

## Provider Network Update

October 14 2021

# COVID-19 PLANNING

Our focus is on you, and ensuring you have the information you need, when you need it, in order for you to care for your staff and your clients.

**We will be using this provider network update channel to keep you informed about resurgence planning. You can send any questions or comments as a reply to this email address as it is being monitored.**

In this update:

- Resurgence Planning
- Managing COVID-19 in the community – Ministry of Health response
- Managing COVID-19 in the community – our response
- Vaccination
- What is happening now
- COVID-19 testing
- Hospital resilience planning

---

### CURRENT SITUATION

Within our region, there remain no cases. All cases from the recent community outbreak in Wellington have fully recovered and returned home from the quarantine facility. Waste water testing in Palmerston North and Wellington/Hutt Valley have not shown any positive results.

However, we are fully aware and in alert mode given the highly infectious nature of the Delta variant. We know it is only a matter of time before we have another community outbreak here.

We must be ready. And we want to work with you so we will all be ready.

### RESURGENCE PLANNING

While our region remains free of COVID-19, we need to keep vigilant and plan for both the possibility of surges with local clusters and for a time when COVID-19 may be transmitting at low levels in the community.

Within our hospitals, resurgence plans have been updated, providing a framework for what is required at various alert levels according to the COVID-19 National Hospital Response Framework. For our community provider network, resurgence plans are equally as important.

We are engaging with Ministry of Health and our hospital teams for how we will manage an outbreak of Delta.

We will be ensuring a coordinated response throughout our provider network.

## MANAGING COVID-19 CARE IN THE COMMUNITY – MOH RESPONSE

There is a programme of work as part of the Ministry's Health System Readiness programme which is about managing COVID-19 care in the community. This means we will be working with you to connect general practice and primary care, public health, community care and welfare services, and secondary care effectively and safely.

A National Service Model led by the Ministry is under development with clinical and intersectoral advice being provided. Among the models being developed are clinical risk, social need, and suitability of accommodation for care at home, to ensure options are safe, effective and sustainable for COVID-19 positive whānau who remain at home – including safety of the communities around them.

A clinical management pathway is being formalised, again with strong clinical representation from primary, secondary and community care experts.

The Ministry has asked for support and contribution from all parts of the health sector in this work, and will give regular updates on progress.

## MANAGING COVID-19 CARE IN THE COMMUNITY – OUR RESPONSE

We have established a COVID Group inside the hospital with members of our community COVID team at the table. Those people, who are well connected to the community and public health work programmes will feed in to our community response. This means we can all be well connected.

Modelling tells us Māori and Pacific individuals will be hit hardest. We will continue to work alongside our Māori providers and our Pacific providers to increase capacity and capability and offer end to end support services to their communities.

We will be working with Mana Whenua, PHOs and general practise, and our Maori, Pacific and community providers to ensure we have a strong and resourced community care response. There is some work to be done and we look forward to continuing to partner with you as we collectively protect our communities.

Vaccination of our priority populations is one of our strongest weapons for managing a community outbreak.

## VACCINATION

Vaccination is safe and effective for protecting ourselves, our families and communities when we are looking after patients with COVID-19 or when there is COVID-19 transmission in our region.

As you may have heard, earlier this week the Government announced mandatory vaccination for front-line roles in the health and disability sector. Second doses complete by 1 December.

An amendment will be made to the COVID-19 Public Health Response (Vaccinations) Order 2021 that will require a new set of workers in the health and disability sector to be fully vaccinated by 1 December 2021. First doses must be complete by 30 October 2021.

We are still working through what this means for us all, how we can best meet these requirements, and how we support you and your workforce.

Vaccination remains our strongest and most effective tool to protect against infection and disease, and is an important part of keeping our workforce, patients and communities safe and protected.

If you are wondering about a third vaccine dose for healthcare workers, this is being discussed at a national level and we hope to have an update for you soon.

Be assured we are ready when a call comes for booster shots. We are ready when we get the green light to vaccinate down to five year olds. Our Māori providers are stronger, our GP practices have broadened their delivery, and our pharmacists have shown they have hitherto untapped skills and a willingness to play an expanded role within health service delivery.

## VACCINATING OUR PRIORITY POPULATIONS

We know Māori are a group with a greater proportion of people who are reluctant to be COVID-19 vaccinated. But 70% of Māori in the region have already had their first shot, and we expect that in three or four weeks around 70% will have had their second shot.

A lot of work is going on now with that remaining 30% who are unvaccinated. That is important because as a region the lowest rate of vaccination is where our vulnerability lies. Our aim is to bring Māori vaccination rates to over 90% for second shot; the whole community benefits if that happens.

Our Māori providers are leading the way, while working in collaboration with all other providers. The vaccination programme works as a whole team driven by a common cause.

## WE HAVE BEEN WORKING TOWARD THIS MOMENT

Delta is coming, we know that, and we have been working toward that moment since March 2020. Our best defences are the things we, and our communities, already know - how to social distance, how to do lockdowns, how to record where we go so our contact tracers can follow that trail when needed. Working from home when we can has become second nature.

Most importantly we know how to vaccinate. We know the importance of having two doses, and we know the importance of our whānau, our neighbours, our friends, and our work colleagues and communities being vaccinated.

When we look to the experience of other countries it's clear a vaccinated population can withstand COVID-19 better than an unvaccinated population. Fewer people get COVID-19 and those who are vaccinated that do get COVID-19 tend not to be hospitalised.

The number of people in our region that have been received two doses increases every day. We are safest if every person in the region is vaccinated. We will continue to work toward that goal.

## WHAT IS HAPPENING NOW

We are setting up new systems to isolate within our own communities – we expect that will be needed. We are prepared for larger numbers of people being unwell at the same time. We have watched as health systems throughout the world have had to endure difficult times, and therefore, to an extent, we know what to expect.

For our whānau, we know the difficulty of having to forego attending tangi and funerals, or of not being able to visit whānau in hospital. We know the disappointment of cancellation of plans. We have had deaths in our communities due to COVID-19 and we are going to have more. That is going to be difficult. We are going to endure real fear for our loved ones.

## COVID-19 TESTING

Our laboratory has a high capacity for COVID-19 testing and has a process in place to prioritise hospital samples and those from the staff testing clinic. When we detect COVID-19 transmission within our region we will shift to even greater testing of inpatients and commence surveillance testing for staff. The types of tests used and the process for this will diversify to meet testing needs. Updates will be provided soon.

## HOSPITAL RESILIENCE PLANNING

In preparation for the country moving from an elimination model to a resilience model which could see COVID-19 transmitting at low levels in the community, a 2DHB hospital oversight group has been established to develop and advise on a plan that enables keeping our business as usual running but remaining able to manage COVID-19 cases as needed. The group is focused on keeping our hospitals functioning as efficiently as possible and enabling planned care to continue while remaining COVID capable. It will work alongside the 2DHB COVID-19 response group that is overseeing the same work in the community.

## WELLBEING

For all of us working in the health services, we are going to get very tired; that is the experience within the health systems of other countries. We have to manage exhaustion and create new ways of building workforces that can sustain constant stress.

From a global point of view we are about to go into the 'tough stuff'. Most other countries have already been through it, or are in it, so we are able to take the learnings from them. We can adapt and we can be strengthened by adversity. We will come out stronger than where we went in.

By working together in partnership and collaboration, we are ready.

## THANK YOU

Thank you for all your mahi, and for your support of each other.

If you have any questions or concerns please email us at [COVID-19questions@ccdhb.org.nz](mailto:COVID-19questions@ccdhb.org.nz) and a member of the team will respond. Or you can contact your contract manager.

### **Rachel Haggerty**

Director, 2DHB Strategy, Planning & Performance