

COVID-19 Rapid Works - Ward 68

Reason	Explanation
Negotiations	<i>Information relating to commercial and/or industrial negotiations in progress is incorporated in this report and would prejudice or disadvantage if made public at this time.</i>
Prejudice to Health or Safety	<i>Information about measures protecting the health and safety of members of the public is enclosed in this report and those measures would be prejudiced by publication at this time.</i>

May not be released in public until: 25 February 2022 or type year

Recommendation

That the Board:

1. Receives the COVID-19 rapid works – Ward 68 report.
2. Endorses the approval under Covid -19 Delegations to the Chief Executive to approve the outlined funding request of up to [REDACTED], to enable the Auckland DHB Covid-19 current outbreak response, with its immediate goal to increase negative pressure rooms, including in Ward 68 from the current 4 isolation room beds to 22 isolation room beds (4 permanent, 18 temporary).

[REDACTED]

Glossary

Acronym/term	Definition
ACH	Auckland City Hospital
IPC	Infection Prevention Control

1. Board Strategic Alignment

Emphasis/investment on both treatment and keeping people healthy	The COVID 19 Rapid Works – Ward 68, will provide immediate capacity for patients confirmed or suspected of having COVID 19, in a negative pressure environment.
Service integration and/or consolidation	
Outward focus and flexible service orientation	
Operational and financial sustainability	The works will improve operational resilience in staffing and health and safety by cohorting cases to a consolidated area and ward.

2. Executive Summary

The request for approval of [REDACTED] to enable the COVID 19 Rapid Works – Ward 68 to create Negative Isolation Room capacity at ACH. This is in response to the current Delta variant outbreak and to build required capacity for triaging and treatment of COVID patients.

Approval will enable immediate sourcing of limited construction materials and supplies, construction of isolation rooms, and provision for the future reinstatement back into patient rooms.

3. Introduction/Background

The Auckland DHB ACH site is limited in Negative Isolation Room capacity for general, acute and immunocompromised patients. With the recent Covid Delta Variant outbreak the requirement for additional negative pressure bed capacity has become critical to the DHB.

This request is for funding to enable the immediate relief in managing patient demand for those with or presenting COVID like symptoms by adding capacity within Ward 68.

The proposed facilities work has been designed, at pace, to create an additional 18 temporary negative isolation room beds within a 7-10-day period. The facilities work involves converting existing single bed patient areas into makeshift “on floor” plant rooms which will enable the negative isolation required for these patients. The temporary works will be creating a zone in which to cohort these patients in either the Four (4) bedroom or single (1) bedroom options to minimise risk to other operational areas of the department and adjacent wards for both patients and staff.

4. Costs/Resources/Funding

The estimated maximum cost of this temporary work is [REDACTED] including contingencies, with works proposed shown in the attached plans (appendix B). [REDACTED]

[REDACTED] The current estimate allows for out of hours works, additional Preliminary and General costs for compliance to Level 4 Health and Safety and Covid protocols, escalation (materials and labour) and acceleration.

The proposal is a temporary solution only, [REDACTED] however it provides additional capacity until a more sustainable and permanent solution can be put in place. The future sustainable solution will be provided via the Board approved IPC Negative Pressure Room Capex [REDACTED]. This work is currently underway with an estimated delivery of early 2022.

Further capacity via a second phase of Capex works is also being developed, [REDACTED]

5. Risks/Issues

Without this work, the DHB will remain limited in the ability to respond quickly to the requirements of the Covid -19 Delta variant. Existing wards, not configured or able to provide negative pressure, will be required to accommodate Covid patient demands.

Delays in approval heighten the scarcity of both materials and labour, and are likely to significantly hamper the DHB's ability to create capacity in the urgent timeframes required (as modelled for surge and capacity). The lockdown and other essential projects are competing for similar materials and labour and it is unknown when the next shipment from overseas will become available in NZ; some suppliers have indicated an additional 15-20 days if the current window of opportunity is missed.

The outcome of this project allows for better clinical planning and workflows with consolidation of Covid-19 patients into a single ward. Risk to public and staff remain significantly higher without the necessary capacity that this temporary works project will provide.

6. Conclusion

The outlined project delivers the required capacity to bridge the critical COVID-19 Delta variant surge as modelled in this current outbreak. The works can be mobilised in a constrained market (materials/resources) at pace to create the capacity to enable the DHB to operate efficiently while under severe resource and capacity constraints.

The Board is being asked to endorse and approve the request for the COVID-19 Rapid Work – Ward 68 project [REDACTED]