e93c&auth=9b524f228cf218be85c76e75f89997ec2caa72a4-

cab45fce5d34cca678f073b5bbd8e6c4fcaa98e8

To: Alex Pimm (ADHB)

Subject: FW: ICU Rapid Response FROM TAS for Assignment to Auckland

Date: Monday, 20 September 2021 15:59:13

Attachments:



From: Jo Wright (Nursing Director) (ADHB)
Sent: Thursday, 09 September 2021 12:18 p.m.

To: Jacqui Wynne-Jones (CMDHB); Janine Rouse (ADHB); Sandra Durrell (ADHB); Kathleen Devoy (CMDHB)

Subject: FW: ICU Rapid Response FROM TAS for Assignment to Auckland

Hi Everyone more profiles should I set up a quick zoom for tomorrow or do you want to do an email round of preferences etc

is already allocated to Middlemore

10

From: Rose Laloli [mailto: Sent: Thursday, 09 September 2021 11:46 a.m.

To: Jo Wright (Nursing Director) (ADHB)

Subject: ICU Rapid Response FROM TAS for Assignment to Auckland

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UNCLASSIFIED

IN-CONFIDENCE

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Please note profile is attached as I don't think you had received — is scheduled on your roster for 13 Sept ADHB — Sarah's travel is being processed

Regards

Rose

Rose Laloli

Team Leader, Integrated Community Services

Interim Team Leader, Business Support Services



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f0462907e93c&auth=9b524f228cf218be85c76e75f89997ec2caa72a4-

cab45fce5d34cca678f073b5bbd8e6c4fcaa98e8

To: Alex Pimm (ADHB)
Subject: FW: ICU RNs to Auckland

Date: Monday, 20 September 2021 15:51:22
Attachments: FINAL ICU Employee Profile - John Balucas.docx

ICU Rapid Response ADHB Confirmed Assignment v3.docx

From: Rose Laloli [mailto:

Sent: Thursday, 16 September 2021 1:43 p.m.

To: Jo Wright (Nursing Director) (ADHB); Vaughn Wood (ADHB)

Cc: COVID Response

Subject: ICU RNs to Auckland

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IN-CONFIDENCE

Good morning Jo

ICU RN Profile:

- attached please note John has been approved by Immigration for relocation of assignment to Auckland, and we are required to provide them with dates of assignment one week out from commencement. John is very keen to come
- Profile emailed yesterday and resending –
- · Still waiting for one profile to be returned from DHB

We are thinking about booking return flights for ICU RNs and expect that their rosters will mean staggered finish dates within the end date week. Our plan is to book flights the following day after their last duty to ensure people have time to rest and pack before day of travel.

Would you please provide the last day of rostered duty on assignment in the attached form and we can organise the return flights and adjust accommodation accordingly.

Jo I'm very happy to be advised on any other way of finding out last rostered duty date if the attached form doesn't work.

Vaughn I know you are onto the essential travel letters for Auckland and forwarded to Middlemore

Regards

Rose

Rose Laloli

Team Leader, Integrated Community Services

Interim Team Leader, Business Support Services



M:

69 Tory Street, PO Box 23075, Wellington 6140

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ctp.trendmicro.com:443/wis/clicktime/v1/query?

url=www.tas.health.nz&umid=4bcb1401-bda8-4513-befb-

9b7ef2fa980c&auth=9b524f228cf218be85c76e75f89997ec2caa72a4-

590b123134e724bbae7ec76d21446c0908d8e53a

To: Alex Pimm (ADHB)
Subject: FW: ICU surge

Date: Monday, 20 September 2021 16:02:40

Attachments: Welcome Letter.doc

Surge Induction timetable.docx Surge Orientation competencies.docx

.docx

Health and Safety Handbook.pdf

CVICU Orientation Resource Manual 2021.pdf

Survival guide 2016.pdf

From: Jo Wright (Nursing Director) (ADHB) Sent: Tuesday, 07 September 2021 3:43 p.m.

To: Jacqui Wynne-Jones (CMDHB); Kathleen Devoy (CMDHB)

Subject: FW: ICU surge

Hi Jacqui and Kathleen

This is the orientation plan that CVICU are using an abbreviated version, Our nursing development unit Manawa Awhi have picked up the mandatory on line learning I'll send you separately what our HR have done in the process lanes

- 1. CVICU Welcome Letter
- 2. Health and Safety Workbook
- 3. A-Z Survival Guide
- 4. CVICU Resource Book
- 5. Surge Nurse Orientation Competencies
- 6. Tikanga Best Practice Policy (only have a printed version)

I have made a timetable for the 1st two shifts and also made a roster for the first two weeks with allocated preceptors. Could someone give me contact details so I could ask about shift preferences following the two week supernumerary shifts.

Wendy I have allocated all the ADHB on boarding to Manawa Awhi in the morning on Monday if that is ok? I've allocated 4 hours to complete. Please let me know if you would need more or less than what I have given?

Jo Manawa Awhi Level 15

- Staff ID collection
- Uniforms
- IT training (Emails, RCP, Koawatea Learn, Datix, Trendcare, WFC)
- Mandatory training

To: Alex Pimm (ADHB)

Subject: FW: Rapid response ICU nurses

Date: Monday, 20 September 2021 16:01:25

From: Jo Wright (Nursing Director) (ADHB)
Sent: Wednesday, 08 September 2021 12:42 p.m.
To: COVID Response; Vaughn Wood (ADHB)

Cc: Kathleen Devoy (CMDHB); Jacqui Wynne-Jones (CMDHB); Janine Rouse (ADHB); Sandra Durrell

(ADHB)

Subject: Rapid response ICU nurses

Hi can we add the following

Start on the 13th September

for 21 days to DCCM please to CMDHB for 21 days please to CMDHB for 21 days please

20th September

to CMDHB for 21 days

Thaks Jo

Jo Wright (ADHB)

Nurse Director

Cardiovascular

Auckland District Health Board

To: Alex Pimm (ADHB)
Subject: FW: RN Profile

Date: Monday, 20 September 2021 15:51:44

Attachments: FINAL ICU Employee Profile v1 - Yvette White.docx

From: Rose Laloli [mailto: Sent: Wednesday, 15 September 2021 9:02 p.m.

To: Jo Wright (Nursing Director) (ADHB)

Subject: RN Profile

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IN-CONFIDENCE

Hi Jo Profile for RE: Auckland based ICU RN we don't have any detail on her scope of practice or preference for ICU I'm waiting for another profile for who is available from 26 Sept – 21 Oct. has previously working in ACH ICU and currently at Nelson Hospital ICU – I'll chase his profile up in morning Rose From: Jo Wright (Nursing Director) (ADHB) < Sent: Wednesday, 15 September 2021 3:57 pm To: Rose Laloli < Cc: Fiona Sinclair < >; COVID Response Subject: RE: Akld RN

Hi Rose yes it sits outside of the process do you know if she would like CMDHB or ADHB? I'll follow up with Margaret and Mike Jo

From: Rose Laloli [mailto: Sent: Wednesday, 15 September 2021 3:52 p.m.

To: Jo Wright (Nursing Director) (ADHB) **Cc:** Fiona Sinclair; COVID Response

Subject: Akld RN

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We have an Auckland based ICU nurse who is interested in an assignment -



Do you want to follow up with Janice because she doesn't fit our criteria because she is not employed by a DHB. Wondering if she was suitable whether it would be worth offering her a causal contract?

We don't have any other information for

I OI

Regards

Rose

 From:
 Ailsa Claire (ADHB)

 To:
 Jo Brown (WDHB)

Subject: Fwd: ICU nurses + Cardiac Surgery

Date: Wednesday, 01 September 2021 12:44:01

Nga mihi Ailsa Claire

Chief Executive of Te Toka Tumai (Auckland District Health Board)

Begin forwarded message:

From: Allison Plumridge < Date: 1 September 2021 at 12:29:57 PM NZST

To: "Ailsa Claire (ADHB)" <

Cc: Rosemary Clements <

Subject: RE: ICU nurses + Cardiac Surgery

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Thanks for this. Keriana also sent out a request to CEs last evening asking that all regions provide 10 ICU nurses each. The Auckland region CEs were not copied into this to reduce emails for you.

I will link up with Jo so that she is aware of this and to ensure that all requests are aligned.

Ngā mihi Allison

Allison Plumridge

Director, Workforce

M:

https://ddec1-0-en-ctp.trendmicro.com:443/wis/clicktime/v1/query? url=www.tas.health.nz&umid=a3a9ec20-0073-48e6-b1f3-2e00c5388f5a&auth=bf59cb4520f38a31222422d8c17c158c7849ac86-200cd683532939c51a2841e24866c33e346a89c5

From: Ailsa Claire (ADHB) < Sent: Wednesday, 1 September 2021 11:44 AM

To: Rosemary Clements <

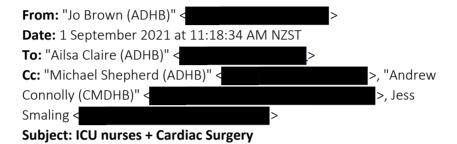
Subject: Fwd: ICU nurses + Cardiac Surgery

Nga mihi

Ailsa Claire

Chief Executive of Te Toka Tumai (Auckland District Health Board)

Begin forwarded message:



Kia ora Ailsa

Since we spoke I have spoken to Andrew Connelly and Jess Smaling.

Andrew and I propose the following:

- All DHBs are to send 5 x ICU nurses to Auckland region (I x ICU bed requires 5.2 FTE) **excluding the Cardiac Centres** who need to prioritise taking:
 - The Waikato Band 2 (3-10 days) patients who are waiting outside the clinical waiting time guideline (n= 9)
 - The ADHB Band 3 (11-30 days) patients who are waiting outside the clinical waiting time guideline (n = 29)

Southern DHB have already offered to take the Waikato patients or send 3 ICU nurses to Auckland

If each DHB sends 5 nurses this is equivalent to them losing 1 x bed and they will need to adjust their Planned Care scaling up accordingly

Northland DHB is to be excluded from this request because:

- Any loss of ICU capacity may lead to increased demand on Auckland metro ICU bed capacity
- Their capacity is included in the Northern region COVID bed management response

Where there are DHBs requesting an exception to this requirement, then we propose that that needs to be considered and approved on a case by case basis by MOH CMO and this exception should be considered only for those smallest DHBs such as Whanganui, West Coast, Wairarapa where the impact on local ICU capacity has a flow on effect to their tertiary centres

Jess is getting an update from her team re ICU

Ngā mihi Jo

Joanne Brown

NRHCC Lead – Regional Provider Capacity Planning and Response
Funder Hospitals – Auckland DHB

From: Ailsa Claire (ADHB)
To: Robyn Shearer

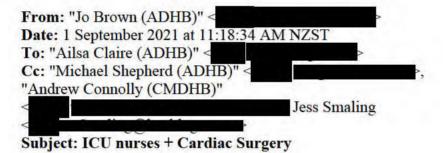
Subject: Fwd: ICU nurses + Cardiac Surgery
Date: Wednesday, 01 September 2021 11:57:17

Sent from my iPhone

Begin forwarded message:

Nga mihi Ailsa Claire Chief Executive of Te Toka Tumai (Auckland District Health Board)

Begin forwarded message:



Kia ora Ailsa

Since we spoke I have spoken to Andrew Connelly and Jess Smaling.

Andrew and I propose the following:

<!--[if!supportLists]-->• <!--[endif]-->All DHBs are to send 5 x
ICU nurses to Auckland region (I x ICU bed requires 5.2 FTE)

excluding the Cardiac Centres who need to prioritise taking:

<!--[if!supportLists]-->o <!--[endif]-->The Waikato Band 2

(3-10 days) patients who are waiting outside the

clinical waiting time guideline (n= 9)

<!--[if!supportLists]-->o <!--[endif]-->The ADHB Band 3

(11-30 days) patients who are waiting outside the

clinical waiting time guideline (n = 29)

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Jess is getting an update from her team re ICU

Ngā mihi Jo

Joanne Brown

NRHCC Lead – Regional Provider Capacity Planning and Response
Funder Hospitals – Auckland DHB

From: Michael Shepherd (ADHB)

To: Ailsa Claire (ADHB)

Subject: Fwd: ICU nurses + Cardiac Surgery

Date: Wednesday, 01 September 2021 22:57:12

Just FYI

Got to the point where

Waikato - keeps their nurses and tries to fix their cardiac problem

Rest send us nurses

We will see how many

We will monitor cardiac and other wait lists to make sure we are all going as 'well' as each other We will of course send nurses back if not needed

Cheers Mike

Begin forwarded message:

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Hi Andrew – we've had that very conversation with Southern, who are engaging with Waikato too. We'll pick this up nationally with our usual tertiary leads late this afternoon, following the receipt of the workforce plans at 4pm.



Great - agree

Options re cardiac seem to only be around Southern taking some from Waikato. I'll obviously support whatever is most effective solution for all parts of the system

Key question would be how soon SDHB could do this – it was to say take a week to really organise then SDHB can send three ICU nurses to Auckland immediately and always send them back in a week if that was also an option?? – communication to me from COO at SDHB

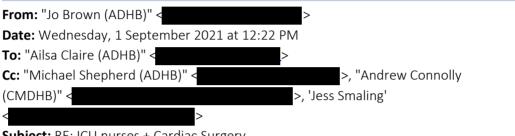
(Patrick Ng).

Seems Waikato are in the proverbial re cardiac so need to consider if they have to keep their ICU nurses or if they can do cardiac, limit other planned care and still send nurses.

Seems CDHB can supply 5 nurses and still do their own urgent ICU stuff including cardiac.

Unsure re CCDHB.

Andrew



Subject: RE: ICU nurses + Cardiac Surgery

Kia ora

Update to the below following a discussion with Jess and John Hazeldine:

There is evidently a Northern region CE discussion at 1330 today and this will be discussed

There is also a national meeting led by Keriana with the Regional CE's to identify what workforce support has been identified in those regions

We need to confirm communication channels and process following that 4pm call with a couple of things to note:

- National process to support with transport and accommodation is in place to facilitate the volunteers being in action in the Auckland region
- Process to address shortfall/gap in request for ICU nurse volunteers
- NRHCC/RPG coordination of the deployment within Auckland metro of ICU nurse volunteers

MOH (Jess/John) to bring forward meeting of Tertiaries to agree a plan and timeframes to get Band 2 (Waikato) and 3 (largely ADHB) Cardiac patients distributed to Cardiac centres nationally

Ngā mihi Jo

NRHCC Lead - Regional Provider Capacity Planning and Response **Funder Hospitals – Auckland DHB**

From: Jo Brown (ADHB)

Sent: Wednesday, 1 September 2021 11:19 a.m.

To: Ailsa Claire (ADHB)

Cc: Michael Shepherd (ADHB); Andrew Connolly (CMDHB); 'Jess Smaling'

Subject: ICU nurses + Cardiac Surgery

Importance: High

Kia ora Ailsa

Since we spoke I have spoken to Andrew Connelly and Jess Smaling.

Andrew and I propose the following:

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Ngā mihi

Jo

Joanne Brown

NRHCC Lead – Regional Provider Capacity Planning and Response Funder Hospitals – Auckland DHB

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This e-mail message has been scanned for Viruses and Content and cleared by the Ministry of Health's Content and Virus Filtering Gateway From: <u>Jo Brown (ADHB)</u>
To: <u>Ailsa Claire (ADHB)</u>

Cc: Michael Shepherd (ADHB); Andrew Connolly (CMDHB); "Jess Smaling"

Subject: ICU nurses + Cardiac Surgery

Date: Wednesday, 01 September 2021 11:18:34

Importance: High

Kia ora Ailsa

Since we spoke I have spoken to Andrew Connelly and Jess Smaling.

Andrew and I propose the following:

- All DHBs are to send 5 x ICU nurses to Auckland region (I x ICU bed requires 5.2 FTE) **excluding the Cardiac Centres** who need to prioritise taking:
 - o The Waikato Band 2 (3-10 days) patients who are waiting outside the clinical waiting time guideline (n= 9)
 - o The ADHB Band 3 (11-30 days) patients who are waiting outside the clinical waiting time guideline (n = 29)

Southern DHB have already offered to take the Waikato patients or send 3 ICU nurses to Auckland

If each DHB sends 5 nurses this is equivalent to them losing 1 x bed and they will need to adjust their Planned Care scaling up accordingly

Northland DHB is to be excluded from this request because:

- Any loss of ICU capacity may lead to increased demand on Auckland metro ICU bed capacity
- Their capacity is included in the Northern region COVID bed management response

Where there are DHBs requesting an exception to this requirement, then we propose that that needs to be considered and approved on a case by case basis by MOH CMO and this exception should be considered only for those smallest DHBs such as Whanganui, West Coast, Wairarapa where the impact on local ICU capacity has a flow on effect to their tertiary centres

Jess is getting an update from her team re ICU

Ngā mihi

Jo

Joanne Brown

NRHCC Lead – Regional Provider Capacity Planning and Response
Funder Hospitals – Auckland DHB

To: Margaret Dotchin (ADHB); Michael Shepherd (ADHB); Alex Pimm (ADHB)

Subject: ICU nurses from around the Regions

Date: Monday, 20 September 2021 11:48:32

Hi everyone

We have taken 6 nurses to ADHB and 4 to CMDHB with another 5 processed and ready to start on the 27th September and 4th October, there are 3 profiles to review today. I talked with Margaret last week with a view to see how we are placed this week. With 3 patients in 7a COVID positive should we continue with the people in the pipeline? CMDHB had a few in ICU and were valuing being able to swap out nurses with having the extra support. I'm mindful that the DHB's have been generous to us . What should we do?

Thanks for your input

Jo

Ngā mihi

Jo Wright
Nurse Director
Cardiovascular Directorate
Auckland District Health Board

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 From:
 Dale Oliff [WRDHB]

 To:
 Alex Pimm (ADHB)

 Subject:
 ICU Nurses

Date: Monday, 30 August 2021 08:46:35

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Dear Alex

Unfortunately Wairarapa will be unable to help as we do not have an ICU but and HDU and all our folk needing this care go to CCDHB

I hope that you get enough to give your team a rest

I have been thinking of you in Auckland such a bust and demanding time

Hope that you take care of yourself as I can imagine that your days are pretty hectic

Go well

Dale Oliff

CE WrDHB

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To: <u>Alex Pimm (ADHB)</u>

Date: Monday, 20 September 2021 16:13:24

Attachments: ICU Rapid Resonse.docx

Hi Alex bombarded you with emails,

Process

- We receive the profiles from TAS
- I send profiles to ICU managers and Jacqui ND at CBDHB
- We set up a zoom between the 2 DHB's and allocate based on experience and fairness
- Get back to TAS with names
- Some negotiating if dates aren't clear
- TAS get back to me when travel arrangements completed

Jo

Ngā mihi

Jo Wright
Nurse Director
Cardiovascular Directorate
Auckland District Health Board

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 From:
 Michael Shepherd (ADHB)

 To:
 Tess Mann (ADHB)

Cc: Ailsa Claire (ADHB); Margaret Dotchin (ADHB); Jennie Montague (ADHB); Jenny Parr (CMDHB); Jo Brown

(ADHB); Jo Wright (Nursing Director) (ADHB)

Subject: Metro Auckland ICU nurse request

Date: Thursday, 02 September 2021 16:06:46

HI Tess

Can you please send to National COOs

Hi

Sorry if the messaging around Metro Auckland's request for ICU nurses has been a little unclear. We thank you for the work you have already been doing on this.

We fully recognise that everyone across NZ is under great pressure and we are all unable to deliver as much planned care as we would like

Why are we asking?

Yes we 'only' have 10 ICU/HDU COVID patients currently

<u>But</u>

- these are resource intensive patients, with PPE protocols requiring additional resource and it includes 1
 ECMO patient
- we also have a significant number of unwell ward patients who need HDU level care single organ failure with NIV
- they have a significant cumulative bed day impact
- we continue to have staff vacancies due to COVID contacts in community
- we had staff vacancies prior to this
- we need to maintain ability delivery of number of other acute and national services eg burns, neurosurgery, transplant, complex cardiac surgery
- we need to be able to continue to deliver time critical planned care for the Northern region

<u>And</u>

- we know some of these patients are likely to have very long lengths of stay
- we anticipate further COVID patients will require ICU
- we want to plan for worst case scenario
- we know that any staff will require orientation and so we considered it prudent to proceed with this request sooner in preparation.

There is a reasonable chance that we will not need as much support, in which case of course we will not retain the nurses in Auckland.

We also know that complex planned care needs to be monitored across New Zealand to make sure that the situation is equitable. We are working with the Ministry of Health and the COO group to monitor this.

There have been a number of questions about more of the detail about how it will actually work for our nurses. We will be sending around further information around this soon and TAS are helping with the coordination.

Thanks again

Cheers

Mike Shepherd

On behalf of the Metro Auckland DHBs

Mike Shepherd (he/him)

Interim Director of Provider Services

Ph: 09 Ext: | Mob:

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

Welcome Haere Mai | Respect Manaaki | Together Tühono | Aim High Angamua

From: Alex Pimm (ADHB) COVID19 Admin (ADHB); Abby Donaldson (ADHB); Ailsa Claire (ADHB); Anthony Hawke (ADHB); Carly Orr (ADHB); Debra Ellis (ADHB); Em Maddren (ADHB); Greg Williams (ADHB Paediatrician); Hineroa Hakiaha (ADHB); Ian Costello (ADHB); Ian Dittmer (ADHB); Jane Lees (ADHB); Anthony Hawke (ADHB); Ian Dittmer (ADHB); Jane Lees (ADHB); Ian Costello (ADHB); Ian Dittmer (ADHB); I To: mer (ADHB); Jane Lees (ADHB); Jennie Montague (ADHB): John Beca (ADHB): Kieron Millar (ADHB): Liz Boucher (ADHB): Margaret Dotchin (ADHB): Margaret Wilsher (A (ADHB); Mark Edwards (ADHB); Maxine Stead (ADHB); Mel Dooney (ADHB); Mel Horn (ADHB); Sonu Anand (ADHB); Taylor Carter (ADHB); Tess Mann (ADHB); Vann ine Stead (ADHB); Mel Dooney (ADHB); Michael Shepherd (ADHB); Minnie Fu essa Duthie (ADHB): Vicki Nuttall (ADHB): Wendy Stan Subject: RE: 20210827 COVID-19 IMT Response Team Meeting Agenda Friday, 27 August 2021 10:31:31 Dates Request for ICU Nurses.docx Attachments: image001 png Another paper attached for this morning's meeting regarding our national request for ITU trained nurses. Alex Pimm Director | Patient Management Services Incident Controller | COVID-19 Response & Vaccination Team Te Toka Tumai (Auckland District Health Board) Level 4 | Building 1 | Auckland City Hospital Mob: E-mail Working in partnership, enabling self-management, promoting independence. Welcome Haere Mai | Respect Manaaki | Together Tuhono | Aim High Angamua From: COVID19 Admin (ADHB) Sent: Friday, 27 August 2021 10:27 >; Alex Pimm (ADHB) To: Abby Donaldson (ADHB) < ; Ailsa Claire (ADHB) ; Carly Orr (ADHB) < ; Anthony Hawke (ADHB) < ; Greg Williams (ADHB Paediatrician) Ellis (ADHB) ; Emma Maddren (ADHB) ; Hineroa Hakiaha (ADHB) < ; Ian Costello (ADHB) ; lan Dittmer (ADHB) « ; Jane Lees (ADHB) < : Jennie Montague (ADHB) < ; John Beca (ADHB) ; Kieron Millar (ADHB) Liz Boucher (ADHB) < >; Margaret Dotchin (ADHB) ; Margaret Wilsher (ADHB) < >; Marina Reyes (ADHB) ; Mark Edwards (ADHB) < ; Maxine Stead (ADHB) ; Mel Dooney (ADHB) ; Michael Shepherd (ADHB) ; Minnie Fuangkhajornfung (ADHB) < ; Sarah Horn (ADHB) ; Sonu Anand (ADHB) ; Taylor Carter (ADHB) < ; Tess Mann (ADHB) ; Vanessa Duthie (ADHB) < ; Vicki Nuttall (ADHB) ; Wendy Stanbrook-Mason (ADHB) < Subject: 20210827 COVID-19 IMT Response Team Meeting Agenda Kia Ora Please find attached agenda and papers for today's meeting. Papers: Requests for decision: Please let me know if you have any questions. Ngā mihi,

Marina Reyes

Team Admin Support | Overseas Referrals Coordinator | COVID-19 Response Team

Te Toka Tumai (Auckland District Health Board)

Building 1 | Level 12 | Office 12.065 | Auckland City Hospital

Mob: E-mail:

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From: Keriane Brooking
To: Allas Claire (ADHB): Tricia Sloan
Cc: Dale Bramley (WDHB): Marqie Apa (CMDHB)
Subject: RE: COVID Rapid Response EOI Report 17/09/2021
Date: Monday, 2/0 September 2021 17/415/4

Attachments: image002.png

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Kia ora Ailsa

Thanks – Tricia and the team have been working with Mike so we will make sure this is scaled down

Ngā mihi

Keriana Brooking (she/her) Te Tumu Whakarae (Chief Executive Officer) Hawke's Bay District Health Board

Private Bag 9014, Hastings 4156

T: ++64 6 [M: ++ 6

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Tauwhiro Rāranga te tira He kauanuanu Ākina

More information on personal pronouns:

https://smex12-5-en-ctp trendmicro com:443/wis/clicktime/v1/query?

url=https%3a%2f%2fwww.publicservice.govt.nz%2four%2dwork%2fdiversity%2dand%2dinclusion%2fpronoun%2duse%2din%2demail%2dsignatures%2f&umid=26204637-3dd5-4a0d-aa8c-44d084f0e5bd&auth=615fca992d5839d2a414c501fac8991fd5b4ebc7-29b1539c4b981437be132b39e5bd437b9fda41bb

This email may be sent to you outside your normal working hours. I do not expect a reply until you are "back at work". Mauriora

From: Ailsa Claire (ADHB)

Sent: Monday, 20 September 2021 5:29 PM

To: Keriana Brooking
Cc: Dale Bramley (WDHB)

Subject: FW: COVID Rapid Response EOI Report 17/09/2021

Can we stop any further secondment of ICU nurses please unless they want (or their DHB wants) them to gain experience working with covid positive patients.

We have a reduced need for them.

Ngā mihi

Ailsa Claire (she / her)
Chief Executive
P: 09 - William extr.

From: National DHB Executives [mailto]
Sent: Monday, 20 September 2021 9:37 am
To: O365.DHB - CEO5
Cc: O365.DHB - CEO EAs < Subject: COVID Rapid Response EOI Report 17/09/2021

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Tēnā koutou

Please find attached a report on the number of DHB people deployed to Auckland as of 17 September.

Thank you for your ongoing support in the redeployment of your people.

Nga mihi,

Tricia



Tricia Sloan GM – Services Group M:

69 Tory Street, PO Box 23075, Wellington 6140

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ctp.trendmicro.com:443/wis/clicktime/v1/query? url=www.tas.health.nz&umid=50bf08e9-d524-4545-9216c9f8a5aa0776&auth=9b524f228cf218be85c76e75f89997ec2caa72a4-

cd711a4a5d026aca54c78ff8f6aa387d0f8cdae0

in

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Margaret Dotchin (ADHB)
Jo Wright (Nursing Director) (ADHB): Michael Shept
Alisa Claire (ADHB)
RE: COVID Rapid Response EOI Report 17/09/2021
Tuesday, 21 September 2021 12:31:29

Attachments image004.png image006.png

Hi Mike

Jo and I have just spoken We think the best way forward is for the three additional people scheduled to ADHB (2x Monday 27th Sept and 1x Monday 4th October) to still come to ADHB for induction and orientation to our ICU environment only. They will therefore be ready to step up again if we get a surge of ICU cases in the future. To is going to discuss with Janine if we split their time (3 weeks) across DCCM and CVICU so they are orientated to both departments Counties will be status quo

Jo will liaise with TAS Are you able to talk to the COOs so they understand the slight change in focus to induction and orientation to support any future outbreak This will enable us to have a pool of inducted ICU nurses from across the regions for the future

Ngā mihi

Margaret Dotchin (she/her)

Chief Nursing Officer

Te tino o mātou – Us at our best





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From: Jo Wright (Nursing Director) (ADHB) Sent: Tuesday, 21 September 2021 9:16 AM

To: Michael Shepherd (ADHB) < Margaret Dotchin (ADHB) <

Subject: RE: COVID Rapid Response EOI Report 17/09/2021

Hi Mike and Margaret

Need a bit of help here please

I ve attached the list the green nurses are already here and those in the pipeline

Could we stop or hold the ADHB ones from next MMH have 3 COVID patients and their next nurses are from the 4th October maybe keep them in the pipeloine Scale back the other ADHB ones to 2 weeks orientation so instead of going back to home DHB on the 11^{th} October go on the 4th October instead of the 11^{th} Leave MMH as is as they have active cases in ICU

How does that sound?

From: Michael Shepherd (ADHB)
Sent: Tuesday, 21 September 2021 8:03 a.m.

z; Jo Wright (Nursing Director) (ADHB) Response EOI Report 17/09/2021

Hi Tricia

I think this message has become a little confused

I think we thought the plan was

- No more new CVs
- Ones that are planned should continue but we will plan a shorter attachment with orientation

Can you please liaise with Jo and make sure we are all on the same page ©

Sorry for confusion

Cheers Mike

Mike Shepherd (he/him)

Interim Director of Provider Services

Ext: | Mob

Te Toka Tumai (Auckland District Health Board) Level 12 | Building 01 | Auckland City Hospita

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From: Ailsa Claire (ADHB)

Sent: Tuesday, 21 September 2021 7 59 AM

To: Michael Shepherd (ADHB) <

Can you make sure our unit is aware? I have said we will induct these nurses Ngã mihi Ailsa Claire (she / her) Chief Executive P: 09 - extr From: Tricia Sloan [mailto Sent: Monday, 20 September 2021 7 51 pm To: Keriana Brooking Ailsa Claire (ADHB) Cc: Dale Bramley (WDHB) Margie Apa (CMDHB) Subject: RE: COVID Rapid Response EOI Report 17/09/2021 BE CYBER SMART - This email is from an external sender - Please do not click links or open attachments from unknown sources - Forward suspicious emails to healthalliance co nz UNCLASSIFIED Kia ora We have 3 ICU nurses ready for deployment this Sunday coming 1 will arrange to stand those nurses down 1 assume the Auckland teams are aware of the scaling down of ICU requirements Tricia Tricia Sloan GM - Services Group M: 69 Tory Street, PO Box 23075, Wellington 6140 https://smex12-5-enctp.trendmicro.com:443/wis/clicktime/v1/query? url=www.tas.health.nz&umid=c69946c0-7d12-47a1-b68ba8a7540975fb&auth=bb7c7bbf7acee6ae97e29073e34f3e8b1808c238cf7adcd49e60150e46b61a4032a7e73c7db7c036 in From: Keriana Brooking Sent: Monday, 20 September 2021 5:42 PM To: Ailsa Claire Tricia Sloan Cc: Dale Bramley Subject: RE: COVID Rapid Response EOI Report 17/09/202 Kia ora Ailsa Thanks – Tricia and the team have been working with Mike so we will make sure this is scaled down Ngā mihi Keriana Brooking (she/her) Te Tumu Whakarae (Chief Executive Officer) Private Bag 9014, Hastings 415 W: https://smex12-5-en-ctp trendmicro.com;443/wis/clicktime/v1/query?url=www.hawkesbaydhb.govt.nz&umid=c69946c0-7d12-47a1-b68ba8a7540975fb&auth=bb7c7bbf7acee6ae97e29073e34f3e8b1808c238-6e664bcd8084bad856ac698fb15091094fc30c20 Tauwhiro Rāranga te tira He kauanuanu Ākina More information on personal pronouns: https://smex12-5-en-ctp trendmicro com:443/wis/clicktime/v1/query? url=https%3a%2f%2fwww.publicservice.govt.nz%2four%2dwort%2fdiversity%2dand%2dinclusion%2fpronoun%2duse%2din%2demail%2dsignatures%2f8.umid=c69946c0-7d12-47a1-b68b-a8a7540975fb&auth=bb7c7bbf7acee5ae97e29073e34f3e8b1808c238-051c0ac4510a5c1c97dcec5f6a0d1f9a4842e1c4 This email may be sent to you outside your normal working hours. I do not expect a reply until you are "back at work" Mauriora From: Ailsa Claire (ADHB)

Can we stop any further secondment of ICU nurses please unless they want (or their DHB wants) them to gain experience working with covid positive patients. We have a reduced need for them

Margie Apa (CMDHB)

Tricia Sloan

Sent: Monday, 20 September 2021 5:29 PM

Subject: FW: COVID Rapid Response EOI Repor

To: Keriana Brooking

Cc: Dale Bramley (WDHB)

Ngā mihi

Ailsa Claire (she / her) Chief Executive P: 09 - extn

From: National DHB Executives [mailto]
Sent: Monday, 20 September 2021 9:37 am

To: O365 DHB - CEOs <

Cc: O365 DHB - CEO EAs < Subject: COVID Rapid Response EOI Report 17/09/2021

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Tēnā koutou

Please find attached a report on the number of DHB people deployed to Auckland as of 17 September

Thank you for your ongoing support in the redeployment of your people

Nga mihi,

Tricia

Tricia Sloan

GM – Services Group



M: 69 Tory Street, PO Box 23075, Wellington 6140

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ctp.trendmicro.com:443/wis/clicktime/v1/query? url=www tas health nz&umid=50bf08e9-d524-4545-9216-c9f8a5aa0776&auth=9b524f228cf218be85c76e75f89997ec2caa72a4-

cd711a4a5d026aca54c78ff8f6aa387d0f8cdae0

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From: Andrew Connolly

To: <u>Jo Brown (ADHB)</u>; <u>Jess Smaling</u>; <u>Michael Shepherd (ADHB)</u>

Subject: Re: ICU nurses

Date: Tuesday, 07 September 2021 16:41:44

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Excellent - thanks Mike

Andrew Connolly Chief Medical Officer Ministry of Health Mobile

From: Michael Shepherd (ADHB) <

Sent: Tuesday, September 7, 2021 4:38:03 PM

To: Jo Brown (ADHB) < >; Andrew Connolly

>; Jess Smaling <</pre>

Subject: FW: ICU nurses

FYI

From: Michael Shepherd (ADHB)

Sent: Tuesday, 07 September 2021 4:37 PM

To: Jo Wright (Nursing Director) (ADHB) < >; Margaret Dotchin (ADHB)

Subject: RE: ICU nurses

That is really great Well done and Thanks

Mike Shepherd (he/him)

Interim Director of Provider Services

Ph: 09 Ext: | Mob

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

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From: Jo Wright (Nursing Director) (ADHB) **Sent:** Tuesday, 07 September 2021 3:27 PM

To: Margaret Dotchin (ADHB) < >; Michael Shepherd (ADHB)

<

Subject: ICU nurses

Hi Margaret and Mike

We have received 12 expressions via nurse profile forms, met with ADHB CVICU and DCCM and

CMDHB ICU and divided the nurses into 3 tranches 1 nurse here 2nd day

- Tranche 1.0 Monday next week 4 nurses
- Tranche 2 20th 3 Nurses
- Tranche 3 29th 4 nurses

Split

CMDHB x 5

ADHB across 2 ICU's x7

We have orientation programmes and process in place. I've shared with CMDHB

Kept WDHB up to date
Jo

Ngā mihi

Jo Wright
Nurse Director
Cardiovascular Directorate
Auckland District Health Board

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From: Andrew Connolly (CMDHB)

To: Jo Brown (ADHB); Ailsa Claire (ADHB) Michael Shepherd (ADHB): "Jess Smaling" Cc: Subject: Re: ICU nurses + Cardiac Surgery Date: Wednesday, 01 September 2021 12:27:49

Great - agree

Options re cardiac seem to only be around Southern taking some from Waikato. I'll obviously support whatever is most effective solution for all parts of the system

Key question would be how soon SDHB could do this – it was to say take a week to really organise then SDHB can send three ICU nurses to Auckland immediately and always send them back in a week if that was also an option?? - communication to me from COO at SDHB (Patrick Ng).

Seems Waikato are in the proverbial re cardiac so need to consider if they have to keep their ICU nurses or if they can do cardiac, limit other planned care and still send nurses.

Seems CDHB can supply 5 nurses and still do their own urgent ICU stuff including cardiac.

Unsure re CCDHB.

Andrew

From: "Jo Brown (ADHB)" < Date: Wednesday, 1 September 2021 at 12:22 PM To: "Ailsa Claire (ADHB)" < Cc: "Michael Shepherd (ADHB)" < >, "Andrew Connolly (CMDHB)" >, 'Jess Smaling' <

Subject: RE: ICU nurses + Cardiac Surgery

Kia ora

Update to the below following a discussion with Jess and John Hazeldine:

There is evidently a Northern region CE discussion at 1330 today and this will be discussed

There is also a national meeting led by Keriana with the Regional CE's to identify what workforce support has been identified in those regions

We need to confirm communication channels and process following that 4pm call with a couple of things to note:

- National process to support with transport and accommodation is in place to facilitate the volunteers being in action in the Auckland region
- Process to address shortfall/gap in request for ICU nurse volunteers
- NRHCC/RPG coordination of the deployment within Auckland metro of ICU nurse

volunteers

MOH (Jess/John) to bring forward meeting of Tertiaries to agree a plan and timeframes to get Band 2 (Waikato) and 3 (largely ADHB) Cardiac patients distributed to Cardiac centres nationally

Ngā mihi

Jo

Joanne Brown
NRHCC Lead – Regional Provider Capacity Planning and Response
Funder Hospitals – Auckland DHB

From: Jo Brown (ADHB)

Sent: Wednesday, 1 September 2021 11:19 a.m.

To: Ailsa Claire (ADHB)

Cc: Michael Shepherd (ADHB); Andrew Connolly (CMDHB); 'Jess Smaling'

Subject: ICU nurses + Cardiac Surgery

Importance: High

Kia ora Ailsa

Since we spoke I have spoken to Andrew Connelly and Jess Smaling.

Andrew and I propose the following:

- All DHBs are to send 5 x ICU nurses to Auckland region (I x ICU bed requires 5.2 FTE) **excluding the Cardiac Centres** who need to prioritise taking:
 - The Waikato Band 2 (3-10 days) patients who are waiting outside the clinical waiting time guideline (n= 9)
 - The ADHB Band 3 (11-30 days) patients who are waiting outside the clinical waiting time guideline (n = 29)

Southern DHB have already offered to take the Waikato patients or send 3 ICU nurses to Auckland

If each DHB sends 5 nurses this is equivalent to them losing $1\,x$ bed and they will need to adjust their Planned Care scaling up accordingly

Northland DHB is to be excluded from this request because:

- Any loss of ICU capacity may lead to increased demand on Auckland metro ICU bed capacity
- Their capacity is included in the Northern region COVID bed management response

Where there are DHBs requesting an exception to this requirement, then we propose that that needs to be considered and approved on a case by case basis by MOH CMO and this exception should be considered only for those smallest DHBs such as Whanganui, West Coast, Wairarapa where the impact on local ICU capacity has a flow on effect to their tertiary centres

Jess is getting an update from her team re ICU

Ngā mihi

Jo

Joanne Brown

NRHCC Lead – Regional Provider Capacity Planning and Response
Funder Hospitals – Auckland DHB

From: Margaret Dotchin (ADHB)

To: Michael Shepherd (ADHB); Jess Smaling: Andrew Connolly (CMDHB); Jo Brown (ADHB); Ailsa Claire (ADHB)

Subject: RE: ICU nurses + Cardiac Surgery

Date: Wednesday, 01 September 2021 15:53:51

Attachments: image002.png

Mike

Please involve Jo Wright and Mel Dooney in this call so we are co-ordinated with conversations and plans that are already under development.

Ngā mihi

Margaret Dotchin (she/her)

Chief Nursing Officer





https://careers.adhb.govt.nz/covid-19-vaccination-and-immunisation/

Hi Guys

Look forward to discussing this at 5

We are shaping up Metro Auckland clarity about how we will manage ICU nursing offers – led by Jo Wright – CV nurse director ADHB

Agree that we need to manage this in a way which does not cause other harm It sounds like we need to be a bit clearer with our national colleagues that these nurses will

- Be assessed for suitability
- Require orientation
- Will be likely used in batches
- Will be used to manage COVID, other acute demand and urgent planned care including P1

and national services

- Will be returned if not needed of course and possible returned after orientation for a period to see how things go

We need to do some comms on this by the sounds of things with our National colleagues and should have included DON nationally more

Cheers

Mike

Mike Shepherd (he/him)

Interim Director of Provider Services
Ph: 09 Ext: | Mob:

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

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Hi Andrew – we've had that very conversation with Southern, who are engaging with Waikato too. We'll pick this up nationally with our usual tertiary leads late this afternoon, following the receipt of the workforce plans at 4pm.

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Sent: Wednesday, 1 September 2021 12:28 pm

To: Jo Brown (ADHB) < >; Ailsa Claire (ADHB) < >
Cc: Michael Shepherd < >; Jess Smaling < >
Subject: Re: ICU nurses + Cardiac Surgery

Great - agree

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Unsure re CCDHB.

Andrew

From: "Jo Brown (ADHB)" < >

Date: Wednesday, 1 September 2021 at 12:22 PM

To: "Ailsa Claire (ADHB)" < >

Cc: "Michael Shepherd (ADHB)" < >, "Andrew Connolly (CMDHB)" < >

Subject: RE: ICU nurses + Cardiac Surgery

Kia ora

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Ngā mihi

Jo

Joanne Brown

NRHCC Lead – Regional Provider Capacity Planning and Response Funder Hospitals – Auckland DHB

From: Jo Brown (ADHB)

Sent: Wednesday, 1 September 2021 11:19 a.m.

To: Ailsa Claire (ADHB)

Cc: Michael Shepherd (ADHB); Andrew Connolly (CMDHB); 'Jess Smaling'

Subject: ICU nurses + Cardiac Surgery

Importance: High

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From: Michael Shepherd (ADHB)

To: <u>Jess Smaling</u>: <u>Andrew Connolly (CMDHB)</u>; <u>Jo Brown (ADHB)</u>; <u>Ailsa Claire (ADHB)</u>

 Cc:
 Margaret Dotchin (ADHB)

 Subject:
 RE: ICU nurses + Cardiac Surgery

 Date:
 Wednesday, 01 September 2021 15:49:48

Hi Guys

Look forward to discussing this at 5

We are shaping up Metro Auckland clarity about how we will manage ICU nursing offers – led by Jo Wright – CV nurse director ADHB

Agree that we need to manage this in a way which does not cause other harm

It sounds like we need to be a bit clearer with our national colleagues that these nurses will

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- Require orientation
- Will be likely used in batches
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- Will be returned if not needed of course and possible returned after orientation for a period to see how things go

We need to do some comms on this by the sounds of things with our National colleagues and should have included DON nationally more

Cheers

Mike

Mike Shepherd (he/him)

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

Welcome Haere Mai | Respect Manaaki | Together Tühono | Aim High Angamua

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Funder Hospitals – Auckland DHB

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To: Ailsa Claire (ADHB)

Cc: Michael Shepherd (ADHB); Andrew Connolly (CMDHB); 'Jess Smaling'

Subject: ICU nurses + Cardiac Surgery

Importance: High

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From: <u>Jess Smaling</u>

To: Andrew Connolly (CMDHB); Jo Brown (ADHB); Ailsa Claire (ADHB)

Cc: Michael Shepherd (ADHB)

Subject: RE: ICU nurses + Cardiac Surgery

Date: Wednesday, 01 September 2021 12:33:15

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From: Andrew Connolly (CMDHB) <	>	
Sent: Wednesday, 1 September 2021 12:2	8 pm	
To: Jo Brown (ADHB) <	>; Ailsa Claire (ADHB) <	>
Cc: Michael Shepherd <	>; Jess Smaling	
>		
Subject: Re: ICU nurses + Cardiac Surgery		

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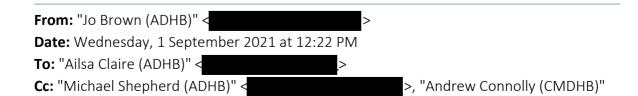
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Ngā mihi

Jo

Joanne Brown

NRHCC Lead – Regional Provider Capacity Planning and Response
Funder Hospitals – Auckland DHB

From: Jo Brown (ADHB)

Sent: Wednesday, 1 September 2021 11:19 a.m.

To: Ailsa Claire (ADHB)

Cc: Michael Shepherd (ADHB); Andrew Connolly (CMDHB); 'Jess Smaling'

Subject: ICU nurses + Cardiac Surgery

Importance: High

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From: Allison Plumridge
To: Ailsa Claire (ADHB)
Cc: Rosemary Clements

Subject: RE: ICU nurses + Cardiac Surgery

Date: Wednesday, 01 September 2021 12:29:57

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Thanks for this. Keriana also sent out a request to CEs last evening asking that all regions provide 10 ICU nurses each. The Auckland region CEs were not copied into this to reduce emails for you.

I will link up with Jo so that she is aware of this and to ensure that all requests are aligned.

Ngā mihi Allison

Allison Plumridge

Director, Workforce

M:

https://ddec1-0-en-ctp.trendmicro.com:443/wis/clicktime/v1/query? url=www.tas.health.nz&umid=a3a9ec20-0073-48e6-b1f3-2e00c5388f5a&auth=bf59cb4520f38a31222422d8c17c158c7849ac86-200cd683532939c51a2841e24866c33e346a89c5

From: Ailsa Claire (ADHB) < Sent: Wednesday, 1 September 2021 11:44 AM

To: Rosemary Clements < >; Allison Plumridge

>

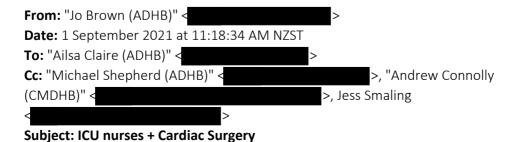
Subject: Fwd: ICU nurses + Cardiac Surgery

Nga mihi

Ailsa Claire

Chief Executive of Te Toka Tumai (Auckland District Health Board)

Begin forwarded message:



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To: <u>Ailsa Claire (ADHB)</u>

Cc: Michael Shepherd (ADHB); Andrew Connolly (CMDHB); "Jess Smaling"

Subject: RE: ICU nurses + Cardiac Surgery

Date: Wednesday, 01 September 2021 12:22:06

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 From:
 Jo Brown (ADHB)

 To:
 Michael Shepherd (ADHB)

 Subject:
 RE: ICU nurses + Cardiac Surgery

 Date:
 Wednesday, 01 September 2021 16:02:31

 Attachments:
 ADHB Request for ICU Nurses 27-08-21 (2).docx

HI Mike

FYI – the original request included this statement (page 2) so don't know if nurses already asked to volunteer are expecting NOT to have to deal with COVID patients:

These nurses will not be asked to nurse COVID-positive patients, unless the Auckland DHBs are not able to do this with their current ICU nursing workforce. This is unlikely

From: Michael Shepherd (ADHB)

Sent: Wednesday, 1 September 2021 3:50 p.m.

To: Jess Smaling; Andrew Connolly (CMDHB); Jo Brown (ADHB); Ailsa Claire (ADHB)

Cc: Margaret Dotchin (ADHB)

Subject: RE: ICU nurses + Cardiac Surgery

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Interim Director of Provider Services

Ph: 09 Ext: | Mob:

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

Welcome Haere Mai | Respect Manaaki | Together Tühono | Aim High Angamua

From: Jess Smaling [mailto:

Sent: Wednesday, 01 September 2021 12:33 PM To: Andrew Connolly (CMDHB) < >; Jo Brown (ADHB) >; Ailsa Claire (ADHB) < Cc: Michael Shepherd (ADHB) < **Subject:** RE: ICU nurses + Cardiac Surgery BE CYBER SMART - This email is from an external sender - Please do not click links or open attachments from unknown sources - Forward suspicious emails to healthalliance.co.nz Hi Andrew – we've had that very conversation with Southern, who are engaging with Waikato too. We'll pick this up nationally with our usual tertiary leads late this afternoon, following the receipt of the workforce plans at 4pm. From: Andrew Connolly (CMDHB) < Sent: Wednesday, 1 September 2021 12:28 pm To: Jo Brown (ADHB) < >; Ailsa Claire (ADHB) < Cc: Michael Shepherd < >; Jess Smaling < **Subject:** Re: ICU nurses + Cardiac Surgery Great - agree Options re cardiac seem to only be around Southern taking some from Waikato. I'll obviously support whatever is most effective solution for all parts of the system Key question would be how soon SDHB could do this – it was to say take a week to really organise then SDHB can send three ICU nurses to Auckland immediately and always send them back in a week if that was also an option?? - communication to me from COO at SDHB (Patrick Ng). Seems Waikato are in the proverbial re cardiac so need to consider if they have to keep their ICU nurses or if they can do cardiac, limit other planned care and still send nurses. Seems CDHB can supply 5 nurses and still do their own urgent ICU stuff including cardiac. Unsure re CCDHB. Andrew From: "Jo Brown (ADHB)" < Date: Wednesday, 1 September 2021 at 12:22 PM To: "Ailsa Claire (ADHB)" < Cc: "Michael Shepherd (ADHB)" < >, "Andrew Connolly (CMDHB)" >, 'Jess Smaling' <

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Kia ora

Yes this morning Allison and Dale O discussed a short list of things that need to be in place before they arrived (at TAS) and needed to be in place when they arrived (TAS and NRHCC) I think the process is improving at speed

Ngã mihi

Keriana Brooking (she/her)

Te Tumu Whakarae (Chief Executive Officer)

Hawke's Bay District Health Board

vate Bag 9014, Hastings 4156

T: ++64 6

W: https://smex12-5-en-ctp trendmicro.com:443/wis/clicktime/v1/query?url=www.hawkesbaydhb.govt.nz&umid=d6da58a4-ec12-43f2-afa6-

a9411a7c87a8&auth=ae5df323da80597a92aaa0a8b5168c30a6db536c-cc270821dd82d9d50a67e4e848ed04919533d815

Tauwhiro Rāranga te tira He kauanuanu Ākina

More information on personal pronouns:

https://smex12-5-en-ctp trendmicro.com:443/wis/clicktime/v1/query?

url=https%3a%2f%2fwww.publicservice.govt.nz%2four%2dwork%2fdiversity%2dand%2dinclusion?%2fpronoun%2duse%2din%2demail%2dsignatures%2f&umid=d6da58a4-ec12-43f2-afa6-a9411a7c87a8&auth=ae5df323da80597a92aaa0a8b5168c30a6db536c-2a9c8c46d60e6f65922784bec4e7b1c95650e295

This email may be sent to you outside your normal working hours I do not expect a reply until you are "back at work" Mauriora

From: Margie Apa (CMDHB) Sent: Friday, 10 September 2021 2:27 PM To: Keriana Brooking « Cc: Ailsa Claire (ADHB) >: Dale Bramley (WDHB) Subject: Re: Morning update 10 September

Thanks Keriana, hope we ve ironed a few things to make it easier to get people work ready e.g. fit testing before they come up

Sent from my iPad

On 10/09/2021, at 2:25 PM, Keriana Brooking

BE CYBER SMART - This email is from an external sender - Please do not click links or open attachments from unknown sources - Forward suspicious emails to healthalliance co nz

Kia ora koutou

Firstly it is a mystery why #VALUE! Appears for you Ailsa - to me you are always valuable.

Just to show you the information I receive every day. It is a rolling maul of bullet points so they change based on what s happening on the day

Ngā mihi

Keriana Brooking (she/her)

Te Tumu Whakarae (Chief Executive Officer)

T: ++64.6

W: https://smex12-5-en-ctp.trendmicro.com:443/wis/clicktime/v1/query?url=www.hawkesbaydhb.govt.nz&umid=83111632-ddf9-445d-9af5-

Tauwhiro Rāranga te tira He kauanuanu Ākina

More information on personal pronouns:

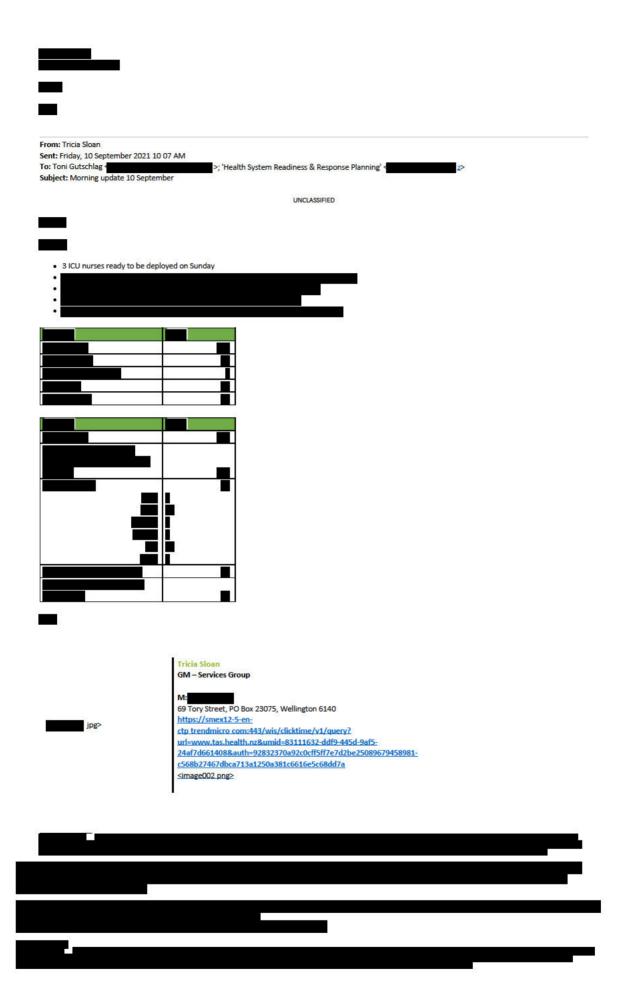
https://smex12-5-en-ctp trendmicro com:443/wis/clicktime/v1/query?

url=https%3a%2f%2fwww publicservice govt nz%2four%2dwork%2fdiversity%2dand%2dinclusion%2fpronoun%2duse%2din%2demail%2dsignatures%2f&umid=83111632ddf9-445d-9af5-24af7d661408&auth=92832370a92c0cff5ff7e7d2be25089679458981-7d3857f5568fef5a148b55fc536ae8b7dc5a373d

This email may be sent to you outside your normal working hours. I do not expect a reply until you are "back at work". Mauriora

From: Tricia Sloan Sent: Friday, 10 September 2021 10 08 AM To: Keriana Brooking Subject: FW: Morning update 10 Septembe

UNCLASSIFIED



Subject: Nurse request

Hi Jo and Jo

Tomorrow can we have a 1 pager requesting ICU trained nursing staff from around the country Rationale

- Moving patients is hard in COVID environment
- There is a bunch of stuff that we have to do anyway quaternary
- ICU nursing is our biggest pitfall
- We have physical space and have enough of other workforce

Maybe 1 month secondment ideal (Would take 2 weeks)

Pay for transport

Would put them up in accommodation (we would need to sort a suitable spot) Ideally local DHB would keep paying them
Seek ADHB Occ Health exemption

I personally think we should take them now to orientate etc We can always use them in other ways

Welcome other components – no doubt I have missed plenty
Cardiac expertise particularly helpful I would imagine but I'm not sure we should be picky ©

Sooner we can get this sent around the country the better I think

Cheers

Mike

Mike Shepherd (he/him)

Interim Director of Provider Services

Ph: 09 Ext: | Mob:

Te Toka Tumai (Auckland District Health Board)

Level 12 | Building 01 | Auckland City Hospital

Welcome Haere Mai | Respect Manaaki | Together Tühono | Aim High Angamua

From: Jo Brown (ADHB)

To: NRHCC Administration; ADHB IMT Controller (ADHB); Ailsa Claire (ADHB); Alberto Areias (HealthSource);
Alex Pimm (ADHB); ARPHS Emergency Incident Controller (ADHB); Donna Neal (ADHB); Incident Control

Alex Pimm (ADHB); ARPHS Emergency Incident Controller (ADHB); Donna Neal (ADHB); Incident Control Centre (WDHB); John Cartwright (CMDHB); Justin Rawiri (ADHB); Liz Boucher (ADHB); Major Disasters Only - Incident Controller (CMDHB); Mark Shepherd (WDHB); Michael Shepherd (ADHB); NRHCC Incident Controller; Paula Martin (NDHB); Pauline McGrath (CMDHB); Sarah Hoyle (NDHB); Jennie Montaque (ADHB); Shared Mailbox - IMT Incident Controller (NDHB); Stacey Wilson (CMDHB); Tamzin Brott (WDHB); Jonathan Wallace (WDHB); Emma McDowall (ADHB); Stephanie Doe (WDHB); David Resoli (WDHB); Mark

McGinlev (NDHB)

Cc: Vanessa Thornton (CMDHB); Peter Watson (CMDHB); Andrew Old (WDHB); Debbie Holdsworth (WDHB);

Jonathan Christiansen (WDHB); Vanessa Aolin (WDHB); NRHCCINTELLIGENCE1 (ADHB); Cecilia Lynch

(NRA)

Subject: RE: Regional Provider Group - notes of meeting 6 September

Date: Monday, 06 September 2021 12:40:23

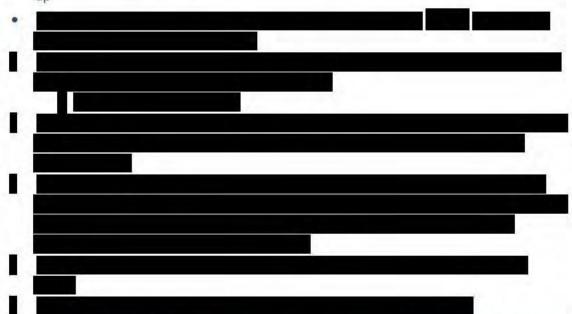
Attachments: Daily hospital Stats 06092021 1000 post RPG.docx

Regional Provider Group 06 September 2021

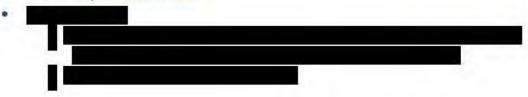


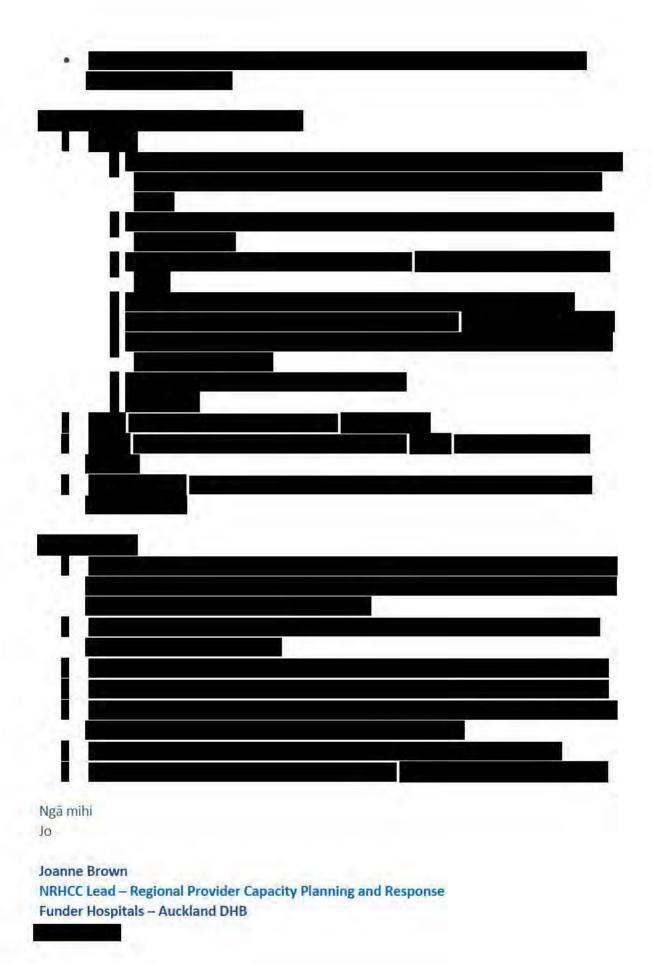
Workforce

ICU nurses – work with TAS to get profiles of IC nurses in South Island, Cecilia following



- Need to confirm if DHB staff currently deployed across rest of system are being released
 or need to extend arrangement DHBs not asking them to be returned rather that they
 are informed if rosters need extending Cecelia to follow up
- Workforce proposals DHB staff national request
 - o Stacey to follow up but CMDHB not considering a national request at this time
 - WDHB –respiratory and IPC nurses an ongoing requests may need strengthening if we wish to pursue
 - There are delays with the national process; WDHB not going to proceed with requests at this time





Appendix 1

From: <u>Jo Brown (ADHB)</u>

To: <u>Dale Bramley (WDHB)</u>; <u>Ailsa Claire (ADHB)</u>; <u>Margie Apa (CMDHB)</u>

Cc: Mark Shepherd (WDHB)

Subject: RE: Request for Resource Form v1 1.docx ED Date: Thursday, 02 September 2021 14:23:49

Attachments: image001.png

image002.png image003.png image004.png

Thanks Dale – will do

From: Dale Bramley (WDHB)

Sent: Thursday, 2 September 2021 2:22 p.m.

To: Ailsa Claire (ADHB); Margie Apa (CMDHB); Jo Brown (ADHB)

Cc: Mark Shepherd (WDHB)

Subject: RE: Request for Resource Form v1 1.docx ED

Ok let put this into the regional process to see if it stacks up – no problem if we think it doesn't.

Just have Jo on the line now and she will take this via RPG to test it.

Mark - FYI

Thanks

Dr Dale Bramley

Chief Executive Officer Waitemata District Health Board

Private Bag 93 503, Takapuna 0740

www.waitematadhb.govt.nz







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From: Ailsa Claire (ADHB)

Sent: Thursday, 02 September 2021 2:17 p.m.

To: Dale Bramley (WDHB) < >; Margie Apa (CMDHB)

>; Jo Brown (ADHB) <

Subject: RE: Request for Resource Form v1 1.docx ED

I think that's the point. we should not be asking for staff to do this sort of separation as we will all need to do that.

Ngā mihi

Ailsa Claire (she / her)

Chief Executive

P: 09 - M:

From: Dale Bramley (WDHB)

Sent: Thursday, 02 September 2021 2:16 pm

To: Ailsa Claire (ADHB) < >; Margie Apa (CMDHB)

>; Jo Brown (ADHB) <</pre>

Subject: RE: Request for Resource Form v1 1.docx ED

Yes they are COVID related – re are seeking additional nursing for the COVID blue stream separation - just speaking with Jo about this – I'll just include her

Dr Dale Bramley

Chief Executive Officer

Waitemata District Health Board

Private Bag 93 503, Takapuna 0740 www.waitematadhb.govt.nz







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From: Ailsa Claire (ADHB)

Sent: Thursday, 02 September 2021 2:13 p.m.

To: Dale Bramley (WDHB) < >; Margie Apa (CMDHB)

<

Subject: RE: Request for Resource Form v1 1.docx ED

They went through the COOs.

They have to be clearly covid escalation response and not staff shortages due to covid.

Ngā mihi

P: 09 - extn M:

From: Dale Bramley (WDHB)

Sent: Thursday, 02 September 2021 2:03 pm

To: Margie Apa (CMDHB) < >; Ailsa Claire (ADHB)

>

Subject: RE: Reguest for Resource Form v1 1.docx ED

Folks can I check with you.

Ailsa – you had mentioned to send this direct to TAS the other day, when I asked, so I think this is how that happened.

What process did ICU go through? I don't remember that coming to us collectively?

Our current needs are ED/Resp nurses and IPC nurses.

Thanks

Dale

Dr Dale Bramley

Chief Executive Officer

Waitemata District Health Board

Private Bag 93 503, Takapuna 0740 www.waitematadhb.govt.nz







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From: Keriana Brooking [mailto:

Sent: Thursday, 02 September 2021 1:29 p.m.

Subject: Fwd: Request for Resource Form v1 1.docx ED

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Kia Ora koutou

Before I ask the team to progress further can I confirm this is in line with the intent that a national request for resources is required on behalf of a region. Has this request been promulgated through a regional process. My colleagues will expect this level of regional review.

No disrespect to you Dale, I would ask this of any DHB and associated region.

Ngā mihi

Keriana Brooking Chief Executive C Hawke's Bay District Health Board	Officer
Private Bag 9014, Hastings 4156	
T: ++64 6	M: ++
Email:	
W: www.hawkesbaydhb.govt.nz	
From: Sue Lamb (WDHB) <	•
Sent: Thursday, 2 September 2021 10:32 A	AM

As requested

Legal Disclaimer

To: COVID Response <

Subject: Request for Resource Form v1 1.docx ED

DISCLAIMER: This emailed information is private and protected by law. If you are not the intended recipient, you are hereby notified that any disclosure, copying, or distribution, or the taking of any action based on the content of this information, is strictly prohibited. Please let us know immediately if you have received this by mistake and destroy this message.

From: Alex Burton on behalf of Health System Readiness & Response Planning

To: Alex Pimm (ADHB); Health System Readiness & Response Planning

Cc: Tricia Sloan; Keriana Brooking; Covid 19 (ADHB); Michael Shepherd (ADHB); Joanne Bos (ADHB); Jo Wright

(Nursing Director) (ADHB)

Subject: RE: Workforce request - ADHB ITU nurses

Date: Friday, 27 August 2021 15:19:36

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Kia ora Alex,

I can confirm that this request has been received.

We will be in touch again shortly.

Ngā mihi,

Alex Burton (she/her)

Principal Advisor, National Services | System Flow

Waea pūkoro

At the Ministry we value flex ble working and have sent this email at a time convenient for me.

I do not expect you to read, respond, or action this email message outside of your preferred hours of working, or if you need to priortise work relating to the recent COVID-19 outbreak.

From: Alex Pimm (ADHB) <	>	
Sent: Friday, 27 August 202	21 3:10 pm	
To: Health System Readine	ss & Response Planning <	>
Cc: Tricia Sloan <	>; Keriana Brooking	
<	>; Covid 19 (ADHB) <	>; Michael
Shepherd <	>; Joanne Bos (ADHB) <	>; Jo Wright
(Nursing Director) (ADHB) <	>	
Subject: Workforce reques	t - ADHB ITU nurses	

•

Kia ora,

As discussed, we are requesting national assistance to support Auckland DHBs with trained ITU nurses.

The attached document provide more detail on the request and background information. In summary, we are asking for:

Up to 30 trained/experienced ITU registered nurses, available to work in Auckland for the next six weeks.

To discuss the request further, please contact:

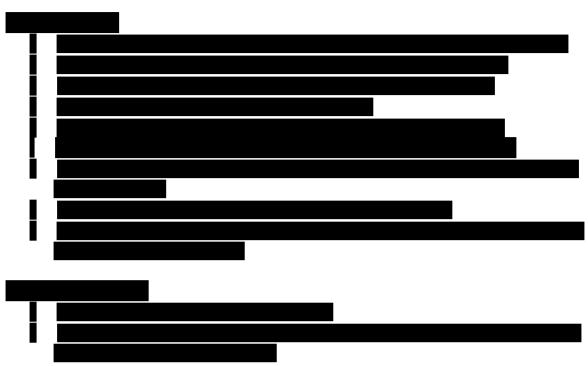
Joanne Bos, Interim Associate Director, Cardiovascular Services –

Joanne Wright, Nurse Director, Cardiovascular Services –

Ngā mihi, Alex Alex Pimm Director | Patient Management Services Incident Controller | COVID-19 Response & Vaccination Team Te Toka Tumai (Auckland District Health Board) Level 4 | Building 1 | Auckland City Hospital Mob: E-mail: Working in partnership, enabling self-management, promoting independence. Welcome Haere Mai | Respect Manaaki | Together Tuhono | Aim High Angamua From: Keriana Brooking [mailto: Sent: Wednesday, 25 August 2021 15:18 To: Alex Pimm (ADHB) < ; Health ; Tricia Sloan « System Readiness & Response Planning < Subject: Please send National Request for Assistance here BE CYBER SMART - This email is from an external sender - Please do not click links or open attachments from unknown sources - Forward suspicious emails to healthalliance.co.nz ** Statement of confidentiality: This e-mail message and any accompanying attachments may contain information that is IN-CONFIDENCE and subject to legal privilege. If you are not the intended recipient, do not read, use, disseminate, distribute or copy this message or attachments. If you have received this message in error, please notify the sender immediately and delete this message. This e-mail message has been scanned for Viruses and Content and cleared by the Ministry of Health's Content and Virus Filtering Gateway ** Statement of confidentiality: This e-mail message and any accompanying attachments may contain information that is IN-CONFIDENCE and subject to legal privilege. If you are not the intended recipient, do not read, use, disseminate, distribute or copy this message or attachments. If you have received this message in error, please notify the sender immediately and delete this message.

**

Confirmed Adult IP capacity: ADHB 13, WDHB 10, CMDHB 17
 Action: update Bed Capacity Plan for today (attached), JB update NRHCC bed status (attached)



- Cardiac surgery; likely to worsen for Auckland as other regions improve
 - o Think about moving these out of region for P2s, they have the most impacted waitlist and will take up the most in the way of ICU capacity
 - Give other regions a heads up before they start to do their P3s and P4s Post
 meeting update: escalated to MOH zoom meeting end of day





From: <u>Jo Brown (ADHB)</u>

To: NRHCC Administration; ADHB IMT Controller (ADHB); Allsa Claire (ADHB); Alberto Areias (HealthSource);

Alex Pimm (ADHB); ARPHS Emergency Incident Controller (ADHB); Donna Neal (ADHB); Incident Control Centre (WDHB); John Cartwright (CMDHB); Justin Rawiri (ADHB); Liz Boucher (ADHB); Major Disasters Only - Incident Controller (CMDHB); Mark Shepherd (WDHB); Michael Shepherd (ADHB); NRHCC Incident Controller; Paula Martin (NDHB); Pauline McGrath (CMDHB); Sarah Hoyle (NDHB); Jennie Montague (ADHB); Shared Mailbox - IMT Incident Controller (NDHB); Stacey Wilson (CMDHB); Tamzin Brott (WDHB); Jonathan Wallace (WDHB); Emma McDowall (ADHB); Stephanie Doe (WDHB); David Resoli (WDHB); Mark

McGinley (NDHB)

Cc: Vanessa Thornton (CMDHB); Peter Watson (CMDHB); Andrew Old (WDHB); Debbie Holdsworth (WDHB);

Jonathan Christiansen (WDHB); Vanessa Aplin (WDHB); NRHCCINTELLIGENCE1 (ADHB); Cecilia Lynch

(NRA)

Subject: Regional Provider Group - notes of meeting 7 September

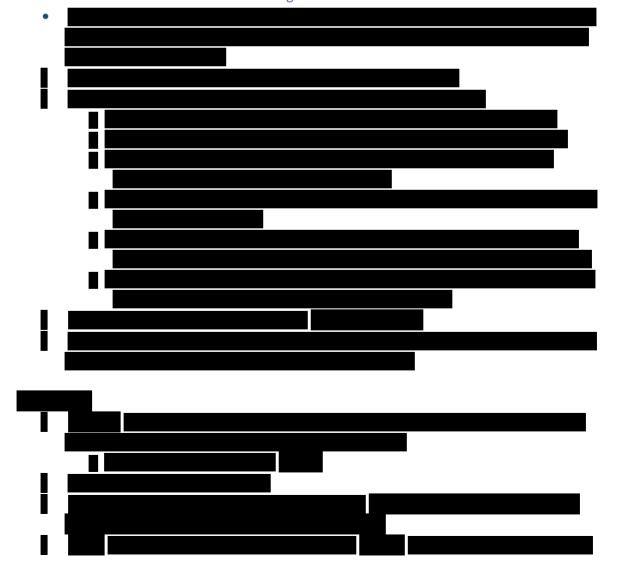
Date:Tuesday, 07 September 2021 17:28:43Attachments:Daily hospital Stats 07092021 0900.docx

Regional Provider Group

7 September 2021

Workforce

- TAS has sent through 12 ICU nurse profiles for deployment in Auckland metrow sent to Jo Wright directly
 - o Jo Wright to liaise with the relevant ICU charge nurses at each DHBs
 - o TAS have indicated there are more to come
 - o Some visa issues for some nurses has contributed to delay in identifying volunteers Vanessa working with TAS







Ngā mihi Jo

Joanne Brown NRHCC Lead – Regional Provider Capacity Planning and Response Funder Hospitals – Auckland DHB From: <u>Jo Brown (ADHB)</u>

To: NRHCC Administration; ADHB IMT Controller (ADHB); Ailsa Claire (ADHB); Alberto Areias (HealthSource);

Alex Pimm (ADHB); ARPHS Emergency Incident Controller (ADHB); Donna Neal (ADHB); Incident Control Centre (WDHB); John Cartwright (CMDHB); Justin Rawiri (ADHB); Liz Boucher (ADHB); Major Disasters Only - Incident Controller (CMDHB); Mark Shepherd (WDHB); Michael Shepherd (ADHB); NRHCC Incident

Controller; Paula Martin (NDHB); Pauline McGrath (CMDHB); Sarah Hoyle (NDHB); Jennie Montague (ADHB); Shared Mailbox - IMT Incident Controller (NDHB); Stacey Wilson (CMDHB); Tamzin Brott (WDHB); Jonathan Wallace (WDHB); Emma McDowall (ADHB); Stephanie Doe (WDHB); David Resoli (WDHB); Mark

McGinley (NDHB)

Cc: Vanessa Thornton (CMDHB); Peter Watson (CMDHB); Andrew Old (WDHB); Debbie Holdsworth (WDHB);

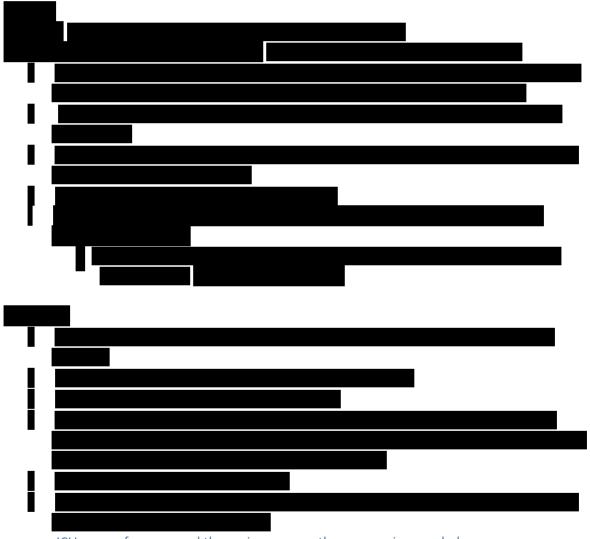
Jonathan Christiansen (WDHB); Vanessa Aplin (WDHB); NRHCCINTELLIGENCE1 (ADHB); Cecilia Lynch

(NRA)

Subject: Regional Provider Group - notes of meeting 16 Sept

Date:Thursday, 16 September 2021 16:01:58Attachments:Daily hospital Stats 16092021 1000.docx

Regional Provider Group 16 September 2021



- ICU nurses from around the region or any other resourcing needed
 - o ADHB to follow up but understanding is that we are ok for now

From: <u>Jo Brown (ADHB)</u>

To: NRHCC Administration; ADHB IMT Controller (ADHB); Ailsa Claire (ADHB); Alberto Areias (HealthSource);

Alex Pimm (ADHB); Amber Mander (NRA); Andrew Old (WDHB); ARPHS Emergency Incident Controller (ADHB); Chris Hutton (CMDHB); Donna Neal (ADHB); Incident Control Centre (WDHB); Jodie Moselen (NDHB); John Cartwright (CMDHB); Justin Rawiri (ADHB); Liz Boucher (ADHB); Major Disasters Only - Incident Controller (CMDHB); Mark Shepherd (WDHB); Michael Shepherd (ADHB); NRHCC Incident Controller; Paula Martin (NDHB); Pauline McGrath (CMDHB); Sarah Hoyle (NDHB); Sarah Prentice (NRA); Shared Mailbox - IMT Incident Controller (NDHB); Stacey Wilson (CMDHB); Tamzin Brott (WDHB); Jonathan

Wallace (WDHB); Emma McDowall (ADHB)

Cc: Matt Hannant (CMDHB); Donna Neal (ADHB); Brenda Howard (ADHB); Vanessa Thornton (CMDHB); Peter

Watson (CMDHB); Andrew Brant (WDHB); Nicky Plant (ADHB); Andrew Old (WDHB); Debbie Holdsworth

(WDHB); Sue Waters (ADHB)

Subject: Regional Provider Group - notes of meeting 24 August

Date: Tuesday, 24 August 2021 19:27:43

Regional Provider Group 24 August 2021



Workforce

- National DHB CE discussion re offers of help, other DHBs identifying staff who have previously worked in Auckland
- National Tertiary/Quarternary discussion to date identified options (1) move workforce in (2) move patients out (3)use of other tertiary providers in lieu of Auckland Tertiary services further national discussion this pm (MOT + Tertiaries), need to ensure we can maintain capacity for services only able to be provided by tertiary providers in this region
- DHBs reviewing internal redeployment arrangements
- Proposed that national workforce deployment process used in ChCh/Kaikoura quakes and Chch mosque event be adapted and adopted to support national deployment to Auckland DHB and other services Action: Alex to take to national IMTs call this pm to get process agreed

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negative pressure separately enabling one to remain positive pressure for major burns. Engineering work underway to increase negative pressure bed capacity. ICU surge capacity to 13 but would not be able to accommodate other patients in ICU/HDU. Nursing staff an issue, will move to changed model of care including use of PACU/Anaesthetic Techs/other.

Need to explore options for major burns management in event of significant COVID ICU numbers. Longterm (> 4 weeks) ICU inpatient, tests positive for COVID at each swab (previous similar case in excess of 6 weeks). Need to establish plan for management of longstay COVID ICU patients, to seek advice of international colleagues as to how this has been managed, consider request for CTAG advice

- · ICU Negative pressure capacity: CMDHB 4 (+ 2), ADHB 3, WDHB 2, NDHB 4
 - O Auckland metro 9 (+ 2)
 - Northern region 13 (+2)
- Need to maintain ADHB ICU capacity to enable access to Neuro/Cardiac/Thoracic acute/P1
- Current impact on workforce associated with contacts of contacts, staff testing turnaround 24 hours, reasonable in the circumstances
- Further discussion needed re phasing and timing of next steps taking into account CMDHB National Burns obligations, ADHB tertiary (Neuro + Cardiac + Thoracic) and Quarternary/National obligations
- Expecting increasing hospitalisations to impact next week, further discussion Friday to check in and agree weekend plan

Actions:

- o ADHB to put up request nationally for ICU nursing staff on behalf of region
- ADHB to follow up with MA re deployment of their ICU nursing staff or Cardiac Surgery outsourcing
- CMDHB to further develop contingency plan for major burns in event of high COVID ICU demand
- VT/KB-C follow up with Australasian ICU network/other colleagues re the management approach to longstay ICU COVID patients
- Mike to draft up and share for feedback , table on proposed phasing of admissions
- Regional Bed Management update to REF with interim advice re ICU (Jo)



From: <u>Jo Brown (ADHB</u>

To: NRHCC Administration; ADHB IMT Controller (ADHB); Ailsa Claire (ADHB); Alberto Areias (HealthSource);

Alex Pimm (ADHB); ARPHS Emergency Incident Controller (ADHB); Donna Neal (ADHB); Incident Control Centre (WDHB); John Cartwright (CMDHB); Justin Rawiri (ADHB); Liz Boucher (ADHB); Major Disasters Only - Incident Controller (CMDHB); Mark Shepherd (WDHB); Michael Shepherd (ADHB); NRHCC Incident Controller; Paula Martin (NDHB); Pauline McGrath (CMDHB); Sarah Hoyle (NDHB); Shared Mailbox - IMT Incident Controller (NDHB); Stacey Wilson (CMDHB); Tamzin Brott (WDHB); Jonathan Wallace (WDHB);

Emma McDowall (ADHB); Stephanie Doe (WDHB); David Resoli (WDHB)

Cc: <u>Vanessa Thornton (CMDHB)</u>; <u>Peter Watson (CMDHB)</u>; <u>Andrew Old (WDHB)</u>; <u>Debbie Holdsworth (WDHB)</u>;

<u>Jonathan Christiansen (WDHB)</u>; <u>Vanessa Aplin (WDHB)</u> Regional Provider Group - notes of meeting 28 August 2021

Subject: Regional Provider Group - notes of m

Date: Saturday, 28 August 2021 10:57:14

Importance: High

Regional Provider Group 28 August 2021



Workforce

- Daily call with other MIQ regions and had a few deployed for the weekend
 - o Positive feedback from nurses out of region so hoping to get more
 - o National staffing request process in place, not a streamlined process for responses, ADHB have identified 2 key contacts to manage responses from rest of NZ
 - o ITU request was warmly received through this mechanism, likely yield uncertain



From: <u>Jo Brown (ADHB)</u>

To: NRHCC Administration; ADHB IMT Controller (ADHB); Allsa Claire (ADHB); Alberto Areias (HealthSource);

Alex Pimm (ADHB); ARPHS Emergency Incident Controller (ADHB); Donna Neal (ADHB); Incident Control Centre (WDHB); John Cartwright (CMDHB); Justin Rawiri (ADHB); Liz Boucher (ADHB); Major Disasters Only - Incident Controller (CMDHB); Mark Shepherd (WDHB); Michael Shepherd (ADHB); NRHCC Incident Controller; Paula Martin (NDHB); Pauline McGrath (CMDHB); Sarah Hoyle (NDHB); Shared Mailbox - IMT Incident Controller (NDHB); Stacey Wilson (CMDHB); Tamzin Brott (WDHB); Jonathan Wallace (WDHB);

Emma McDowall (ADHB); Stephanie Doe (WDHB); David Resoli (WDHB)

Cc: <u>Vanessa Thornton (CMDHB)</u>; <u>Peter Watson (CMDHB)</u>; <u>Andrew Old (WDHB)</u>; <u>Debbie Holdsworth (WDHB)</u>;

Jonathan Christiansen (WDHB); Vanessa Aplin (WDHB) Regional Provider Group - notes of meeting 31 August

Date: Tuesday, 31 August 2021 11:47:26

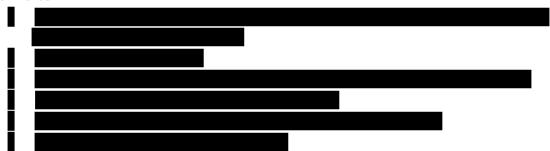
Note – agreed no afternoon stand up needed re regional bed management today

Regional Provider Group 31 August 2021

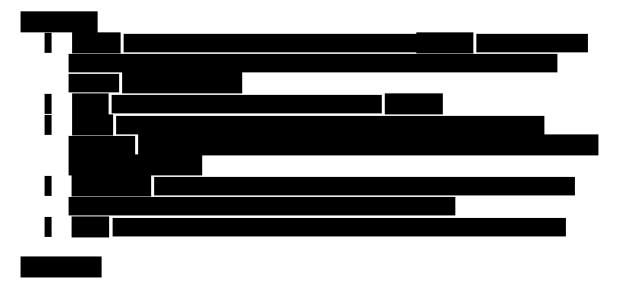


Workforce

Subject:

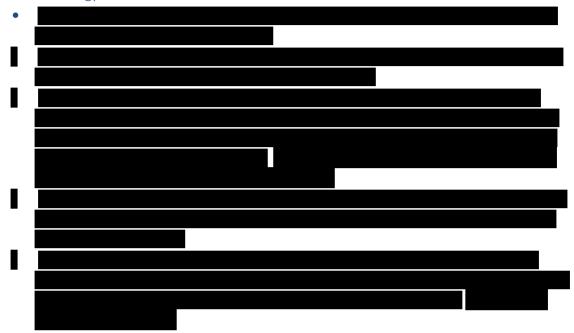


- CMDHB ICU, IPC and respiratory nurse specialists needed
- WDHB IPC, respiratory and ED nursing needed
- ADHB ICU staff needed
- DHB ICs to confirm staff requests including staff type and number direct to Vanessa by 1pm who will send to TAS





- MA have shared proposed approach to standing up planned care noting transfer risk to DHB ICUs if they are stepping up P1
- Increased clinical concern around delaying planned care surgery and interventional cardiology



Ngā mihi Jo

Joanne Brown
NRHCC Lead – Regional Provider Capacity Planning and Response
Funder Hospitals – Auckland DHB

From: <u>Jo Brown (ADHB)</u>

To: NRHCC Administration; ADHB IMT Controller (ADHB); Allsa Claire (ADHB); Alberto Areias (HealthSource);

Alex Pimm (ADHB); ARPHS Emergency Incident Controller (ADHB); Donna Neal (ADHB); Incident Control Centre (WDHB); John Cartwright (CMDHB); Justin Rawiri (ADHB); Liz Boucher (ADHB); Major Disasters Only - Incident Controller (CMDHB); Mark Shepherd (WDHB); Michael Shepherd (ADHB); NRHCC Incident Controller; Paula Martin (NDHB); Pauline McGrath (CMDHB); Sarah Hoyle (NDHB); Shared Mailbox - IMT Incident Controller (NDHB); Stacey Wilson (CMDHB); Tamzin Brott (WDHB); Jonathan Wallace (WDHB);

Emma McDowall (ADHB); Stephanie Doe (WDHB); David Resoli (WDHB)

Cc: Vanessa Thornton (CMDHB); Peter Watson (CMDHB); Andrew Old (WDHB); Debbie Holdsworth (WDHB);

Jonathan Christiansen (WDHB); Vanessa Aplin (WDHB)
Regional Provider Group - POST MEETING UPDATE

Subject: Regional Provider Group - POST MEET

Date: Saturday, 28 August 2021 11:00:50

Importance: High



From: Jo Brown (ADHB)

Sent: Saturday, 28 August 2021 10:57 a.m.

To: NRHCC Administration; ADHB IMT Controller (ADHB); Ailsa Claire (ADHB); Alberto Areias (HealthSource); Alex Pimm (ADHB); ARPHS Emergency Incident Controller (ADHB); Donna Neal (ADHB); Incident Control Centre (WDHB); John Cartwright (CMDHB); Justin Rawiri (ADHB); Liz Boucher (ADHB); Major Disasters Only - Incident Controller (CMDHB); Mark Shepherd (WDHB); Michael Shepherd (ADHB); NRHCC Incident Controller; Paula Martin (NDHB); Pauline McGrath (CMDHB); Sarah Hoyle (NDHB); Shared Mailbox - IMT Incident Controller (NDHB); Stacey Wilson (CMDHB); Tamzin Brott (WDHB); Jonathan Wallace (WDHB); Emma McDowall (ADHB); Stephanie Doe (WDHB); David Resoli (WDHB)

Cc: Vanessa Thornton (CMDHB); Peter Watson (CMDHB); Andrew Old (WDHB); Debbie Holdsworth

(WDHB); Jonathan Christiansen (WDHB); Vanessa Aplin (WDHB) **Subject:** Regional Provider Group - notes of meeting 28 August 2021

Importance: High

Regional Provider Group 28 August 2021



Daily call with other MIQ regions and had a few deployed for the weekend
 Positive feedback from nurses out of region so hoping to get more

- National staffing request process in place, not a streamlined process for responses, ADHB have identified 2 key contacts to manage responses from rest of NZ
- o ITU request was warmly received through this mechanism, likely yield uncertain



Ngā mihi Jo

Joanne Brown NRHCC Lead – Regional Provider Capacity Planning and Response Funder Hospitals – Auckland DHB

Jo Brown (ADHB) From:

To:

NRHCC Administration; ADHB IMT Controller (ADHB); Ailsa Claire (ADHB); Alberto Areias (HealthSource); Alex Pimm (ADHB); Amber Mander (NRA); Andrew Old (WDHB); ARPHS Emergency Incident Controller (ADHB); Chris Hutton (CMDHB); Donna Neal (ADHB); Incident Control Centre (WDHB); Jodie Moselen (NDHB); John Cartwright (CMDHB); Justin Rawiri (ADHB); Liz Boucher (ADHB); Major Disasters Only - Incident Controller (CMDHB); Mark Shepherd (WDHB); Michael Shepherd (ADHB); NRHCC Incident Controller; Paula Martin (NDHB); Pauline McGrath (CMDHB); Sarah Hoyle (NDHB); Sarah Prentice (NRA); Shared Mailbox - IMT Incident Controller (NDHB); Stacey

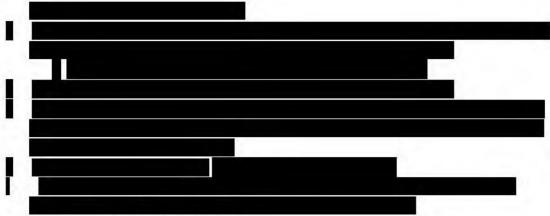
Wilson (CMDHB); Tamzin Brott (WDHB); Jonathan Wallace (WDHB); Emma McDowall (ADHB)

Subject: RPG notes of meeting 12 August 2021 Thursday, 12 August 2021 18:42:54 Date:

NRHCC Regional Provider Group

12 August 2021





Hospital preparedness - ICU & staffing

- Need to confirm surge workforce plans in hospitals particularly ICU physical capacity and equipment not considered to be an issue
- Need to review local DHB plans for identifying and training ICU surge nursing workforce
- Need a plan for immediate term to December when vaccination rollout expected to be complete then need to consider modelling of future demand (as per Gary Jackson paper) post December
- need to consider how we free up existing workforce to be ICU trained in the context of the current vacancies – may need to consider standing down planned care to allow for nurses to be released
- National ICU conversation immigration piece has been raised in this forum to push that and getting nursing and other workforce in from other countries
- Reassurance to REF; Justin to confirm if escalation plans need to be revised; ICU workforce plans needs to be a priority



Ngā mihi Jo

Joanne Brown

NRHCC Lead – Regional Provider Capacity Planning and Response

Funder Hospitals – Auckland DHB

 From:
 Nadine Mackintosh

 To:
 Alex Pimm (ADHB)

 Cc:
 Tricia Sloan

Subject: Whanganui DHB Response: COVID - ADHB Workforce request - ICU nurses

Date: Monday, 30 August 2021 12:10:25

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Good afternoon Alex

Unfortunately at this stage Whanganui DHB are not in a position to release experienced ICU registered nurses, we hope you are able to receive assistance from other DHBs.

Kind regards Nadine

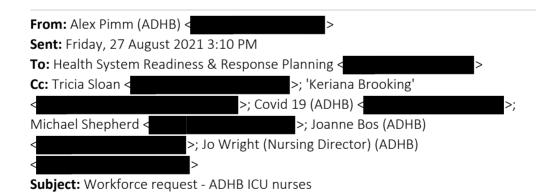
Nadine Mackintosh | Executive Officer | Office of the Chief Executive Whanganui District Health Board

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354d13bb3a1e32f38146d719e531ca1036fb4b88

He Hāpori Ora - Thriving Communities



Kia ora.

As discussed, we are requesting national assistance to support Auckland DHBs with trained ICU nurses.

The attached document provide more detail on the request and background information. In summary, we are asking for:

Up to 30 trained/experienced ICU registered nurses, available to work in Auckland

for the next six weeks.

To discuss the request further, please contact:

Joanne Bos, Interim Associate Director, Cardiovascular Services -

Joanne Wright, Nurse Director, Cardiovascular Services –

Ngā mihi,

Alex

Alex Pimm

Director | Patient Management Services Incident Controller | COVID-19 Response & Vaccination Team

Te Toka Tumai (Auckland District Health Board)

Level 4 | Building 1 | Auckland City Hospital

Mob: E-mail:

Working in partnership, enabling self-management, promoting independence.

Welcome Haere Mai | Respect Manaaki | Together Tuhono | Aim High Angamua

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From: Michael Shepherd (ADHB)

To: <u>Jo Wright (Nursing Director) (ADHB); Margaret Dotchin (ADHB); Alex Pimm (ADHB)</u>

Subject: RE: ICU nurses from around the Regions
Date: Monday, 20 September 2021 18:21:53

Thanks Jo.

As we agreed at CCB – suggest no new CVS, will inform national process we have enough names, complete orientation for the names we have accepted so far

Cneer

From: Jo Wright (Nursing Director) (ADHB) Sent: Monday, 20 September 2021 11:49 a.m.

To: Margaret Dotchin (ADHB); Michael Shepherd (ADHB); Alex Pimm (ADHB)

Subject: ICU nurses from around the Regions

Hi everyone

We have taken 6 nurses to ADHB and 4 to CMDHB with another 5 processed and ready to start on the 27th September and 4th October, there are 3 profiles to review today. I talked with Margaret last week with a view to see how we are placed this week. With 3 patients in 7a COVID positive should we continue with the people in the pipeline? CMDHB had a few in ICU and were valuing being able to swap out nurses with having the extra support. I'm mindful that the DHB's have been generous to us . What should we do?

Thanks for your input

Jo

Ngā mihi

Jo Wright Nurse Director Cardiovascular Directorate Auckland District Health Board

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