

# COVID-19 Health System Readiness Programme (HSRP)

## Assurance Group

Terms of Reference

September 2021

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Background and context

The World Health Organisation (WHO) declared the outbreak of COVID-19 a pandemic on 11 March 2020. COVID-19 is an infectious disease caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The pandemic has caused extensive global, social and economic disruption.

The *Reconnecting New Zealanders Strategy* acknowledges that as community vaccination rates increase there are more options for managing COVID-19. The public health options change from a reliance on lockdowns and strong border restrictions to include more relaxed border controls targeted to high-risk passengers; broader surveillance programmes; self-isolation models; and more targeted public health interventions at a local and regional level.

The reconnection pathway is unlikely to be linear or one way and there is no set timeline for the shift to the management of COVID-19 as an endemic disease. However, it should be assumed that most future requirements need to be in place prior to the 2022 winter season.

New Zealand needs to be prepared to ensure safe and sustainable healthcare delivery as it reconnects to the world. To achieve this, its health system needs to be more agile, better equipped, more vigilant, and increasingly responsive to the changing threat of COVID-19. In response, the Ministry of Health has established a COVID-19 Health System Readiness Programme (Health System Readiness Programme, HSRP).

## Objectives

The key objective of the HSRP is to reduce the effort required by the health system to manage COVID-19 in the community sustainably. The subsidiary objectives in reconfiguring the health system to achieve this are to:

- Keep the number of people who get COVID-19 as low as possible
- Manage people with COVID-19 with the lowest level of appropriate input to meet their needs.

## Purpose

The COVID-19 Health System Readiness Programme Assurance Group (Assurance Group) will provide broad oversight and risk assurance of the HSRP delivery to the Minister of Health. The Group fulfils its purpose with consideration to the *Reconnecting New Zealand Strategy* and is underpinned by Te Tiriti o Waitangi.

## Structure

The Assurance Group is the programme peak escalation body which sits atop the HSRP Steering Group and any subsidiary Working Groups. The Assurance Group reports to the Minister of Health and provides guidance on plans and advice that has been developed within the Ministry and informed by the Steering and Working Groups. Advice from the Group will be given reasonable consideration by the Minister, but recommendations are not binding. The Assurance Group takes strategic advice from existing Ministry of Health Advisory Groups.

A more detailed explanation of the HSRP governance structure is outlined in Appendix A.

## Te Tiriti o Waitangi Principles

The Assurance Group will ensure their advice is provided within the context of honouring Te Tiriti o Waitangi.

The principles of Te Tiriti o Waitangi, as articulated by the Courts and the Waitangi Tribunal provide the framework for how the Ministry will meet its obligations under Te Tiriti o Waitangi. The Assurance Group must apply and adhere to these principles when providing advice:

- **Tino rangatiratanga**

The guarantee of tino rangatiratanga, which provides for Māori self-determination and mana motuhake. This means ensuring Māori are part of decision-making process in regard to the design, delivery and monitoring of the HSRP.

- **Equity**

The principle of equity, which requires a commitment to achieving equitable health outcomes for Māori. This means the Assurance Group will actively ensure equitable access to healthcare and equitable outcomes for Māori as part of the design and delivery of the HSRP.

- **Active protection**

The principle of active protection, which requires the health system to achieve equitable health outcomes for Māori the fullest extent practicable. This means the Assurance Group utilises data, evidence and resources to actively identify and address inequities in regard to healthcare delivery and the protection of Māori health and wellbeing.

- **Options**

The principle of options requires there to be properly resourced kaupapa Māori health and disability services. Furthermore, the Crown is obliged to ensure that all health and disability services are provided in a culturally appropriate way that recognises and supports the expression of hauora Māori models of care.

- **Partnership**

This requires the Crown and Māori to work in partnership in the steering, design, delivery and monitoring of health and disability services. This means ensuring appropriate Māori representation on the Assurance Group, as well as ensuring the Assurance Group are partnering with Māori in the design, delivery and monitoring advice they provide for the HSRP.

## Scope

The Assurance Group oversees the HSRP which contains the following systems functions and is informed by system enablers as related to COVID-19:

### System functions

- Public Health
- Workforce
- Environment, facilities, and supplies
- Models of care

### System enablers:

- DHB readiness and resilience capacity

- Data and digital solutions
- Equity challenges
- Primary and community models of care for the management of COVID-19 in the community

## Membership

The Assurance Group membership contains subject matter experts from across New Zealand and the health system. Members are selected and appointed directly by the Director General of Health. Members are expected to contribute their own expertise, perspectives and advice on the practical implementation of the HSRP.

Consideration has been given to include Māori and Pacific representation and tino – rangatiratanga (Māori self-determination) when appointing members.

The Assurance Group is chaired by Ken Whelan and will comprise of these members:

Member	Role
Dr Ashley Bloomfield	<i>Director General</i>
Ken Whelan	<i>Chair Whanganui DHB, Crown Monitor</i>
Dr Andrew Connolly	<i>Chief Medical Officer</i>
Dame Karen Poutasi	<i>Commissioner, Waikato DHB</i>
Robyn Shearer	<i>Deputy Chief Executive Ministry of Health</i>
Colin MacDonald	<i>Independent contractor (ex-Chief Executive DIA)</i>
John Whaanga	<i>DDG Māori Health</i>
Steve Maharey	<i>Chair of Pharmac, Chair of ACC, Governance Group Finance, Information and Procurement MoH, COVID-19 Governance Group MoH</i>
Murray Jack	<i>Professional Director</i>
Dr Samantha Murton	<i>President of the Royal NZ College of General Practitioners, GP</i>

Invited guests may be asked to attend to present to the Assurance Group as requested by the Chair.

## Terms of appointments

Appointments will be initially made until January 2022 unless otherwise determined by the Ministry. The Director General maintains discretion on extension of the Group to continue to fulfil its purpose.

The Ministry will review the composition of the Group as required. The Ministry, in consultation with the Assurance Group, has the ability appoint new member(s) or terminate the appointment of members at any time.

## Meeting Protocol

Assurance Group meetings will be held on a fortnightly basis with video conferencing capabilities. The Assurance Group members are expected to attend the Assurance Group meetings whenever reasonably possible.

The Ministry will provide secretariat and administrative support for the committee meetings. This

will include inviting attendees, arranging conferencing facilities, and developing and circulating agendas, papers, and minutes.

Meeting agendas and relevant papers will be provided to attendees at least two working days before the meeting. Emerging risks or issues may be tabled at the meeting.

### Liability

Members are not liable for any act or omission done or omitted in their capacity as a member, if they acted in good faith, and with reasonable care, in pursuance of the functions of the Assurance Group.

### Confidentiality

Members of the Assurance Group will be privy to confidential and commercially sensitive information. It is expected that all information shared and discussed, including the agenda, material and minutes, are confidential. Members must ensure confidentiality is maintained and documents kept securely. Release of correspondence or papers can only be made with the approval of the Ministry.

Members must ensure that any information acquired or created for Assurance Group consideration is only used for performing duties as a member. Members may not use their knowledge of confidential Assurance Group issues to provide inequitable benefit, gain or advantage to any individual, private or public agency or group.

Members are free to, and are expected to, express their own views within the context of meetings, or the general business of the Assurance Group.

No members will make media statements of any kind on behalf of the Assurance Group unless requested or approved to do so by the Chair.

All Assurance Group related agendas, minutes, emails and other communications are subject to release under the Official Information Act unless otherwise excluded for release under the provisions of that Act.

All requirements relating to confidentiality will apply equally to all members, guests and staff supporting the Group.

### Conflicts of Interest

The Assurance Group will adhere to the Ministry's guidelines on conflicts of interest for advisory groups.

Members should perform their functions in good faith, honestly and impartially and avoid situations that might compromise their integrity or otherwise lead to conflicts of interest. Proper observation of these principles will ensure public confidence in the work of the group is maintained.

Members must complete a written Declaration of Conflict<sup>1</sup> of interest on appointment, irrespective of whether they have a conflict of interest.

Any actual, perceived, or potential conflicts of interest must be disclosed.

Conflicts of interest must also be considered with every agenda item, with the extend of any conflicts assessed and fully documented in the minutes, including action taken to manage the conflict.

### Remuneration

Members of the Assurance Group are entitled to be paid fees for attendance at meetings. The level of attendance fees is set in accordance with Cabinet Office Circular CO (12) 6, Fees framework for members appointed to bodies in which the Crown has an interest.

Members who are employees of the wider State sector are not entitled to be paid fees for Assurance Group business if this is conducted during regular paid work time (ie members cannot be paid twice by the Crown for the same hours).

Fees of \$865 per day may be paid to members who are self-employed or privately employed.

Members are also entitled to be reimbursed for actual and reasonable travelling and other expenses incurred in carrying out their duties, with prior agreement

The expectation is that the standards of travel, accommodation, meals and other expenses are modest and appropriate to reflect public sector norms. Airfares and accommodation where funded should be booked through the Ministry.

### Review

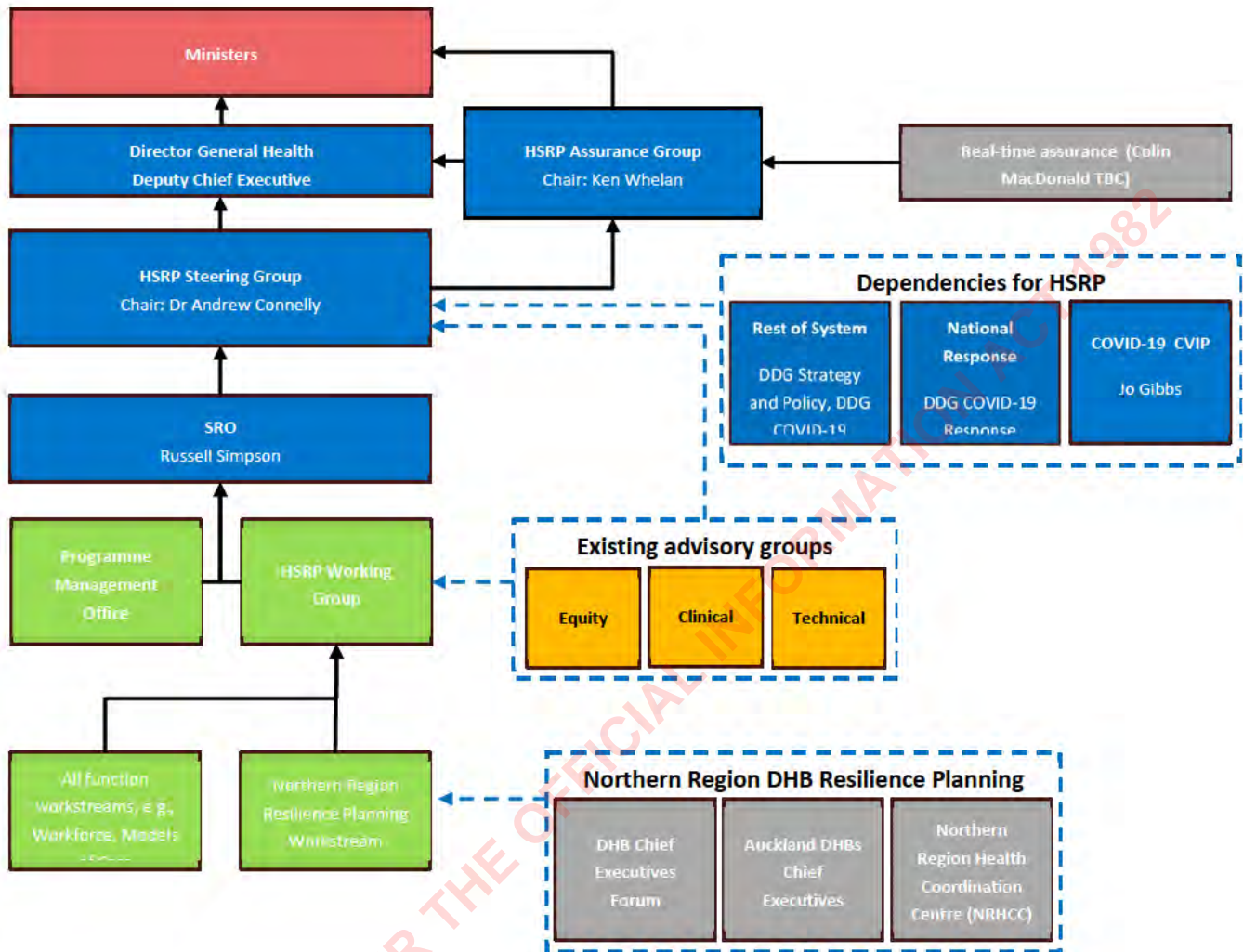
The work and terms of reference of the Assurance Group may be amended, replaced or revoked by the Ministry at any time, and will be reviewed by the Ministry every six months.

The Assurance Group may be disestablished at any time if the duties of the Assurance Group have been fulfilled or it is no longer required.



Conflict of interest  
1 declaration form for

Appendix A: Governance Structure



RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

# **COVID-19 Health System Preparedness Programme (HSPP) Steering Group**

Terms of Reference

November 2021

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982



## Background and context

The World Health Organisation (WHO) declared the outbreak of COVID-19 a pandemic on 11 March 2020. COVID-19 is an infectious disease caused by the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The pandemic has caused extensive global, social and economic disruption.

The *Reconnecting New Zealanders Strategy* acknowledges that as community vaccination rates increase there are more options for managing COVID-19. The public health options change from a reliance on lockdowns and strong border restrictions to include more relaxed border controls targeted to high-risk passengers; broader surveillance programmes; self-isolation models; and more targeted public health interventions at a local and regional level.

The reconnection pathway is unlikely to be linear or one way and there is no set timeline for the shift to the management of COVID-19 as an endemic disease. However, it should be assumed that most future requirements need to be in place prior to the 2021 festive season.

New Zealand needs to be prepared to ensure safe and sustainable healthcare delivery as it reconnects to the world. To achieve this, its health system needs to be more agile, better equipped, more vigilant, and increasingly responsive to the changing threat of COVID-19. In response, the Ministry of Health has established a COVID-19 Health System Preparedness Programme (Health System Preparedness Programme, HSPP).

## Objectives

The key objective of the HSPP is to reduce the effort required by the health system to manage COVID-19 in the community sustainably. The subsidiary objectives in reconfiguring the health system to achieve this are to:

- Keep the number of people who get COVID-19 as low as possible
- Manage people with COVID-19 with the lowest level of appropriate input to meet their needs.

## Purpose

The COVID-19 Health System Preparedness Programme Steering Group (Steering Group) will provide broad strategic direction and make decisions or recommendations on options proposed by the HSPP Programme. It acts as a layer between the Programme, the Senior Responsible Officer, the HSPP Assurance Group, and the Minister of Health.

## Structure

The Steering Group reports to the Director-General of Health. The Steering Group prepares and advises on options before they are presented to the Director-General of Health for decision-making. The Steering Group takes strategic advice from existing Ministry of Health Advisory groups.

The Steering Group will sit above the HSPP Advisory Group. The Advisory Group will escalate issues and decisions to the Steering Group.

A more detailed explanation of the HSPP governance structure is outlined in Appendix A.

## Te Tiriti o Waitangi

The Steering Group will ensure their advice is provided within the context of honouring Te Tiriti o Waitangi.

The principles of Te Tiriti o Waitangi, as articulated by the Courts and the Waitangi Tribunal provide the framework for how the Ministry will meet its obligations under Te Tiriti o Waitangi. The Steering group must apply and adhere to these principles when providing advice:

- **Tino rangatiratanga**

The guarantee of tino rangatiratanga, which provides for Māori self-determination and mana motuhake. This means ensuring Māori are part of decision-making process in regard to the design, delivery and monitoring of the Health System Preparedness Programme.

- **Equity**

The principle of equity, which requires a commitment to achieving equitable health outcomes for Māori. This means the Steering Group will actively ensure equitable access to healthcare and equitable outcomes for Māori as part of the design and delivery of the HSPP.

- **Active protection**

The principle of active protection, which requires the health system to achieve equitable health outcomes for Māori the fullest extent practicable. This means the Steering Group utilises data, evidence and resources to actively identify and address inequities in regard to healthcare delivery and the protection of Māori health and wellbeing.

- **Options**

The principle of options requires there to be properly resourced kaupapa Māori health and disability services. Furthermore, the Crown is obliged to ensure that all health and disability services are provided in a culturally appropriate way that recognises and supports the expression of hauora Māori models of care.

- **Partnership**

This requires the Crown and Māori to work in partnership in the steering, design, delivery and monitoring of health and disability services. This means ensuring appropriate Māori representation on the Steering Group, as well as, ensuring the Steering Group are partnering with Māori in the design, delivery and monitoring advice they provide for the HSPP.

## Membership

The Steering Group membership contains senior subject matter experts from the Ministry and strategic partners. Members are selected and appointed directly by the Director-General of Health. Members are expected to contribute their own expertise, perspectives, and advice on the practical implementation of the HSPP.

Consideration has been given to include Māori and Pacific representation and tino – rangatiratanga (Māori self-determination) when appointing members.

The Steering Group is chaired by Dr Andrew Connolly and will comprise of these members:

Member	Role/Representation
Russell Simpson	<i>SRO, Chief Executive - Whanganui DHB</i>
Dr Andrew Connolly	<i>Chief Medical Officer</i>
Robyn Shearer	<i>Deputy Chief Executive, Sector Support, and Infrastructure</i>
Bridget White	<i>Acting Deputy Chief Executive, COVID-19 Health Response</i>
Fergus Welsh	<i>Chief Financial officer</i>
Shayne Hunter	<i>Deputy Director General, Data &amp; Digital</i>
Caroline McElnay	<i>Director of Public Health</i>
Nick Blakley	<i>Deputy Chief Executive, Ministry of Social Development</i>
Lil Anderson	<i>Chief Executive, Te Arawhiti</i>
Colin MacDonald	<i>Observer (member of Assurance Group)</i>

Invited guests may be asked to attend to present to the Steering Group as requested by the Chair.

### Terms of appointments

Appointments will be initially made until 30<sup>th</sup> June 2022 unless otherwise determined by the Ministry. The Director General maintains discretion on extension of the Group to continue to fulfil its purpose.

The Ministry will review the composition of the Group as required. The Ministry, in consultation with the Assurance Group, has the ability appoint new member(s) or terminate the appointment of members at any time.

### Meeting Protocol

Steering Group meetings will be held on a weekly basis with video conferencing capabilities. The Steering Group members are expected to attend the Steering Group meetings whenever reasonably possible.

The Ministry will provide secretariat and administrative support for the committee meetings. This will include inviting attendees, arranging conferencing facilities, and developing and circulating agendas, papers, and minutes.

Meeting agendas and relevant papers will be provided to attendees at least two working days before the meeting. Emerging risks or issues may be tabled at the meeting.

### Liability

Members are not liable for any act or omission done or omitted in their capacity as a member, if they acted in good faith, and with reasonable care, in pursuance of the functions of the Steering Group.

### Confidentiality

Members of the Steering Group will be privy to confidential and commercially sensitive information. It is expected that all information shared and discussed are confidential. Members must ensure confidentiality is maintained and documents kept securely. Release of correspondence or papers can only be made with the approval of the Ministry.

Members must ensure that any information acquired or created by the Steering Group consideration is only used for performing duties as a member. Members may not use their knowledge of confidential Steering Group issues to provide inequitable benefit, gain or advantage to any individual, private or public agency or group.

Members are free to, and are expected to, express their own views within the context of meetings, or the general business of the Steering Group.

No members will make media statements of any kind on behalf of the Steering Group unless requested or approved to do so by the Senior Responsible Owner.

All Steering Group related agendas, minutes, emails and other communications are subject to release under the Official Information Act unless otherwise excluded for release under the provisions of that Act.

All requirements relating to confidentiality will apply equally to all members, guests and staff supporting the Group.

### Conflicts of Interest

The Steering Group will adhere to the Ministry's guidelines on conflicts of interest for advisory groups.

Members should perform their functions in good faith, honestly and impartially and avoid situations that might compromise their integrity or otherwise lead to conflicts of interest. Proper observation of these principles will ensure public confidence in the work of the group is maintained.

Members must complete a written Declaration of Conflict<sup>1</sup> of interest on appointment, irrespective of whether they have a conflict of interest.

Any actual, perceived or potential conflicts of interest must be disclosed.

Conflicts of interest must also be considered with every agenda item, with the extent of any conflict/s assessed and fully documented in the minutes, including action taken to manage the conflict.

### Review

The work and terms of reference of the Steering Group may be amended, replaced or revoked by the Ministry at any time, and will be reviewed by the Ministry six monthly.

The Steering Group may be disestablished at any time if the duties of the Steering Group have been fulfilled or it is no longer required.



Conflict of interest  
1 declaration form for

Appendix A: Governance Structure

HSPG Governance Structure



RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Declaration Form

### Candidates for Committees, Boards, Advisory groups

**Name :**

**Committee / Board / Advisory group :**

**Responsible Ministry Manager :**

---

To ensure the Ministry of Health can act with integrity and transparency, all members / candidates for committees, boards or advisory groups are required to identify and declare any actual, potential or perceived conflicts of interest that may impact on their role.

---

#### Declaration

If you are aware of any actual, potential or perceived conflicts you must discuss this with the relevant Chairperson and / or responsible manager and complete a standard Ministry of Health Conflict of Interest Declaration in addition to this declaration.

Any breach of the Ministry's Conflicts of Interest rules and guidelines will be a breach of your obligations to the Ministry.

1	I have read and understand the Ministry of Health Conflicts of Interest rules and guidelines and related material	<b>Yes/No</b>
2	I have no interests that would potentially impact on my obligations to the Ministry in the role applied for	<b>Yes/No</b>
3	I will notify the manager of any actual, potential or perceived conflicts of interest that may arise, or that I become aware of, while I am a member of the committee, board or advisory group	<b>Yes/No</b>

---

Member / Candidate  
(name)

---

(Signature)

---

(Date)

This declaration needs to be given to the Ministry manager responsible for the Board, Committee or Advisory group.

### Daily Information Update

HSIU number	# 018
Date/time	Thursday 3 February 2022 @ 1500 hrs
DHB Info Current as at	Wednesday 2 February 2022 @ 2359 hrs
Next HSIU	Friday 4 February 2022 @ 1500 hrs

#### 1. Update – Impact on Key Services

Information regarding the number of Planned Care cancellations will be updated in the Daily Information Update on [Friday 4 February 2022](#).

#### 2. Update – Daily Hospital Situation

As at 2359hrs on Wednesday 2 February 2022, the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [64.8%](#), with [14.1%](#) of ventilators in use (see Appendix 1).

#### 3. Update - Health System Preparedness Programme (HSPP)

##### Primary care preparedness

The team will be presenting on the self-management pathway for Care in the Community today, to an expected health sector audience of over 2,000 people at the Goodfellow webinar.

A series of hui are being scoped with MSD to engage with iwi and Pacifica on the Omicron response plan and implications for Care in the Community in their communities.

##### Regional Hubs/Coordination

Regional hubs are providing coordination to the COVID-19 response of the DHBs in their region. The regional hubs have a daily meeting which is attended by the programme. These meetings provide a collaborative forum to share best practise between the regions, as well as escalation of issues to the Ministry. The Ministry provides support to the regions to resolve issues that require a central approach, including technical, policy and funding issues.

Examples of issues that were resolved through the regional forum are:

- Lack of suitable supported isolation accommodation in Northland was escalated to the Regional Hub, and within 48 hours 60 campervans had been procured and on the road to Northland, to be managed by local Iwi.
- Following escalation by Tairāwhiti DHB regarding their local capacity for ICU, a regional ICU clinical forum was held and support agreed by Te Manawa Taki ICUs for any regional ICU struggling with capacity. The regional hub will provide centralised ICU demand/capacity monitoring for the regional Chief Operating Officers and duty managers.
- Following escalation by Taranaki DHB about their local PHU capacity, the Medical Officer of Health on-call roster was supplemented with other PHU staff from across the region.

#### DHB Resurgence Planning Update

Following on from the update on [Tuesday 1 February 2022](#), the current state is as follows:

- a. An amended checklist focussed on Omicron preparedness was sent to District Health Boards for completion last week.
- b. The Ministry expect all completed checklists returned from District Health Boards by close of business Friday 4 February 2022.
- c. The Ministry will collate the data received from the completed checklists, to establish a new baseline for COVID-19 preparedness.
- d. Preliminary analysis of some early returns show a significant increase in preparedness.
- e. The Ministry will be working closely with the regions to identify individual DHB challenges and how they can resolve their challenges with COVID-19 preparedness.
- f. The Ministry will liaise with the Minister's office with regards to the new preparedness baseline and on-going reporting requirements and approach on DHB Resurgence Planning.

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

#### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield,  
Director-General of Health | Ministry of Health officials



## Daily Information Update

HSIU number	# 019
Date/time	Friday 4 February 2022 @ 1500 hrs
DHB Info Current as at	Thursday 3 February 2022 @ 2359 hrs
Next HSIU	Tuesday 8 February 2022 @ 1500 hrs

### 1. Update – Impact on Key Services

An estimated total of 91,615 COVID-19 related cancellations were reported by district health boards between 17 August 2021 – 30 January 2022. Of these, 8,748 were planned care interventions and 48,232 were First Specialist Assessment (FSA) or follow up events. The remaining cancellations include other inpatient, outpatient, radiology, and endoscopy appointments (See Appendix 2).

Information regarding the number of Planned Care cancellations will next be updated in the Daily Information Update on Friday 11 February 2022.

### 2. Update – Daily Hospital Situation

As at 2359hrs on Thursday 3 February 2022, the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 66.8%, with 15.5% of ventilators in use (see Appendix 1).

### 3. Update - Health System Preparedness Programme (HSPP)

#### National accommodation service

Communications on first phase of the national alternative accommodation service are being provided to the sector today. From next week, public health units and care coordination hubs can receive support from the alternative accommodation service.

#### Digital tools to support self-isolation

Several tools that make up the digital self-service model were delivered this week. The full complement of self-service tools is planned to be available on 17 February 2022. The sector received communication about the digital tools and upcoming training today.

#### Regional Hubs/Coordination

Regional hubs are providing coordination to the COVID-19 response of the DHBs in their region. The



regional hubs have a daily meeting which is attended by the programme. These meetings provide a collaborative forum to share best practise between the regions, as well as escalation of issues to the Ministry. The Ministry provides support to the regions to resolve issues that require a central approach, including technical, policy and funding issues. An example of an issue that was resolved through the regional forum is:

- The Southern regional hub is working with the University of Otago to source students for health placements.

#### DHB Resurgence Planning Update

Following on from the update on [Tuesday 1 February 2022](#), the current state is as follows:

- a. An amended checklist focussed on Omicron preparedness was sent to District Health Boards for completion last week.
- b. The Ministry has received completed checklists from all District Health Boards.
- c. The Ministry will collate the data received from the completed checklists, to establish a new baseline for COVID-19 preparedness.
- d. Preliminary analysis of some early returns shows a significant increase in preparedness.
- e. The Ministry will be working closely with the regions to identify individual DHB challenges and how they can resolve their challenges with COVID-19 preparedness.
- f. The Ministry will liaise with the Minister's office with regards to the new preparedness baseline and on-going reporting requirements and approach on DHB Resurgence Planning.

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

Appendix 2 – COVID-19 related cancellations: 30 January 2022

#### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield,  
Director-General of Health | Ministry of Health officials

# COVID-19

## Work programme for implementation of Public Health operational changes to respond to Omicron

KEY: PUBLIC HEALTH OPERATIONS GROUP (PHOG) COVID-19 EQUITY (EQ) CONTACT TRACING & CASE INVESTIGATION (NITC) BORDER/MQI (B&M) TESTING (T&S) CARE IN THE COMMUNITY (CinC) COMMUNICATIONS (Comms) POLICY (P)

### Overview of recent progress

- Cabinet announced on 4 April 2022 that New Zealand will remain at the Red setting of the COVID-19 Protection Framework for a further 10 days.
- Operational changes to NCTS mean people testing positive for a second time within 28 days of the first result will not be considered a new case. Work is ongoing with updating clinical guidance relating to reinfection.
- An interim solution has been created and operationalised for bulk uploading of RATs in settings where this is necessary, e.g., ARC facilities.
- On 25 March, the New Zealand Traveller Declaration (NZTD) System Tranche 1 went 'live'. From 31 March, the NZTD is the only approved and available system for travellers to make a declaration and receive a traveller pass to enter New Zealand.
- Cabinet has agreed to bring forward reopening for Australians to align with Step 3 from 11:59pm 12 April, and visa-waiver travellers and existing holders of valid visitor visas from 11:59pm 1 May.
- The Māori provider distribution channel (MPDC) have distributed 8 million RATs to over 1000 community partners (Māori providers, marae, kura kaupapa, Kohanga Reo, MSD Community Connectors, Pacific providers and disability sector) all over the country.

### Key upcoming activities

- The COVID-19 Assessment Committee will meet on Monday 11 April 2022, to undertake an assessment of the traffic light settings. Simultaneously, Ministry officials will assess isolation periods.
- Following this, Cabinet will review the traffic light settings and isolation periods on 14 April 2022.
- The Ministry and the Border Executive Board (BEB) are progressing work on ensuring the maritime border settings are in alignment with evolving public health settings (across three tranches).
- There continues to be a targeted effort to attract more Māori, Pacific and disability sector providers to increase the coverage for supervised RATs for priority populations.
- Ongoing engagement and subsequent implementation of the Testing Plan (COVID-19 Omicron post peak).

Component	Critical activities	Action	Due Date	Status	Progress	Responsible Group(s)
ENABLERS	<i>Case Investigation and Contact Tracing model in light of Omicron</i>	Develop a strategic approach for Public Health Units (PHUs) as the outbreak progresses, including what comes after the peak	8 APRIL		A feedback session was held on 31 March to receive feedback on the draft post-peak plan, and a final plan is to be completed by 8 April. The two main streams of the plan are: <ul style="list-style-type: none"> <li>maintain readiness to respond</li> <li>eliminate inequitable outcomes.</li> </ul>	PHOG
		Developing a workplan to ensure people with disabilities are better served through contact tracing	15 APRIL		A process is being developed to integrate Deaf Relay NZ with call providers by 15 April to support and make accessible contact tracing calls to the deaf community.	NITC
		Improvements are being made to enable the uploading of RAT results for settings where an individual may not be able to record these, e.g., Corrections, Aged Residential Care facilities	ONGOING		The NITC have developed an interim process for bulk uploads of RATs and this has been provided to PHUs. Work continues on establishing a permanent technical solution to streamline this for settings who need to provide RAT results in bulk.	NITC
		Work with key stakeholders to establish public health approach for outbreaks in specific settings	ONGOING		Guidance under development or review: <ul style="list-style-type: none"> <li>work is ongoing on a process to support RSE workers and employers</li> <li>a review of priority exposure events is underway.</li> </ul>	PHOG
	<i>Care in the Community readiness</i>	Regional desktop reviews	30 APRIL		The reviews commenced on 24 March 2022 and are expected to be completed by the end of April 2022. Reviews for Northern and Southern regions have been completed with the remaining two regions on track to be completed in the coming weeks.	CinC
		Update on the Testing Plan (COVID-19 Omicron post peak) (HR20220542 refers)	7 APRIL		The Update on the Testing Plan (COVID-19 Omicron post peak) (HR20220542 refers) paper has been updated following feedback from the DG on 4 April. To be submitted to MO 7 April.	T&S
	<i>Implementation of Rapid Antigen Testing (RATs) in New Zealand</i>	Actions to improve PCR follow-up for whole genome sequencing (WGS) and address variation across the laboratory network	8 APRIL		Memo was provided to the DG on 5 April, with information on actions underway to improve PCR follow-up for Whole Genome Sequencing and to address variation across the laboratory network. Following feedback, amendments are required, and a revised version is underway.	T&S
		Proposal to amend COVID-19 Public Health Response (Self-isolation Requirements and Permitted Work) Order 2022 following review (HR20220520)	8 APRIL		Paper proposes changes to the Self Isolation and Permitted Work Order, to provide additional clarification on testing requirements. Aim is for Order to be in place by 8 April.	T&S
		Pilot of COVID-19 Saliva (Lollysponge) test	1 MAY		Small pilot program to assess if the less-invasive lollipop tests would be an appropriate PCR testing alternative for New Zealanders living with disabilities that make it difficult for them to take a regular PCR test.	T&S
		Onboarding community providers who support priority populations	ONGOING		The Māori provider distribution channel (MPDC) have distributed 8 million RATs to over 1000 community partners (Māori providers, marae, kura kaupapa, Kohanga Reo, MSD Community Connectors, Pacific providers and disability sector) all over the country. There continues to be a targeted effort to attract more Māori, Pacific and disability sector providers to increase the coverage for supervised RATs for priority populations.	T&S
Further support of access to RATs for people with disabilities		ONGOING		Engagement and co-design workshops with providers from the Disability Sector are being undertaken to understand some of the key barriers/issues around testing, and how to further support access to RATs.	T&S	
Authorisation of RATs		ONGOING		An 8-point Disability Action plan has been developed on the back of stakeholder engagement. This is now live and key focus areas include Assisted Channel, Supervised Testing, RATs coverage.	T&S	
Assisted pathways to report RAT results and request RATs	ONGOING		As at 1 April, 13 RATs are currently authorised for use. 9 devices are undergoing technical review. Total of 94 applications are at various stages of the evaluation process (including RATs and other POCT devices) noting that multiple applications can be made for the same device.	T&S		
Regulatory changes to POCT Order for 2022	APRIL (TBC)		Assisted pathways to Report RAT Results and Request RATs: call volumes are reducing but not at any significant level. The demand for Targeted Rural service has increased slightly but remains at a manageable level. Some minor issues reported regarding the Interactive Voice Recognition (IVR) which were investigated but no technical fault was found. We will be simplifying the IVR menus over the next couple of days as some of the deflection messages are no longer necessary.	T&S		
		Revisions underway following engagement with policy and legal.			T&S	







RELEASED UNDER THE OFFICIAL INFORMATION ACT

# COVID-19

## Document 4 Omicron work programme As at 6 April 2022

### Work programme for implementation of Public Health operational changes to respond to Omicron

KEY: PUBLIC HEALTH OPERATIONS GROUP (PHOG) COVID-19 EQUITY (EQ) CONTACT TRACING & CASE INVESTIGATION (NITC) BORDER/MQ (B&M) TESTING (T&S) CARE IN THE COMMUNITY (CinC) COMMUNICATIONS (Comms) POLICY (P)



Component	Critical activities	Action	Due Date	Status	Progress	Responsible Group(s)
<b>ENABLERS CONT.</b>  	<b>Implementation of Rapid Antigen Testing (RATs) in New Zealand</b>	Options for funded supervised testing by community pharmacies beyond April 4 (HR20220564)	TBC		Briefing with options and associated funding implications for funded supervised rapid antigen testing by pharmacies following discontinuation of My Vaccine Pass was provided to the Minister on 4 April. Confirmation is being sought re: the Minister's preferred option.	T&S
		Review of equity response to COVID-19 (commissioned research)	JUNE 2022		Phase I completed. Phase II in project planning stage, interviews with individuals and service providers to commence shortly with completion date end of June 2022.	EQ
	<b>Equity</b>	COVID-19 Directorate Equity review project	13 MAY		Interviews with senior management and leadership nearing completion, survey of COVID-19 Directorate closed. Report to be written. Aimed for completion mid-May 2022.	EQ
		Refine Māori and Pacific Weekly Trends & Insights Report	ONGOING		Permission granted for a public version alongside the restricted version of weekly reports from the DG. These will be made available from this week to enable access to Māori and Pacific data for communities.	EQ
		Equity Impact Assessment to inform Omicron Response	TBC		Further inputs required. To be further updated	EQ
<b>DISTRIBUTION METRICS AND REPORTING</b>  	<b>Implementation of Rapid Antigen Testing (RATs) in New Zealand</b>	Access to RATs for people living in rural areas	ONGOING		The targeted rural service is now live (28 March), and 122 orders have been received (representing 446 people). Access to this service is through the Assisted Channel.	T&S
		Purchases placed, negotiation of delivery schedule, distribution to community providers, GPs, DHBs	ONGOING		A total of 84.4 million RATs are on order to end of June, with 37 million confirmed for delivery to end of April. There are 40.7 million RATs in central stock (data as at 6 April).	T&S
		RATs ordering for distribution at CTCs and collection sites	ONGOING		RAT Requestor system for ordering RATs (for individuals and households as well as critical workers) is in use nationwide. 4,448 orders (representing 16,516 people) were placed on 5 April (please note that this number does not include people who have accessed RATs via workplaces, and community providers).	T&S
<b>GUIDANCE</b>  	<b>Implementation of Rapid Antigen Testing (RATs) in New Zealand</b>	COVID-19 Testing Guidance for the health sector	13 APRIL		Revision of COVID-19 Testing Guidance for the health sector - positive RAT enables immediate clinical management for symptomatic people.	T&S
		Operational guidance for Targeted Rural Service of Rapid Antigen Tests	21 APRIL		Operational guidance for Targeted Rural Service of Rapid Antigen Tests - RATs delivery service to people who are immunocompromised or significantly impaired, and cannot access RATs any other way, service offered through the assisted channel and delivery through community providers.	T&S
		Community Residential Care facilities testing guidance	ONGOING		Community Residential Care facilities testing and isolation guidance has been updated, for incorporation into the wider national Public Health Guidance for Disability Residential Service Providers.	T&S
	<b>Case Investigation and Contact Tracing model in light of Omicron</b>	Development of advice leading to the creation of a public health work programme to support Ministry preparedness in responding to non-COVID-19 infectious disease incursions and outbreaks as the border reopens	8 APRIL		PHOG is leading the development of advice and working across the Ministry to develop a proposal which will create a new public health work programme. A memo was submitted to the DG on 1 April, and a noting memo will be prepared for Ministers in early April.	PHOG
		Briefing on the Future of Contact Tracing and Lessons Learnt	11 APRIL		Drafting of this advice is in progress, and will be provided to Associate Minister of Health, Hon Dr Ayesha Verrall by 11 April.	NITC
		Briefing on Reporting on Omicron response performance measures	13 APRIL		Drafting of advice is in progress, due to Ministers week beginning 11 April.	NITC
		Update of Guidance for critical workers who are COVID-19 cases	ONGOING		<ul style="list-style-type: none"> <li>Public health advice on this topic has been developed and is being finalised.</li> <li>Guidance for critical services is in the process of being developed.</li> <li>A process for managing exemptions is being developed.</li> </ul>	NITC
<b>COMMUNICATIONS &amp; ENGAGEMENT</b>  	<b>Implementation of Rapid Antigen Testing (RATs) in New Zealand</b>	Regular updating of key messages and RATs web page	ONGOING		RATs web page and key messages updated, with further updates for post-peak in preparation. Engaging with DPMC to ensure joined up messaging and guidance, including translation. Updating other MoH pages with new/changed advice. Draft content supplied to MBIE for LAMP PR.	T&S Comms
		<b>Care in the Community readiness</b>	Set up contact line for disabled people if their carer/support worker tests positive for COVID-19 or has to isolate as a precaution	22 APRIL		The go-live of the service has been delayed due to development progress issues which are being worked through.

# COVID-19

## Document 4 Omicron work programme As at 6 April 2022

### Work programme for implementation of Public Health operational changes to respond to Omicron

KEY: PUBLIC HEALTH OPERATIONS GROUP (PHOG) COVID-19 EQUITY (EQ) CONTACT TRACING & CASE INVESTIGATION (NTC) BORDER/MIQ (B&MI) TESTING (T&S) CARE IN THE COMMUNITY (CnC) COMMUNICATIONS (Comms) POLICY (P)

Component	Critical activities	Action	Due Date	Status	Progress	Responsible Group(s)
<b>DIGITAL PATHWAYS AND ENABLERS</b>  	<b>Implementation of Rapid Antigen Testing (RATs) in New Zealand</b>	Develop additional functionality in Healthlink on reporting RAT results by GPs	30 MARCH	<span style="background-color: #4CAF50; color: white;">ON TRACK</span>	Development work complete to send text messages with RAT results when GPs report via Healthlink, and to copy self-reported and GP RATs positive results to the enrolled GP, for release evening 30 March.	T&S
		Develop Eclair RAT Catcher (developed solution alternative to Eclair RAT Reporter) for health providers, to support processing of multiple RATs at once and result reporting via mobile device	22 APRIL	<span style="background-color: #FF9800; color: white;">AT RISK</span>	Planned progressive rollout commences early April. Implementation and change plan has been developed to onboard new users and migrate targeted existing users from Eclair. Technical infrastructure issues also being worked through as they arise.	T&S
		Develop form for providers to report unsupervised test results	30 APRIL	<span style="background-color: #4CAF50; color: white;">ON TRACK</span>	Forms in development for ESR RAT Reporter and GP Form via Healthlink, to allow providers to report unsupervised results 'on behalf of' the health consumer.	T&S
		Eclair RAT Reporter for health providers to report supervised RAT Results	ONGOING	<span style="background-color: #4CAF50; color: white;">ON TRACK</span>	This work is being undertaken in an iterative way across the DHB regions where possible. Eclair RAT Reporter guidance for Organisations has been updated.	T&S
		Develop Eclair RAT reporter for third parties (bulk upload)	TBC	<span style="background-color: #FF9800; color: white;">AT RISK</span>	NITC is leading the development of a solution to enable clinical third parties to report RAT results of their workers in bulk, with flags to indicate whether existing MoH systems should be activated (e.g., whether wraparound clinical care is required). Interim solution and full solution being developed in parallel. Business rules and scope being worked through as to which types of organisation will be offered bulk upload of results. Interim solution currently in place.	T&S
<b>HSPB</b>  	<b>Reconnecting New Zealanders Steps 3+</b>	Future RNZ steps	ONGOING	<span style="background-color: #4CAF50; color: white;">ON TRACK</span>	Work is underway to consider future health settings and strategies. Advice to the Minister for COVID-19 Response, Hon Chris Hipkins on border impacts has been delayed until wider strategic pieces are confirmed, in order to future-proof border decisions.	B&MI
	<b>Maritime Border</b>	Update current maritime settings to align more closely with air border	13 APRIL	<span style="background-color: #4CAF50; color: white;">ON TRACK</span>	Urgent policy work was undertaken to review the existing settings at the maritime border, with agreed settings now being drafted into updated legislation. Implementation of these changes will take place on 13 April.	B&MI
		Future maritime border	ONGOING	<span style="background-color: #4CAF50; color: white;">ON TRACK</span>	BEB is leading the development of a strategy to reopen the maritime border, with MoH providing support and public health advice. BEB has considered advice from border agencies and will be progressing advice to the Minister for COVID-19 Response, regarding reopening timeframes.	B&MI
	<b>Future of MIQ facilities</b>	Support system changes in MIQ relevant to domestic response	ONGOING	<span style="background-color: #4CAF50; color: white;">ON TRACK</span>	MoH is continuing to work with MBIE on drafting instructions to PCO for changes to Clause 29 of the Self-Isolation and Permitted Work Order. This relates to ensuring that MIQ facilities have both the capability and the capacity to support community cases and to clarifying the process for transfer.	B&MI
		Future use of MIQ facilities	ONGOING	<span style="background-color: #4CAF50; color: white;">ON TRACK</span>	Work continues to support MBIE with the winding down of MIQ facilities. Currently MoH is working to redeploy clinical equipment from decommissioned facilities. The MIQ team is hosting a series of 'lessons learned' workshops with MIQ health leads over the next week. Topics covered include workforce recruitment and training, model of care, resources, IT, clinical equipment, guidance documents and SOPs, clinical oversight, and inter-agency relationships.	B&MI

### Activities to support work programme

Business Group	Critical activities	Action	Progress
<b>COVID-19 Operations</b>	Ensuring understanding of how Omicron is being managed	The Science, Surveillance & Insights Group prepared a Health report for Ministers Hipkins and Verrall, copied to Ministers Little, Henare and Sio, on the overarching approach to COVID-19 surveillance as we move through the peak and beyond. This was provided Friday 25 March 2022.	The Science, Surveillance and Insights team are progressing priorities for COVID-19 Surveillance in the context of the Omicron wave and post peak. In addition to the Surveillance Strategy (Dec 2021) there are activities required particularly around WGS, wastewater and prevalence estimation. Updates will be provided on an ongoing basis.
	Clinical guidance relating to reinfection	NITC, the Office of the Director of Public Health, IMT Response and Clinical teams are working to update clinical guidance relating to reinfection.	<ul style="list-style-type: none"> <li>The public health advice has been confirmed by the Director of Public Health.</li> <li>Work is progressing for a proposed staged all of government approach to exemptions for critical workers.</li> <li>Advice on the operationalisation of this approach to exemptions has been finalised.</li> </ul>
	Equity	Oversight Disability Group	COVID Disability Oversight group meet weekly to capture the work that is happening across the Ministry to address COVID disability priorities. External organisations involved with disability, e.g., ACC, TAS to be invited to the weekly meeting so we get a better understanding of how they work and manage/make impacts with their mahi for the disability community with the COVID related work they do.

### Daily Information Update

HSIU number	# 021
Date/time	Wednesday 9 February 2022 @ 1500 hrs
DHB Info Current as at	Tuesday 8 February 2022 @ 2359 hrs
Next HSIU	Thursday 10 February 2022 @ 1500 hrs

#### 1. Update – Impact on Key Services

Information regarding the number of Planned Care cancellations was provided last Friday 4 February 2022 and will next be updated in the Daily Information Update on [Friday 11 February 2022](#).

#### 2. Update – Daily Hospital Situation

As at 2359hrs on [Tuesday February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **64.1 %**, with **14.8 %** of ventilators in use (see Appendix 1).

#### 3. Update - Health System Preparedness Programme (HSPP)

##### National Alternative Accommodation Service

- An accommodation sourcing service using a third-party provider to directly assist regions to source and secure accommodation was established on 8 February 2022. The next phase will be to centralise the overall process and agree on the provision of funding (subject to Cabinet decisions in March 2022).
- Advice is being developed on how the care coordination hubs may consider allocating accommodation at a local and regional level.
- The option of campervans is still available to regions that may wish to use it. To date, we have deployed 14 campervans. We have a total available pool of 125 campervans ready to deploy across the country, with a capacity of 2-6 people.

##### Update on Regional Hubs/Coordination

- Regional hubs are providing coordination to the COVID-19 response of the DHBs in their region.
- A Central Region care coordination hub hui was held on 3 February 2022 at MidCentral DHB. Overall, the sentiments were that the Central Region is currently well prepared to respond to an increase of COVID-19 cases in its region. However, this will be tested once case numbers increase.
- Work is underway to provide DHBs and regions further guidance on the approach to the use of Rapid Antigen tests.
- We aware that there are issues on the ground with PHUs and DHBs not working well together. In addition, there are some regions, where the relationship with iwi and Māori providers could be

strengthened. We are in regular contact with the PHU, DHB and the Regional Leadership Group to support more regional and local problem solving.

- We are seeing an increase in regions establishing Māori-led coordination hubs which will help ensure local responses are equity focussed and meet local needs. There is the Māori Regional Coordination Hub in Auckland, and four iwi-led hubs in the Whanganui region.

#### Digital tools to support self-isolation

- We are currently working on rolling out a range of self-service technology solutions that will support the majority of people who contract COVID-19, and enable the health system to focus its resources on those people who have the highest clinical risk.
- Two of the digital tools that have been developed to support the self-service model are due to go live today:
  - Patient online self-service contact tracing.
  - Patient self-declaration of clinical risk factors.

#### Pulse Oximeters

- To support clinical care, an additional ~20,000 pulse oximeters have been ordered, with the view to bring the total national stock to 50,000 pulse oximeters.
- We are aware that at the moment the care coordination hubs are issuing pulse oximeters to most COVID-19 positive cases due to an abundance of caution rather than based on a clinical risk assessment. It is a local decision for hubs and individual clinicians to determine whether an individual/ household will receive a pulse oximeter.

#### DHB Resurgence Planning Update

- A first cut analysis of the updated DHB resurgence planning checklist was included in the daily information updated on [Tuesday 8 February 2022](#).
- The Ministry is meeting with Regional Leads on 10 February 2022 to discuss regional approaches to addressing capacity and capability gaps and the ongoing monitoring of regional preparedness.
- The Readiness Assurance Health Report will be sent to Minister Hipkins, and copied to you, on 11 February 2022.
- Our next steps will include a more detailed analysis on the 10 DHBs that took part in the desktop assessment, and we will work with the regional leads to address and report progress.

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

#### **Distribution List:**



Health System Information Update

Ref: HSIU

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield,  
Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982



## Daily Information Update

HSIU number	# 022
Date/time	Thursday 10 February 2022 @ 1500 hrs
DHB Info Current as at	Wednesday 9 February 2022 @ 2359 hrs
Next HSIU	Friday 11 February 2022 @ 1500 hrs

### 1. Update – Impact on Key Services

Information regarding the number of Planned Care cancellations was provided last Friday 4 February 2022 and will next be updated in the Daily Information Update on [Friday 11 February 2022](#).

### 2. Update – Daily Hospital Situation

As at 2359hrs on [Wednesday 9 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 60.2 %, with 13.8 % of ventilators in use (see Appendix 1).

### 3. Update - Health System Preparedness Programme (HSPP)

#### Care in the Community

- A memo is being prepared for the Director-General on the risk stratification approach for people who are not engaging through the digital self-management process. Note this is separate from the clinical risk assessment that is already in place.
- The Accommodation Guidance on apartments and temporary accommodation that was issued late last year is being reviewed to ensure is relevant for Omicron.

#### Update on Regional Hubs/Coordination

- To ensure consistency and clarity additional guidance will be provided to DHBs on the established national contract supplier and standards that apply for transporting positive cases.

#### Digital tools to support self-isolation

- We are currently working on rolling out a range of self-service technology solutions that will support the majority of people who contract COVID-19, and will enable the health system to focus its resources on those people who have the highest clinical risk. Several digital tools will be delivered next week.



- Four sessions are being held this week with the regions on the self-service technology. At these sessions the sector has opportunity to ask questions and provide input.

#### DHB Resurgence Planning Update

- A first cut analysis of the updated DHB resurgence planning checklist was included in the Daily Information Update on [Tuesday 8 February 2022](#).
- The Ministry is working with Regional Leads to ensure regional approaches to addressing capacity and capability gaps and the ongoing monitoring of regional and DHB preparedness.
- This will include a more detailed analysis on the 10 DHBs that took part in the desktop assessment last year.
- The Readiness Assurance Health Report will be sent to Minister Hipkins, and copied to you, tomorrow 11 February 2022.

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report **Tables** (WORD doc)

#### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 023
Date/time	Friday 11 February 2022 @ 1500 hrs
DHB Info Current as at	Thursday 10 February 2022 @ 2359 hrs
Next HSIU	Monday 14 February 2022 @ 1500 hrs

#### 1. Update – Impact on Key Services

An estimated total of 89,669 COVID-19 related cancellations were reported by district health boards between 15 August 2021 – 6 February 2022. Of these, 8,866 were planned care interventions and 49,451 were First Specialist Assessment (FSA) or follow up events. The remaining cancellations include other inpatient, outpatient, radiology, and endoscopy appointments (See Appendix 2). Note this week's estimated total cancellations are lower than last week's, we are still verifying with the DHBs what has caused this change.

Information regarding the number of Planned Care cancellations will next be updated in the Daily Information Update on Friday 18 February 2022.

#### 2. Update – Daily Hospital Situation

As at 2359hrs on Thursday 10 February 2022, the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 61.9 %, with 15.3 % of ventilators in use (see Appendix 1).

#### 3. Update - Health System Preparedness Programme (HSPP)

##### Care in the Community

- Communications around Care in the Community - isolating at home, are being aligned with the Prime Minister's Office.

##### Update on Regional Hubs/Coordination

- The regions are seeking approval from DHB chief executives on the interim COVID-19 Rapid Antigen Test position.

##### Digital tools to support self-isolation

- We have developed the following new digital tools:
  - Patient on-line self-service contact tracing



Health System Information Update

Ref: HSIU

- Self-declaration of clinical risk factors
- Risk stratification tool
- Text messaging
- Self-reporting of Rapid Antigen Test results.

DHB Resurgence Planning Update

- The Ministry is working with Regional Leads to ensure regional approaches to addressing capacity and capability gaps and the ongoing monitoring of regional and DHB preparedness.
- This will include a more detailed analysis on the 10 DHBs that took part in the desktop assessment last year.
- The Readiness Assurance Health Report will be sent to Minister Hipkins, and copied to you, today 11 February 2022.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (**WORD** doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield,  
Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 024
Date/time	Monday 14 February 2022 @ 1500 hrs
DHB Info Current as at	Sunday 13 February 2022 @ 2359 hrs
Next HSIU	Tuesday 15 February 2022 @ 1500 hrs

### 1. Update – Impact on Key Services

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 11 February, the next update will be provided on [Friday 18 February 2022](#).

### 2. Update – Daily Hospital Situation

As at 2359hrs on [Sunday 13 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 57.1 %, with 12.7 % of ventilators in use (see Appendix 1).

### 3. Update - Health System Preparedness Programme (HSPP)

#### Care in the Community

- The team is preparing input on Care in the Community in Phase II for the webinar that the Director-General will be fronting this week for the sector.

#### Update on Regional Hubs/Coordination

- Some local testing capacity constraints are being resolved through redistribution of tests to laboratories in other areas. It is anticipated that a move to Phase II will help mitigate some of these constraints.
- The regions are working with the team to finalise the embedding of localised care escalation pathways into the COVID-19 online self-service portal.
- The regions are developing reporting on usage of alternative accommodation.

#### Digital tools to support self-isolation

- The following new digital tools are being launched this week:
  - COVID-19 online self-service portal.
  - Cases receiving notification of positive test by text messaging from Tuesday 15 February.



Health System Information Update

Ref: HSIU

**Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield,  
Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 026
Date/time	<a href="#">Wednesday 16 February 2022 @ 1500 hrs</a>
DHB Info Current as at	<a href="#">Tuesday 15 February 2022 @ 2359 hrs</a>
Next HSIU	Thursday 17 February 2022 @ 1500 hrs

### 1. Update – Impact on Key Services

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 11 February, the next update will be provided on [Friday 18 February 2022](#).

### 2. Update – Daily Hospital Situation

As at 2359hrs on [Tuesday 15 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 63.2 %, with 14.8 % of ventilators in use (see Appendix 1).

### 3. Update - Health System Preparedness Programme (HSPP)

#### Care in the Community

- Last night's webinar on Phase Two was attended by over 2000 people from across the health sector and beyond. Many questions were asked around rapid antigen testing. The presentation and the questions and answers will be made available on the Ministry website today.
- Dr Joe Bourne will be attending a media panel today (16 February 2022) at 1pm with Dr Ashley Bloomfield to discuss isolating at home with Omicron. MSD will also be presenting.

#### Update on Regional Hubs/Coordination

- The regions are working with the team to finalise the embedding of localised care escalation pathways into the COVID-19 online self-service portal.
- In response to concerns raised around the reliance on a digital self-assessment tool and the potential implications for equity, a piece of work has been initiated looking at 'assisted channels'. This work will consider those unable to use the technology for various reasons (such as access to internet, technology illiteracy, and visual impairment).

#### Digital tools to support self-isolation



- Cases receiving notification of positive test by text messaging is anticipated to go-live from tomorrow (16 February 2022) morning.
- The Health Hub is anticipated to go-live tomorrow morning (16 February 2022), creating a single authoritative source for close contacts and those diagnosed with Covid-19.

#### Preparedness desktop reviews

- A draft summary report has been completed for the recent DHD Preparedness Checklists and a draft Terms of Reference is in development for a desktop review (similar to last year) focusing on primary and community care.
- A detailed request for information based on the DHB Preparedness Checklists is also being used with each of the 44 local care coordination hubs to further inform the level of preparedness for Phase 2 and 3.

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

#### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982



## Daily Information Update

HSIU number	# 026
Date/time	Wednesday 16 February 2022 @ 1500 hrs
DHB Info Current as at	Tuesday 15 February 2022 @ 2359 hrs
Next HSIU	Thursday 17 February 2022 @ 1500 hrs

### 1. Update – Impact on Key Services

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 11 February, the next update will be provided on [Friday 18 February 2022](#).

### 2. Update – Daily Hospital Situation

As at 2359hrs on [Tuesday 15 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 63.2 %, with 14.8 % of ventilators in use (see Appendix 1).

### 3. Update - Health System Preparedness Programme (HSPP)

#### Care in the Community

- Last night's webinar on Phase Two was attended by over 2000 people from across the health sector and beyond. Many questions were asked around rapid antigen testing. The presentation and the questions and answers will be made available on the Ministry website today.
- Dr Joe Bourne will be attending a media panel today (16 February 2022) at 1pm with Dr Ashley Bloomfield to discuss isolating at home with Omicron. MSD will also be presenting.

#### Update on Regional Hubs/Coordination

- In response to communities iteratively identifying their local needs four additional Care Coordination hubs have been set up in Northland and several in the Waikato.
- The Care Coordination hubs are actively engaged with their regions and the Ministry and feel well supported.

#### Digital tools to support self-isolation

- Tools that are live from today:
  - Cases receiving notification of positive test by text messaging



Health System Information Update

Ref: HSIU

- Rapid antigen test results being able to be captured in MyCovidRecord.
- The Health Hub is anticipated to go-live tomorrow morning (17 February 2022), creating a single authoritative source for close contacts and those diagnosed with COVID-19.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield,  
Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 027
Date/time	Thursday 17 February 2022 @ 1500 hrs
DHB Info Current as at	Wednesday 16 February 2022 @ 2359 hrs
Next HSIU	Friday 18 February 2022 @ 1500 hrs

#### 1. Update – Impact on Key Services

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 11 February, the next update will be provided on [Friday 18 February 2022](#).

#### 2. Update – Daily Hospital Situation

As at 2359hrs on [Wednesday 16 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **63.2 %**, with **15.3 %** of ventilators in use (see Appendix 1).

#### 3. Update - Health System Preparedness Programme (HSPP)

##### Care in the Community

- Last night's webinar for primary care, co-organised with the Royal College of General Practitioners and Streamliners (Health Pathways) was attended by over 1,200 people. The presentations covered updates on the COVID-19 response, vaccinations, medication, Care in the Community, and guidance for critical health workforce testing positive or being close contacts.

##### Update on Regional Hubs/Coordination

- The team is drafting an addendum to the COVID-19 Care in the Community Framework v2.0. The addendum will reflect the changed self-management pathway and clarify roles and responsibilities for the Care Coordination Hubs.
- The update of the framework to version 3 is underway and due to be released in late March.

##### Digital tools to support self-isolation

- Yesterday (16 February) was the largest single day release of digital tools in the programme.
- Some issues occurred with the automatic registration of positive test results in the COVID Clinical Care Module system, which resulted in test results needing to be inputted manually. The automatic system is expected to be up and running today.



Health System Information Update

Ref: HSIU

**Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield,  
Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 029
Date/time	Friday 18 February 2022 @ 1500 hrs
DHB Info Current as at	Thursday 17 February 2022 @ 2359 hrs
Next HSIU	Monday 21 February 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 18 February, the next update will be provided on [Friday 25 February 2022](#).

### 2. Update – Emergency Department Performance

The Emergency Department (ED) performance results from last week (W/E [13 February 2022](#)) showed a deterioration from previous weeks.

ED Presentation numbers have slightly increased from previous weeks – particularly in the northern region with significant weekly increases seen in Counties Manukau and Waitematā DHB. The 18 DHBs (West Coast and Tairāwhiti did not submit data) reported 21,039 ED presentations in the week; this compares with 20,406 in the previous week. Generally, presentations to ED are relatively static each week, except for the periods immediately after the start of lockdowns which reduced volumes, and the 2021 RSV outbreaks, which saw a spike in respiratory presentations nationally.

While presentations remain relatively static, pressures on workforce including additional processing and testing of patients alongside building works (including negative pressure rooms) mean that, broadly, EDs' ability to respond to normal levels of presentations is likely to be constrained. These constraints are likely to escalate with increased patient numbers due to Omicron and we expect waiting times for ED to deteriorate in the coming weeks. DHBs are encouraging patients to seek alternatives to ED, including using after hours centres, primary care and telehealth services.

Performance against the 6-hour target was 76% - down from 78% the previous week and a decrease from the results prior to lockdown (80% in week ending 08 August 2021). This is the second week in a

row that performance has decreased. Although these results fluctuate, this week's result is in large part driven by a decrease in performance in the northern region DHBs' admissions within 6 hours (Auckland DHB -4%; Counties Manukau DHB -11%; Waitematā DHB -14%). Whanganui, South Canterbury, and Hutt Valley DHBs also reported significant decreases in this metric.

Information regarding emergency department performance will next be updated in the Daily Information Update on [Thursday 24 February 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Thursday 17 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 63.9 %, with 15.3 % of ventilators in use (see Appendix 1).

### 4. Update - Health System Preparedness Programme (HSPP)

#### Care in the Community

- We have received feedback from the health sector and disability groups on the Care in the Community model and ensuring that it is accessible for people with disabilities. The team have had several meetings with a range of stakeholders and are developing a plan on how we best capture, support and report on people with disabilities receiving COVID-19 care in the community.

#### Communication and engagement

- The programme's communications team is working to ensure alignment of messaging going out to the sector from across the programme and wider Ministry. They have identified the need to provide broader and more comprehensive communications when engaging with the sector.

#### Update on Regional Hubs/Coordination

Some issues have come to light around communication lines and processes between Public Health Units, DHBs and Care Coordination Hubs. The programme will be working with the Care Coordination Hubs to refine the communication processes.

#### Digital tools to support self-isolation



## Health System Information Update

Ref: HSIU

- The number of people who fill out the online form after receiving a text message notifying them of their positive result is lower than expected. This has resulted in a greater workload for the Care Coordination Hub and Public Health Unit in the Northern region, due to needing to ring people. The team is reviewing the online form to improve usage and ensure a greater number of people will use the digital self-management pathway.
- Yesterday's technical issues with the automatic registration of positive test results in the COVID Clinical Care Module system have been resolved. Other issues with the automated process informing general practitioners of positive cases are expected to be resolved today.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

Appendix 2 – Planned care cancellations Tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield,  
Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 029
Date/time	Monday 21 February 2022 @ 1500 hrs
DHB Info Current as at	Sunday 20 February 2022 @ 2359 hrs
Next HSIU	Tuesday 22 February 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 18 February, the next update will be provided on [Friday 25 February 2022](#)

### 2. Update – Emergency Department Performance

The last update regarding emergency department performance was provided as part of the Daily Information Update on Friday 18 February, the next update will be provided on [Thursday 24 February 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Sunday 20 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 62.6 %, with 16.0 % of ventilators in use (see Appendix 1).

### 4. Update - Health System Preparedness Programme (HSPP)

#### Care in the Community

- The team is working to ensure the Care Coordination Hubs are aware of the narrowed definition for exposure events.
- The team is providing input into the briefing for the visit of Ministers Henare and Sio to the NHRCC in Auckland tomorrow, and the announcement on funding for Māori and Pacific providers.

#### Communication and engagement

- Over the weekend some confusion arose over the availability of rapid antigen tests in primary care, this had been resolved.





Update on Regional Hubs/Coordination

The team will conduct preparedness reviews of the Care Coordination Hubs this week, similar to the DHB preparedness checklists, but focussed on primary and community care.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield,  
Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 030
Date/time	Tuesday 22 February 2022 @ 1500 hrs
DHB Info Current as at	Monday 21 February 2022 @ 2359 hrs
Next HSIU	Wednesday, 23 February 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 18 February, the next update will be provided on [Friday 25 February 2022](#)

#### 2. Update – Emergency Department Performance

The last update regarding emergency department performance was provided as part of the Daily Information Update on Friday 18 February, the next update will be provided on [Thursday 24 February 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Monday 21 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **64.5 %**, with **14.3 %** of ventilators in use (see Appendix 1).

#### 4. Update - Health System Preparedness Programme (HSPP)

##### Care in the Community

- The detailed guidance (appendix to the COVID-19 Care in the Community Framework) for the Care in the Community Hubs (the Hubs) is anticipated to be released by close of business tomorrow. This guidance, developed in collaboration with the with the health sector, will clarify roles, responsibilities, and processes, and be sent directly to the Hubs.

##### Communication and engagement

- A webinar for Pacific providers is being held tomorrow evening, hosted by the Ministry of Pacific Peoples, and the Ministry of Health will attend in support, along with the Ministry of Social Development. The focus will be on providing general information on omicron, the importance on vaccination and boosters, and support systems.



- Dr. Joe Bourne will be presenting today to the disability sector on COVID-19 Care in the Community at a workshop organised by the Ministry.

#### Update on Regional Hubs/Coordination

- The team are undertaking the COVID-19 Care in the Community Hub/Spoke sessions this week. These sessions will provide a high level of understanding and assurance for how each of the hubs/spokes are operating at a local level.

Modelled on the DHB resiliency checklist, these sessions will additionally ascertain the links into the Disability and Older Persons communities, the level of connection and integration of the Ministry of Health Digital and Technology solutions, and gain insight into the processes Hubs are using for escalating patients from the self-management pathways to active management.

It is the intent of the team to have sessions completed this week, the results of which will become a key input into the DHB desktop reviews (focus on primary and community care) beginning next week.

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

#### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 031
Date/time	Wednesday 23 February 2022 @ 1500 hrs
DHB Info Current as at	Tuesday 22 February 2022 @ 2359 hrs
Next HSIU	Thursday 24 February 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 18 February, the next update will be provided on [Friday 25 February 2022](#)

### 2. Update – Emergency Department Performance

The last update regarding emergency department performance was provided as part of the Daily Information Update on Friday 18 February, the next update will be provided on [Thursday 24 February 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Tuesday 22 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **61.5 %**, with **11.5 %** of ventilators in use (see Appendix 1).

### 4. Update - Health System Preparedness Programme (HSPP)

Across the programme the focus is on preparing for Phase 3.

#### Care in the Community

- The team is now working with Ministry of Business, Innovation and Employment on updating the draft Cabinet Paper on the COVID-19 Care in the Community - report back.
- The team is having conversations with General Practice New Zealand and Royal College of General Practitioners on concerns expressed by the New Zealand Medical Association.

#### Communication and Engagement

- While there is positive response from communities of the announcements made yesterday for Māori and Pasifika communities, the team is aware of the risk of confusion for providers about the

number of funding sources available. They are engaging across central agencies to ensure a coordinated response to the requests Te Puni Kōkiri, Ministry of Business, Innovation and Employment, Te Arawhiti and Te Tūāpapa kura Kāinga are receiving from providers.

### Digital tools

- The digital team continues to work at pace on developing and implementing tools in the pipeline for phase 2 and 3.
- Conversations on prioritisation of additional tools is happening.

### Update on Regional Hubs/Coordination

- DHBs/Regions are expressing concerns about their stock of rapid antigen tests running out in the weekend once they need to be used as a diagnostic test. The team has been given assurance that an order of 10 million RATs is due in the country this week and is assuring the sector.
- The team are undertaking the COVID-19 Care in the Community Hub/Spoke sessions this week. These sessions will provide a high level of understanding and assurance for how each of the hubs/spokes are operating at a local level.

Modelled on the DHB preparedness checklist, these sessions will additionally ascertain the links into the Disability and Older Persons communities, the level of connection and integration of the Ministry of Health Digital and Technology solutions, and gain insight into the processes Hubs are using for escalating patients from the self-management pathways to active management.

It is the intent of the team to have sessions completed this week, the results of which will become a key input into the DHB desktop reviews (focus on primary and community care) beginning next week.

### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

## Daily Information Update

HSIU number	# 032
Date/time	Thursday 24 February 2022 @ 1500 hrs
DHB Info Current as at	Wednesday 23 February 2022 @ 2359 hrs
Next HSIU	Friday 25 February 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 18 February 2022, the next update will be provided on [Friday 25 February 2022](#).

### 2. Update – Emergency Department Performance

The Emergency Department (ED) results from last week (W/E [20 February 2022](#)) showed an improvement from the week prior but are still low in comparison to previous weeks.

ED Presentation numbers were slightly down from the week prior with 21,057 presentations (across all 20 DHBs) compared to 21,039 ED presentations in the week prior (which did not include West Coast DHB). Generally, presentations to ED are relatively static each week.

However, pressures on workforce including additional processing and testing of patients alongside building works (including negative pressure rooms) mean that, broadly, EDs' ability to respond to normal levels of presentations is likely to be constrained. These constraints are likely to escalate with increased patient numbers due to Omicron, and we expect waiting times for ED to deteriorate in the coming weeks. DHBs are encouraging patients to seek alternatives to ED, including using after hours centres, primary care and telehealth services.

Performance against the 6-hour target (SSED) was 76% - which was the same as the week prior. Although these results fluctuate, they have been gradually trending downwards since the start of the COVID-19 outbreak in 2020. SSED performance, while being based on ED performance, is an indicator of how the wider health system is performing. For example, if hospital occupancy is high, this will

impact on the ED's ability to admit patients to hospital in a timely manner. Also, if there is constrained access to primary care, more patients are likely to present to ED.

Information regarding ED performance will next be updated in the Daily Information Update on [Thursday 3 March 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Wednesday 23 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **61.1%**, with **11.0%** of ventilators in use (see Appendix 1).

### 4. Update - Health System Preparedness Programme (HSPP)

Across the programme the focus is on preparing for Phase 3.

#### Care in the Community

- The risk stratification tool has been signed out by the Director-General. The team is working to ensure the digital risk stratification tool is available to the Care Coordination Hubs.

#### Communication and Engagement

- The team participated in the Pasifika national fono last night. The fono was convened by the Ministry for Pacific Peoples and chaired by Minister Sio. The key messages were delivered very well.

#### Digital tools

- Self-reporting of Rapid Antigen Tests to My Covid Record has now been enabled.

#### Regional hubs/coordination

- The regional health liaison team is working with each of the 44 local care coordination hubs to assess their current readiness, with 18 of the hubs have been assessed as of yesterday. The remainder of the hubs will be completed by the end of the week. This structured assessment will support targeted desktop reviews with selected DHBs next week to ensure lessons learnt are being shared and that gaps or issues are being resolved at local, DHB, regional or national level. The COVID-19 Chief Executive forum was briefed today and is very supportive of this work.

### Appendices:

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)



Health System Information Update

Ref: HSIU

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield,  
Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982



### Daily Information Update

HSIU number	# 033
Date/time	Friday 25 February 2022 @ 1500 hrs
DHB Info Current as at	Thursday 24 February 2022 @ 2359 hrs
Next HSIU	Monday 28 February 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

An estimated total of 83,207 COVID-19 related cancellations were reported by district health boards between 15 August 2021 – 20 February 2022. Of these, 8,981 were planned care interventions and 43,763 were First Specialist Assessment (FSA) or follow up events. The remaining cancellations include other inpatient, outpatient, radiology, and endoscopy appointments (See Appendix 2). Note: The national number of cancellations reported this week is lower than the number reported last week due to Auckland DHB updating their methodology.

Information regarding the number of Planned Care cancellations will next be updated in the Daily Information Update on [Friday 4 March 2022](#).

#### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided on Thursday 24 February 2022, the next update will be included in the Daily Information Update on [Thursday 3 March 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Thursday 24 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **59.8%**, with **14.6%** of ventilators in use (see Appendix 1).

#### 4. Update - Health System Preparedness Programme (HSPP)

##### Care in the Community

- All of the three new governance groups for the Care in the Community programme had their inaugural meetings this week. The Clinical Advisory Group, a Therapeutics Advisory Committee and the Digital Advisory Group have a membership from across the sector and the Ministry.



## Health System Information Update

Ref: HSIU

- Communication and engagement
- The programme's communications team is experiencing challenges in getting the programme's messaging reflected in the national messaging in a timely way. Some messaging from the DHBs is getting out ahead of national messaging. We are escalating this issue to the Director-General.

Update on Regional Hubs/Coordination

- The regional health liaison team is finalising assessments with each of the 44 local Care Coordination Hubs to assess their current readiness. This structured assessment will support targeted desktop reviews with selected DHBs next week to ensure lessons learnt are being shared and that gaps or issues are being resolved at local, DHB, regional or national level.
- Some general practitioners have raised issues of not receiving communications. We have identified some blockages between PHO and practises, regions are supporting resolving these.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

Appendix 2 – Planned care cancellations Tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield,  
Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 034
Date/time	Monday 28 February 2022 @ 1500 hrs
DHB Info Current as at	Sunday 27 February 2022 @ 2359 hrs
Next HSIU	1 March 2022@ 1500 hrs

#### 1. Update – Impact on Planned Care

The last update on the number of Planned Care cancellations was provided on Friday 25 February, the next updated will be included in the Daily Information Update on [Friday 4 March 2022](#).

#### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided on Thursday 24 February 2022, the next update will be included in the Daily Information Update on [Thursday 3 March 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Sunday 27 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [56.8%](#), with [12.2%](#) of ventilators in use (see Appendix 1).

#### 4. Update - Health System Preparedness Programme (HSPP)

##### General

- Due to the significant increase in COVID-19 positive cases in the community and the impact on the health sector, the programme is reviewing the metrics and improving our intelligence gathering, in order to better understand the wider impacts on the health sector.
- The Assurance Group to the programme is considering its on-going role and function and have provided their preliminary thoughts to the Director General for consideration.

##### Update on Regional Hubs/Coordination

- NHRCC is setting up four urgent care clinics, called hot hubs, to provide care to people with COVID-19. The hot hubs will provide care for COVID-19 and other conditions.



- The delay in the weekend with the automatic case creation in the COVID-19 Clinical Care Module (CCCM) has now been resolved. This was a flow on from the issue last week with delays in processing of rapid antigen tests into the national contact tracing system (NTSC).

#### DHB preparedness planning

- The local Care Coordination Hub assessments have been completed. This week we continue the analysis of the assessments and this will combined with other risk factors inform the selection of DHBs to be involved in the primary and community care desktop review. Regional Leads will be involved in the development of the selection criteria for DHBs.

#### Communications

- The Ministry, NHRCC and DPMC continue to align communication activities to ensure that material is relevant and timely and duplication of effort is minimised. There remains an ongoing challenge of local operational communication needs at times outpacing the dissemination of national communication products.

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

#### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield,  
Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 035
Date/time	Tuesday 1 March 2022 @ 1500 hrs
DHB Info Current as at	Monday 28 February 2022 @ 2359 hrs
Next HSIU	1 March 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update on the number of Planned Care cancellations was provided on Friday 25 February, the next updated will be included in the Daily Information Update on [Friday 4 March 2022](#).

### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided on Thursday 24 February 2022, the next update will be included in the Daily Information Update on [Thursday 3 March 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Monday 28 February 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [65.3%](#), with [13.9%](#) of ventilators in use (see Appendix 1).

### 4. Update - Health System Preparedness Programme (HSPP)

#### General

- HSPP is currently working to revise its daily reporting. We have identified key measures to tell the story of the impact of the omicron outbreak on the system and are creating a template report that will show what information we currently have. As not all data is currently available, placeholders will be utilised for pending information, which will be updated as it becomes available.

#### Data and Digital

- Version 1.3 of the contact tracing form (case self-service) has now been deployed into production. This aims to improve completion rates by simplifying the form, reflective of Phase 3, and reducing the time that it takes to complete it. This includes the following changes:
  - Non-household close contacts are not required as cases are now responsible for notifying potential contacts.

- Cases are no longer asked whether they work at or attend a healthcare or educational facility.
- Cases will only need to enter any high-risk locations they have visited. The list of location types has reduced significantly.
- The form is now submitted before the case uploads their diary and Bluetooth tracing codes.

#### Update on Regional Hubs/Coordination

- Two additional Regional Health Liaisons have started with the Programme (bringing the number to four). These roles are created to liaise at a regional level on key health matters, and enable the locally led, regionally coordinated, and nationally supported delivery model.

#### Care Coordination Hubs Preparedness

- The team completed all structured assessments with the (44) Hubs last week. Initial analysis has been completed with key learnings indicating that the most effective Hubs are those with a truly collaborative model, where no single agency took the lead. A preference for outcome-focused measures where possible over prescription was also identified as these enabled approaches to be tailored to local needs.
- The findings of these reviews will be folded into the regional desktop review process, beginning this coming week.

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

#### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

## Daily Information Update

HSIU number	# 036
Date/time	Wednesday 2 March 2022 @ 1500 hrs
DHB Info Current as at	Tuesday 1 March 2022 @ 2359 hrs
Next HSIU	Thursday 3 March 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update on the number of Planned Care cancellations was provided on Friday 25 February, the next update will be included in the Daily Information Update on [Friday 4 March 2022](#).

### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided on Thursday 24 February 2022, the next update will be included in the Daily Information Update on [Thursday 3 March 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Tuesday 1 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [62.1%](#), with [12.3%](#) of ventilators in use (see Appendix 1).

### 4. Update - Health System Preparedness Programme (HSPP)

#### Engagement and Communication

- On 28 February 2022 the team presented to the South Island Pasifika collective of health and welfare providers on the latest changes to Phase 3 and to walk them through the self-management and supported self-management pathways.
- Pasifika case numbers across the South Island are disproportionately higher than the general population and so the presentation and guidance was well received.
- Further feedback from Pasifika networks today suggests a stronger focus needs to be on practical steps on how people can access support, especially using the digital tools. The team will work with our data and digital and communications teams on delivering sessions with support from the Ministry of Pacific Peoples to deliver this in the next couple of weeks.
- The team are working closely with Oranga Tamariki on their planning to ensure that children and or young people in their care who test positive are well supported to isolate safely. Oranga Tamariki



raised this as a potential issue with increasing cases and the pressure on their provider and caregivers network.

#### Data and Digital

- The online tool *Request a COVID-19 Testing Kit* experienced intermittent issues earlier today due to overload pressures on the platform. These issues have now been resolved.
- The 0800 number is operating and rapid antigen testing orders can be placed on behalf of callers.
- The *Online Contact Tracing Form* (sent via text message to positive cases) is still experiencing intermittent issues. The team are working to resolve these issues as quickly possible.

#### Update on Regional Hubs/Coordination

- The team is following up on a Tweet in relation to whānau having issues accessing welfare support. This has been traced to the Te Manawa Taki region. The local hub have advised that no registered people are going without support.

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

#### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982



## Daily Information Update

HSIU number	# 037
Date/time	Thursday 3 March 2022 @ 1500 hrs
DHB Info Current as at	Wednesday 2 March 2022 @ 2359 hrs
Next HSIU	Friday 4 March 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update on the number of Planned Care cancellations was provided on Friday 25 February, the next update will be included in the Daily Information Update on [Friday 4 March 2022](#).

### 2. Update – Emergency Department Performance

The Emergency Department (ED) results from last week (week ending [27 February 2022](#)) showed some signs of rising pressure on the system.

ED attendance numbers were similar to the week prior with 21,012 attendances (across all 20 DHBs) compared to 21,057 ED attendances in the week prior. Generally, national ED attendances are relatively stable each week.

However, pressures on workforce including additional processing and testing of patients alongside building works (including negative pressure rooms) mean that, broadly, EDs' ability to respond to normal levels of presentations is likely to be constrained. These constraints are likely to escalate with increased patient numbers due to Omicron, and we expect waiting times for ED to deteriorate in the coming weeks. DHBs are encouraging patients to seek alternatives to ED, including using after hours centres, primary care and telehealth services.

Performance against the 6-hour target (SSED) was 75% – which was one percentage point below the week prior (76%). For admitted patients, performance against the 6-hour target fell by 4.2 percentage points from 60.6% to 56.3%. Although these results fluctuate, they have been gradually trending downwards since the start of the COVID-19 outbreak in 2020. SSED performance, while being based on ED performance, is an indicator of how the wider health system is performing. For example, if hospital occupancy is high, this will impact on the ED's ability to admit patients to hospital in a timely manner as will any workforce shortages. Also, if there is constrained access to primary care, more patients are likely to present to ED.

Information regarding ED performance will next be updated in the Daily Information Update on [Thursday 10 March 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Wednesday 2 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [60.7%](#), with [14.8%](#) of ventilators in use (see Appendix 1).

#### 4. Update - Health System Preparedness Programme (HSPP)

##### Data and Digital

- *COVID Clinical Care Module*
  - The platform underwent an update overnight to address system issues that were impacting the speed at which records were being created from a National Contact Tracing Solution case. This resulted in a backlog queue.
  - Performance of the platform has improved, however there are capacity/speed issues with the system only being able to process 60 messages per minute. A further update is being applied tonight to address these issues and will continue to be monitored.
  - There is currently no backlog of cases.
  
- *COVID-19 Contact Tracing Form Issues*
  - There has been reports of some people experiencing difficulties accessing or using the COVID-19 Contact Tracing Form. Work is being done to resolve these issues, and in the meantime, support lines are advising people to ensure they notify their contacts, workplace, and education settings that they are a case, to continue isolating, to refer to the Health Hub for further guidance, and to seek medical or welfare support if required.
  - The team are looking into an error relating to duplicate household contact records being generated. This is likely due to when multiple cases within the same household complete the online form. Work is underway to clear any duplications and resolve this issue.
  - The text message tool experienced intermittent issues whereby a positive case was not being notified, resulting in people ending up in the queue for cases who have not been informed. This issue has been resolved.
  - The team are also investigating an error in which infectious periods are being incorrectly calculated (i.e. infectious periods are being displayed as three months). Work is underway to resolve this.
  
- A technical fix for an error in which case events are not auto-creating cases for PCR tests is going into the system this evening (Wednesday 2 March 2022). In the meantime, the workaround is manual case creation.



- There have been some instances where new cases are being auto-assigned to Public Health Units instead of Reach Aotearoa. The National Investigation and Tracing Centre is working to move these cases through the system according to their relevant pathways and resolve any system issues.

#### Regional Hubs/Coordination

- The regional theming of the Care Coordination Hubs snapshots has been completed. This was presented to the Health System Preparedness Programme Assurance Group meeting today and was well received by the Group.
- The key regional themes and challenges that we are seeing out of the snapshots are consistent across the regions. Next steps are underway to formulise, localise and regionalise plans to address at-risk regions.
- The team are meeting with the Ministry of Social Development and Public Health Operations today to discuss the welfare advice to close contacts that are in high-risk settings that Public Health manage (not household contacts).

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

#### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

### Daily Information Update

HSIU number	# 038
Date/time	Friday 4 March 2022 @ 1500 hrs
DHB Info Current as at	Thursday 3 March 2022 @ 2359 hrs
Next HSIU	Monday 7 March 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

An estimated total of 83,979 COVID-19 related cancellations were reported by district health boards between 15 August 2021 – 27 February 2022. Of these, 9,384 were planned care interventions and 43,924 were First Specialist Assessment (FSA) or follow up events. The remaining cancellations include other inpatient, outpatient, radiology, and endoscopy appointments (see appendix 2).

Information regarding the number of Planned Care cancellations will be next updated in the Daily Information Update on [Friday 11 March 2022](#).

#### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided on [Thursday 3 March 2022](#), the next update will be included in the Daily Information Update on [Thursday 10 March 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Thursday 3 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 63.5%, with 16.0% of ventilators in use (see appendix 1).

#### 4. Update - Health System Preparedness Programme (HSPP)

##### COVID-19 Care in the Community

- The version 3 update of the COVID-19 Care in the Community Framework is underway with substantial revisions to reflect the Omicron Strategy and Response. The timeframe for publication of this is later this month.
- The team is working to gather disparate information across the 0800 support numbers to better understand these assistance channels as they relate to the entire patient journey from testing through to release from isolation. These channels are especially important for people who do not have access to internet/wifi.



### Regional Hubs/Coordination

- The number of Care Coordination Hubs is now 48, with 4 kaupapa Māori hubs up and running in the Te Tai Tokerau region. Following a maanaki first approach, these hubs will help better support individuals and whānau in the region with wraparound healthcare and welfare support.

### Communications and Engagement

- The team is working with the Department of the Prime Minister and Cabinet on communications around RAT testing and distribution following some confusion from DHBs and the public through social media channels. Work is underway to ensure that messaging is clear and consistent.

### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

Appendix 2 – Planned Care cancellations table (WORD doc)

### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 039
Date/time	Monday 7 March 2022 @ 1500 hrs
DHB Info Current as at	Sunday 6 March 2022 @ 2359 hrs
Next HSIU	Tuesday 8 March 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

The last update regarding the number of planned care cancellations was provided as part of the Daily Information Update on Friday 4 March. The next update will be provided on [Friday 11 March 2022](#).

#### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided on [Thursday 3 March 2022](#). The next update will be included in the Daily Information Update on [Thursday 10 March 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Sunday 6 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 54.7%, with 15.0% of ventilators in use (see appendix 1).

Further context:

- New Zealand's exact ICU capacity changes daily, depending on local need, planning, and staffing. The number of resourced beds flexes each day based on demand, staffing, and patient need and complexity. Therefore, any daily increases or decreases in resourced beds is likely due to clinical need and the critical care system working effectively. In most critical care units in New Zealand, while there may be several beds identified as ICU and a number as HDU beds, there is the ability to interchange between them to match resourcing according to the mix of patients in the unit at any given time.
- There are long established intra-regional processes for moving patients between hospitals and critical care units as necessary. A sub-group of the Critical Care Sector Advisory Group is developing a more formal process to ensure that all critical care capacity is utilised across New Zealand in a co-ordinated manner.
- There are processes in place to support ICU staff to move around the country if needed. For example, in the early part of the latest outbreak, ICU staff from around the country were identified, with some travelling to Auckland to support the response. This was a pre-emptive strategy to make sure staff had the opportunity to have on the ground orientation and to mitigate any risk of lower workforce numbers should staff have become close contacts or have been in places of interest.

- DHBs have increased their capability to manage COVID-19 patients in general (and specialised) wards, focusing on the provision of oxygen to a patient.
- Increases in the vaccination rate within the population, as well as the availability of new pharmaceuticals to treat COVID-19, is positively impacting the number of COVID-19 cases requiring both hospitalisation and critical care.
- Modelling of possible COVID-19 cases and the effect on hospitals and critical care continues to provide a range of scenarios. Hospitals have plans in place to manage case surges.

#### 4. Update - Health System Preparedness Programme (HSPP)

##### Regional Coordination

- The team followed up on a concern raised with the Minister's office by a Whānau Ora provider in Rotorua, regarding whānau waiting up to five days to receive welfare support through the Ministry of Social Development (MSD). A meeting was held yesterday with the regional MSD office and Lakes DHB. MSD reported that they have had no significant delays over the 72-hour period, and confirmed that the whānau concerned received the required support. A hui was convened today between the regional MSD office, Lakes DHB and the Whānau Ora provider to clarify processes and ensure that whānau are getting the required support at the right time.

##### Data and Digital

- The programming connection interface between the Ministry of Health and MSD experienced technical issues over the weekend that resulted in a number of records not being sent through to MSD. The team worked over the weekend with MSD to resolve this issue.
- Further work is being done on a remediation plan for the COVID Clinical Care Module (CCCM) based on feedback from MSD.

##### Care in the Community

- The team are working on the feedback received from your office regarding the Care in the Community performance dashboard with an updated draft to be provided today. The release of the report is due on Wednesday 9 March 2022.

##### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

##### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

### Daily Information Update

HSIU number	# 040
Date/time	Tuesday 8 March 2022 @ 1500 hrs
DHB Info Current as at	Monday 7 March 2022 @ 2359 hrs
Next HSIU	Wednesday 9 March 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

The last update regarding the number of planned care cancellations was provided as part of the Daily Information Update on Friday 4 March. The next update will be provided on [Friday 11 March 2022](#).

#### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided on [Thursday 3 March 2022](#). The next update will be included in the Daily Information Update on [Thursday 10 March 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Monday 7 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [61.8%](#), with [17.0%](#) of ventilators in use (see appendix 1).

#### 4. Update - Health System Preparedness Programme (HSPP)

##### Care in the Community

- The team are working on finalising the updated guidance for temporary accommodation for publication later today.
- Work is underway to update the guidance for sourcing suitable alternative isolation accommodation. The purpose is to support DHBs and Care Coordination Hubs to secure accommodation through the National Alternative Accommodation Service.
- Waikato DHB reported an urgent need for campervans to assist with MIQ pressures in the region. Three campervans were approved on Sunday 6 March 2022, however Waikato DHB are yet to complete the required paperwork before these can be deployed. The team are working closely with the DHB on this.
- A total of sixteen campervans have been deployed across seven DHBs. For the period of 1-8 March 2022, six campervans have been deployed to Auckland DHB (4), Lakes DHB (1), and Capital and Coast DHB (1). Examples of reasons for use include:
  - an individual (non-COVID-19 case) with heart failure being discharged from hospital but their entire family is isolating with COVID-19





- the self-contained transport of COVID-19 positive NZ Police from Wellington to Auckland.

### Communications and Engagement

- The Ministry is working with DPMC on the timing of when the changes to shorten the isolation timeframe from ten days to seven days can be shared broadly. Communications on this is likely to go out on Thursday 10 March 2022.
- NRHCC are launching their own regional campaign later this week on COVID-19 and how to isolate, in particular what isolation can look like and alternative accommodation options. The team have been working with NRHCC on their content to ensure that messaging is consistent.

### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 041
Date/time	<a href="#">Wednesday 9 March 2022 @ 1500 hrs</a>
DHB Info Current as at	<a href="#">Tuesday 8 March 2022 @ 2359 hrs</a>
Next HSIU	Thursday 10 March 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

As Omicron moves down the country, regional hospitals are standing up their preparedness plans. This sometimes involves repurposing hospital facilities, which in turn effects planned care. For example, Hawke's Bay Hospital recently stood up a COVID-19 ward, which has impacted their Endoscopy unit and has a flow on effect in reducing planned endoscopy numbers. Similarly, Canterbury Hospital have repurposed two theatres, which is impacting planned care. These changes to structures might take longer to reconfigure in the recovery phase.

The last update regarding the number of planned care cancellations was provided as part of the Daily Information Update on Friday 4 March. The next update will be provided on [Friday 11 March 2022](#).

#### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided on [Thursday 3 March 2022](#). The next update will be included in the Daily Information Update on [Thursday 10 March 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Tuesday 8 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 60.8%, with 14.9% of ventilators in use (see appendix 1).

Hospitalisations numbers continue to grow nationally, but are decreasing in the Northern region, both in terms of total numbers and ward numbers. Generally, facilities appear stretched but are managing.

#### 4. Update - Health System Preparedness Programme (HSPP)

##### Data and Digital

- Sector wide-training on the Risk Score for Call Prioritisation tool for the National Contact Tracing System and COVID-19 Clinical Care Module has started with two training sessions being run today and the option for further sessions later in the week. Capital and Coast DHB and Hutt Valley DHB have been pilot testing the tool prior to its scheduled released tonight.
- Other IT updates to be released overnight include:
  - Automated isolation end date notification sent to the COVID-19 Clinical Care Module from the National Contact Tracing System.
  - Automated case closure isolation release text message sent to COVID-19 cases.



- The Self-Serve assessment URL website address, including the token/code linked to positive cases, will be added to the My COVID Record platform.

### Workforce

- Technical Advisory Services (TAS) is coordinating many of the national redeployment efforts across DHBs and has received today a request from the Northern region for 120 Registered Nurses. TAS is developing a pool of nurses and other staff that can move around the country. They envisage that short duration (1-2 weeks) redeployment will be easier to facilitate than longer duration requests. Some redeployment is already occurring, and they have not yet received any requests for other medical staff.
- There are reports, in particular from a Northland freezing works factory and the Interislander, of workforce pressures relating to staff shortages due to staff or household contacts contracting COVID-19 and having to isolate. MSD has released a recruitment campaign which they expect will have a positive impact on helping to alleviate some workforce pressures. We also expect the reduced time change to the isolation period from ten to seven days to help with this.

### Engagement

- Ministry guidance that asymptomatic workers can return to work on COVID-19 wards even if their RATS is positive, has generated some concern amongst clinical staff and will need to be carefully communicated and managed. In the Northern region the change was signalled to and discussed with Union partners yesterday, with good understanding and acceptance. We also note that advice to stay at home at the first sign of unwellness has been stronger over the last two years of COVID-19 than prior, and this will not change.
- The team met with Minister Sio this morning and provided an overview and update of Care in Community. He expressed an interest in understanding how he could support the programme. We shared with him that while there is strong Pasifika representation and presence on each of the Regional Leadership Groups, Pasifika representation at the care coordination hub level is an issue. Especially in regions outside of the main centres with smaller Pasifika communities and no providers. The team are undertaking work with the Ministry of Pacific Peoples on engaging with these smaller Pasifika communities and connecting them to the local hubs.

### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

### Daily Information Update

HSIU number	# 042
Date/time	<a href="#">Thursday 10 March 2022 @ 1500 hrs</a>
DHB Info Current as at	<a href="#">Wednesday 9 March 2022 @ 2359 hrs</a>
Next HSIU	Friday 11 March 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

The last update regarding the number of planned care cancellations was provided as part of the Daily Information Update on Friday 4 March. The next update will be provided on [Friday 11 March 2022](#).

#### 2. Update – Emergency Department Performance

Nationally, ED attendance volumes for the week ended 6 March 2022 were slightly down on the previous week, 20,551 compared to 21,012, with most DHBs reporting a slight drop.

Performance against the 6-hour target was unchanged at 76% and remains below levels seen last year (80% in week ending 31 October 2021). Admission within the 6-hour target performance had dipped in the previous week, particularly at the Northern region DHBs, but returned to recent levels last week. As a result, performance against the 6-hour target for admissions rose to 60% nationally (56% in the previous week). However, this also remains below performance seen last year (65% in week ending 31 October 2021).

Information regarding ED performance will be next updated in the Daily Information Update on [Thursday 17 March 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Wednesday 9 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 63.5%, with 15.4% of ventilators in use (see appendix 1).

Total hospitalisation numbers in the Northern Region and ward numbers for the three Auckland metro continue to trend down. In addition to inpatient numbers there are 73 patients under the Hospital in the Home umbrella for the Auckland region. The acuity of these patients is not as high as for inpatients, for example there are no oxygen or IV fluid requirements.

As on 9 March 2022, Northern region ICU numbers had also reduced from thirteen to ten. Interrogation of the CHRIS software shows that for 9 March 2022, Auckland City Hospital had three patients in ICU, one ventilated; Middlemore Hospital had four patients in ICU, one ventilated; North Shore Hospital had three in ICU, two ventilated; Waikato Hospital had three in ICU, 0 ventilated.

Healthline reports dropping demand in Counties Manukau DHB, Waitamata DHB, and Auckland DHB, and increasing demand in Bay of Plenty DHB, Hawkes Bay DHB, Northland DHB, and Tairāwhiti DHB.

#### 4. Update - Health System Preparedness Programme (HSPP)

##### Care in the Community

- There has been some nervousness amongst Public Health Units about alternative accommodation. An update has been provided on what alternative accommodation is and the team will be working closely with the regions around any concerns. The Ministry of Business, Innovation and Employment are working on operational guidelines that will align with the Ministry of Health guidelines and will provide clear escalation pathways for Public Health Services. The team is also meeting with Waikato DHB, the Ministry of Business, Innovation and Employment and Orbit today to work through some alternative accommodation issues that have been raised.

##### Communications and Engagement

- There are reports of some schools insisting that students cannot return to school post the ten day isolation period unless students show a negative RAT result (by physically bringing their test to school). The Ministry of Health and Ministry of Education are working together on messaging to make clear that if a student has no new or worsening symptoms and the isolation period is completed, then they are no longer required to stay in isolation and that schools and early learning services cannot require evidence of a negative RAT test.
- The COVID-19 Care in the Community Surging the Health Workforce Campaign launched today, aiming to connect workers and employers and push for people to work on the COVID-19 response.

##### Data and Digital

- Work is underway on a use case FAQ document that informs what the various IT platforms are, particularly the COVID Clinical Care Module and National Contact Tracing System and which parts of the Health system should be using these platforms. We have seen that the use of these platforms varies across the Hubs with some using one over the other. We hope to have clear guidance available shortly.
- The Risk Score for Call Prioritisation tool for the COVID Clinical Care Module and National Contact Tracing System is now deployed.

##### **Appendices:**

Appendix 1 – Daily Hospital Situation Report Tables (WORD doc)

##### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

## Daily Information Update

HSIU number	# 043
Date/time	Friday 11 March 2022 @ 1500 hrs
DHB Info Current as at	Thursday 10 March 2022 @ 2359 hrs
Next HSIU	Monday 14 March 2022 @ 1500 hrs

## 1. Update – Impact on Planned Care

An estimated total of 85,420 COVID-19 related cancellations were reported by district health boards between 15 August 2021 – 6 March 2022. Of these, 9,838 were planned care interventions and 44,883 were First Specialist Assessment (FSA) or follow up events. The remaining cancellations include other inpatient, outpatient, radiology, and endoscopy appointments (see appendix 2).

Information regarding the number of Planned Care cancellations will be next updated in the Daily Information Update on [Friday 18 March 2022](#).

## 2. Update – Emergency Department Performance

The last update on emergency department performance was provided on Thursday 10 March 2022. The next update will be included in the Daily Information Update on [Thursday 17 March 2022](#).

## 3. Update – Daily Hospital Situation

As at 2359hrs on [Thursday 10 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 62.0%, with 16.3% of ventilators in use (see appendix 1).

## 4. Update - Health System Preparedness Programme (HSPP)

Care in the Community

- The team met with Public Health Units today who raised concerns regarding the National Contact Tracing System referrals pathway being turned off. The electronic referral pathway is intended to support positive cases and their household by facilitating urgent prioritisation of specific welfare needs. Following some issues with the pathway, the Ministry of Social Development proposed several changes be made. It was agreed that the pathway interface between the Ministry of Health and Ministry of Social Development systems be temporarily switched off in order to work through system issues. Engagement on this will continue with Public Health Units and the Ministry of Social Development.

Data and Digital:

- The Isolation Release Text Notification System went live overnight. This enables an automatic notification text to positive cases who are self-isolating, advising that the required isolation period has been completed.
- The reduced timeframe to the isolation and quarantine requirements for cases and their household contacts comes into effect at 11:59pm on Friday 11 March 2022. This reduction in the isolation period from

ten days to seven days will ensure we maintain a balance between controlling the outbreak effectively and minimising the impacts of our response measures. The predicted isolation start and end dates will be updated in the National Contact Tracing System and COVID Clinical Care Module to reflect this change.

- From Friday 11 March 2022, Rapid Antigen Test (RAT) results can be recorded on behalf of cases through My COVID Record. A consumer can update multiple National Health Indexes (NHI) within the same twelve-hour period. However, they can only update the same NHI once every twelve-hours.
  - Where a consumer is reporting a RAT result on behalf of a case, they will not be able to see or edit this on their own My COVID Record account.
  - If the person a consumer is reporting for does not have their own mobile number, the consumer can use their own contact number.
  - Positive results will get a text notification to the mobile specified.
  - My COVID Record validates NHI, Name, and Date of Birth details against the COVID-19 Immunisation Register, not the National Enrolment Service. This means that consumers can only report a RAT for people who have been vaccinated. Where a consumer attempts to record a RAT for an unvaccinated person, an error screen will display and the consumer will be prompted to call 0800 222 478 instead.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

Appendix 2 – Planned Care cancellations table (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 044
Date/time	Monday 14 March 2022 @ 1500 hrs
DHB Info Current as at	Sunday 13 March 2022 @ 2359 hrs
Next HSIU	Tuesday 15 March 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 11 March 2022. The next update will be provided on [Friday 18 March 2022](#).

#### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided as part of the Daily Information Update on Thursday 10 March 2022. The next update will be provided on [Thursday 17 March 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Sunday 13 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **58.5%**, with **16.0%** of ventilators in use (see appendix 1).

Canterbury DHB (Christchurch Hospital) was over capacity with twenty-two occupied beds and twenty-one resourced beds. They have physical capacity of twenty-three beds and currently have staff working overtime.

#### 4. Update – Health System Preparedness Programme (HSPP)

##### Data and Digital

- A rapid assessment of the Risk Score tool is being developed by looking at the score of those who are hospitalised and determining if the score was correct. Sector-wide training sessions on the Risk Score have been ongoing and we are seeking feedback to understand if the score is working in the intended way, and if there are areas for improvement.

##### Care in the Community

- The updated COVID-19 Care in the Community Framework – Omicron Update is currently going through the review process. This Framework update is specific to how the Care in the Community programme is implementing the Omicron strategy. Framework highlights include:
  - Describes the care journey under Omicron.
  - Articulates the three care pathways.
  - Includes five journeys for diverse personas.
- The Alternative Accommodation guidance was released today. The purpose of this is to support DHBs and Care Coordination Hubs to secure accommodation through the National Alternative Accommodation Service. As part of this, it was also agreed that the Incident Management Team will manage the liaison





## Health System Information Update

Ref: HSIU

required for distribution of campervans and other alternative accommodation requests during afterhours and weekends.

- Following the meeting held on Friday 11 March 2022 with Public Health Units to discuss the welfare referral pathway process, another meeting was held today with Public Health Units and the Ministry of Social Development to further discuss and provide feedback on the changes to the process. The team are continuing regular engagement on this matter.
- The team is supporting a Ministry of Social Development Webinar for their providers and networks this evening to discuss Care in the Community and clinical pathways.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 045
Date/time	Tuesday 15 March 2022 @ 1500 hrs
DHB Info Current as at	Monday 14 March 2022 @ 2359 hrs
Next HSIU	Wednesday 16 March 2022 @ 1500 hrs

## 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 11 March 2022. The next update will be provided on [Friday 18 March 2022](#).

## 2. Update – Emergency Department Performance

The last update on emergency department performance was provided as part of the Daily Information Update on Thursday 10 March 2022. The next update will be provided on [Thursday 17 March 2022](#).

## 3. Update – Daily Hospital Situation

As at 2359hrs on [Monday 14 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 64.15%, with 15.8% of ventilators in use (see appendix 1).

## 4. Update – Health System Preparedness Programme (HSPP)

Care in the Community / Workforce

- Tairāwhiti DHB reported issues with obtaining rubber tubing for their High Dependency Units and other services. This was immediately remedied by working with the COVID-19 supply team and their regional DHBs.
- We received conflicting information from Auckland DHB regarding workforce pressures across the region. After looking into the matter further, we have been advised that there have been only anecdotal reports that the workforce pressures may be greater outside of Auckland because of less experience managing the strain. The team are continuing to engage with the DHB on this.
- Feedback received from the Public Health Units on the joint Ministry of Health and Ministry of Social Development (MSD) meeting held yesterday to discuss changes to the welfare referral process was very positive. Public Health Units appreciated MSD engagement on the matter.  
The team supported an MSD led webinar for their social sector providers yesterday evening which was attended by approximately 360 people/providers across the motu. The team spoke to Care in the Community, patient pathways, and how we were working together with MSD and other partners at the care coordination hub level. Positive feedback was received from providers and they welcomed the joint presentation.

Communications

The following Ministry of Health COVID-19 communications underway this week include:

- Contact tracing for workplaces video



Health System Information Update

Ref: HSIU

- Director-General Sector message
- Messaging on RATs in schools to support education providers
- Distribution of RATs to people with disabilities – communications to be finalised later this week
- Video on COVID-19 and pregnancy
- Clinical pathway when pregnant
- Video on COVID-19 and prescriptions/taking medications
- Fact sheet on caring for children
- Five things to know if you test positive
- Northern Region Health Coordination Centre is appearing on Seven Sharp to discuss COVID-19 Care in the Community and to highlight Māori and Pacific Hubs

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 046
Date/time	Wednesday 16 March 2022 @ 1500 hrs
DHB Info Current as at	Tuesday 15 2022 @ 2359 hrs
Next HSIU	Thursday 17 March 2022 @ 1500 hrs

## 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 11 March 2022. The next update will be provided on [Friday 18 March 2022](#).

## 2. Update – Emergency Department Performance

The last update on emergency department performance was provided as part of the Daily Information Update on Thursday 10 March 2022. The next update will be provided on [Thursday 17 March 2022](#).

## 3. Update – Daily Hospital Situation

As at 2359hrs on [Tuesday 15 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [64.2%](#), with [14.5%](#) of ventilators in use (see appendix 1).

## 4. Update – Health System Preparedness Programme (HSPP)

Data and Digital

- The team is presenting a series of data and digital review sessions this week with all COVID-19 Care Coordination Hubs. These sessions aim to help support the Hubs to use the localised reporting and dashboarding tools available in the systems, and to optimise the technology solutions used at local levels.
- Changes are being made to the National Contact Tracing System and the COVID-19 Contact Tracing Self-Service form to include alternative accommodation fields. These changes are expected to go live in the system next week.

Workforce

- Following changes to the Managed Isolation Allocation System and reduced demand for MIQ, the Ministry of Health is meeting with the Ministry of Business, Innovation and Employment to discuss redeployment of the MIQ workforce and options for how we can get some of these workers into support the COVID Care in the Community workforce. Engagement on this will be ongoing.

Engagement

- The Ministry have been collaborating with the Royal College of General Practitioners on a series of webinars to update Primary Care practitioners on changes to COVID-19 Care in the Community. The team is presenting one of these webinars this evening.



Health System Information Update

Ref: HSIU

- The Ministry of Social Development have reported ongoing pressure on supply chains and skilled worker shortages, with a workforce shortfall of at least 400 workers in key areas like Foodstuffs distribution centres. These issues are having some impact on getting welfare support to whānau in the regions.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 047
Date/time	Thursday 17 March 2022 @ 1500 hrs
DHB Info Current as at	Wednesday 16 March 2022 @ 2359 hrs
Next HSIU	Thursday 17 March 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 11 March 2022. The next update will be provided on [Friday 18 March 2022](#).

### 2. Update – Emergency Department Performance

Nationally, ED attendance volumes for the week ended 13 March 2022 were slightly up (0.6%) on the previous week, 20,512 compared to 20,398 (excluding West Coast from both weeks as they haven't reported in the latest week).

Overall performance against the six-hour target improved two percentage points to 78%, approaching levels seen last year (80% in week ending 31 October 2021). Admission within the six-hour target performance rose again this week to 62% nationally (60% in the previous week), tracking upwards toward performance levels seen last year (65% in week ending 31 October 2021). Similarly, the proportion of non-admitted patients leaving ED within six hours improved on the previous week, 85% compared with 82%, and is in line with performance seen previously.

Information regarding ED performance will be next updated in the Daily Information Update on [Thursday 24 March 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Wednesday 16 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [66.2%](#), with [12.7%](#) of ventilators in use (see appendix 1).

### 4. Update – Health System Preparedness Programme (HSPP)

#### Engagement / Communications

- Iwi in the Central Region have raised concerns about the environmental issues around the proliferation of RATs and the resultant plastic waste. The matter has been escalated to Māori Crown Relations – Te Arawhiti who will discuss the matter with Iwi Chairs and the Pandemic Response Group.
- There have been reports that some people are not uploading COVID-19 test results due to confusion around thinking that this is only required if an individual is needing health and welfare support. Messaging is being considered to communicate that it is important for all COVID-19 positive results to be reported via the My COVID-19 Record platform.



Health System Information Update

Ref: HSIU

- Work is underway on the legal mechanism and guidance for placing people into MIQ (section 29, COVID-19 Public Health Response (Self-isolation Requirements and Permitted Work) Order 2022), and how this will work from the Public Health perspective.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 048
Date/time	Friday 18 March 2022 @ 1500 hrs
DHB Info Current as at	Thursday 17 March 2022 @ 2359 hrs
Next HSIU	Monday 21 March 2022 @ 1500 hrs

## 1. Update – Impact on Planned Care

An estimated total of 88,652 COVID-19 related cancellations were reported by district health boards. Of these, 10,434 were planned care interventions and 47,336 were First Specialist Assessment (FSA) or follow up events. The remaining cancellations include other inpatient, outpatient, radiology, and endoscopy appointments (see appendix 2).

Information regarding the number of Planned Care cancellations will be next updated in the Daily Information Update on [Friday 25 March 2022](#).

## 2. Update – Emergency Department Performance

The last update on emergency department performance was provided on Thursday 17 March 2022. The next update will be included in the Daily Information Update on [Thursday 24 March 2022](#).

## 3. Update – Daily Hospital Situation

As at 2359hrs on [Thursday 17 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 61.5%, with 10.6% of ventilators in use (see appendix 1).

## 4. Update – Health System Preparedness Programme (HSPP)

Communications

- Guidance on caring for tamariki with COVID-19 has been developed and was launched on the Ministry of Health website yesterday evening, along with a video from the Starship Foundation about caring for children that become unwell with COVID-19 symptoms.
- There have been reports of people receiving further text messages during their isolation period advising that they need to self-isolate, effectively restarting their seven-day isolation period. This is caused when someone that tests positive for COVID-19 submits details of their household contacts, and within that isolation period one of those household contacts tests positive and submits the same household contact details. This issue was raised with the Public Health and Contract Tracing teams and is being investigated.

Data and Digital

The following digital tools and updates are being released in the coming weeks:

- Updated online self-service assessment form that will include alternative accommodation fields
- COVID-19 Clinical Care Module probable case creation





Health System Information Update

Ref: HSIU

- Enhanced digital daily checks of COVID-19 cases
- Isolation reminder text messaging
- Re-calculation of risk score from the self-service assessment form

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

Appendix 2 – Planned Care cancellations table (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 049
Date/time	Monday 21 March 2022 @ 1500 hrs
DHB Info Current as at	Sunday 20 March 2022 @ 2359 hrs
Next HSIU	Tuesday 22 March 2022 @ 1500 hrs

## 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 18 March 2022. The next update will be provided on [Friday 25 March 2022](#).

## 2. Update – Emergency Department Performance

The last update on emergency department performance was provided as part of the Daily Information Update on Thursday 17 March 2022. The next update will be provided on [Thursday 24 March 2022](#).

## 3. Update – Daily Hospital Situation

As at 2359hrs on [Sunday 20 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [59.1%](#), with [15.5%](#) of ventilators in use (see appendix 1).

## 4. Update – Health System Preparedness Programme (HSPP)

Data and Digital

- Concerns have been raised by at least three DHBs regarding the changes to the National Contact Tracing System online self-service form, particularly in the alternative accommodation fields, noting that the questions are too broad. The questions are being reworked and amendments made ahead of the updated form going live in the system on 23 March 2022.
- Other updates to the online self-service form include the addition of the disability questions which ask: *Are you a disabled person, tangata whaikaha Māori or a person with disabilities?* If an individual answers “Yes” on the form, they are then asked to identify which conditions or underlying conditions/illnesses they have.
- The data and digital reviews of the COVID-19 Care Coordination Hubs (the Hubs) is underway. The team are working with each of the Hubs to complete an in-depth analysis of the current processes and functionalities being used, along with training sessions on how to access the localised dashboarding and reporting tools within the COVID-19 Clinical Care Module.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little’s office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

### Daily Information Update

HSIU number	# 050
Date/time	Tuesday 22 March 2022 @ 1500 hrs
DHB Info Current as at	Monday 21 March 2022 @ 2359 hrs
Next HSIU	Wednesday 23 March 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 18 March 2022. The next update will be provided on [Friday 25 March 2022](#).

#### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided as part of the Daily Information Update on Thursday 17 March 2022. The next update will be provided on [Thursday 24 March 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Monday 21 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **63.7%**, with **14.5%** of ventilators in use (see appendix 1).

#### 4. Update – Health System Preparedness Programme (HSPP)

##### COVID-19 Care in the Community

- Amendments to the alternative accommodation fields of the National Contact Tracing System online self-service form were made yesterday. The updated form went live in the system this morning.
- The Southern region have reported issues relating to alternative accommodation support, particularly experiencing delayed turnaround times with Orbit's service. Reports from Orbit are that they have not had communications from the Southern region in approximately four weeks. The team are investigating this further to work through the matter.

##### COVID-19 Care in the Community Framework

- The updated COVID-19 Care in the Community Framework – Omicron Update has been finalised and is being prepared to be launched online today. This was jointly signed off by the Ministry of Health and Ministry of Social Development, demonstrating the collaboration between the two agencies to the health and welfare sectors.
- The update focuses on the Omicron strategy and implementation of the Omicron strategy within the Care Coordination Hubs and throughout the community.
- Highlights of the updated framework include:
  - Updated process flow diagrams for care management.



## Health System Information Update

Ref: HSIU

- Updated information for alternative accommodation.
- List of COVID-19 Care Coordination Hubs and contact information.
- List of phone numbers for people who cannot access digital services and need to use assisted channels (0800 support numbers) to manage their care and isolation.
- Inclusion of five diverse personas and their care pathways.

**Workforce:**

- Aged Residential Care have reported that some regions are under pressure due to staffing levels. Work is underway to look at moving workforce around the country to help with this issue.
- The Critical Care Campaign launched on 7 February 2022 has been extended through to June 2022. The campaign aims to support and increase the nursing workforce capacity, capability, and resilience within critical care settings. Campaign progress has been positive, with Social Media delivering high engagement from the market.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 051
Date/time	Wednesday 23 March 2022 @ 1500 hrs
DHB Info Current as at	Tuesday 22 March 2022 @ 2359 hrs
Next HSIU	Thursday 24 March 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 18 March 2022. The next update will be provided on [Friday 25 March 2022](#).

### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided as part of the Daily Information Update on Thursday 17 March 2022. The next update will be provided on [Thursday 24 March 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Tuesday 22 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **63.0%**, with **18.3%** of ventilators in use (see appendix 1).

### 4. Update – Health System Preparedness Programme (HSPP)

#### COVID-19 Care in the Community

- The Ministry met with the Office of Disability Issues yesterday evening to talk through the changes made for people living with a disability, ahead of the changes to the COVID-19 Protection Framework that were announced today. Changes to the Framework are of concern to the disability community, due to factors such as the higher risk of poor outcomes with COVID-19, potential difficulty with isolating, needing to receive care (sometimes from multiple carers), and residing in group homes. Going forward, there will be weekly meetings between Ministry officials and the disability sector on the implementation of the Framework changes and Care in the Community initiatives.
- The team met with the Regional Leads yesterday to discuss what the COVID-19 response looks like at a regional level in the future, and whether the programme of work could be replicated as required for other responses/pandemics in the future. The Regional Leads are consulting with the wider health sector to engage on this piece of work and are preparing a draft document for relevant Chief Executives next week. A further meeting with the Regional Leads is being held today.
- Regional desktop reviews of the four regions (Northern, Te Manawa Taki, Central and Southern) will commence tomorrow. This follows on from the desktop reviews of a sample of ten DHBs completed in November and December 2021. The purpose of these is to bring into focus the Care in the Community preparedness, building on the assurance work performed with local Care Coordination Hubs. The reviews will incorporate the intelligence gathered from the survey of preparedness conducted of the 44 Care Coordination Hubs across Aotearoa. These are expected to be completed over the coming weeks.



Health System Information Update

Ref: HSIU

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 052
Date/time	Thursday 24 March 2022 @ 1500 hrs
DHB Info Current as at	Wednesday 23 March 2022 @ 2359 hrs
Next HSIU	Friday 25 March 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 18 March 2022. The next update will be provided on [Friday 25 March 2022](#).

#### 2. Update – Emergency Department Performance

Nationally, Emergency Department (ED) attendance volumes for the week ended 20 March 2022 reduced 3% to 19,881; down from 20,512 last week (note numbers exclude West Coast). This is the lowest number of weekly presentations since October 2021. This is in part driven by Auckland DHB and Canterbury DHBs who have experienced drops in ED attendances over recent weeks.

Performance levels against the 6-hour Short Stays in Emergency Departments (SSED) target stayed the same as last week, with 78% for SSED, 62% for admitted SSED, and 85% for non-admitted SSED nationally. Although national results have remained steady, we have seen movement between DHBs week on week spread across the country.

We expect results to continue to fluctuate weekly as DHBs continue to deal with increased pressures on ED as a result of reduced staffing levels due to staff isolating, COVID-19 patients in hospital wards, and increased screening required for patients who present at ED.

Information regarding ED performance will be next updated in the Daily Information Update on [Thursday 31 March 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Wednesday 23 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **64.5%**, with **16.0%** of ventilators in use (see appendix 1).

#### 4. Update – Health System Preparedness Programme (HSPP)

##### COVID-19 Care in the Community

- There was an adverse event (mental health nature) in a Southern DHB alternative accommodation facility on the evening of 22 March 2022. This raised concerns regarding the liability of Self-Isolation and Quarantine (SIQ) Coordinators and facilities in these situations, and concerns that SIQ Coordinators may be



## Health System Information Update

Ref: HSIU

liable or responsible for clinical aspects of care (especially non COVID-19 related care). The incident is being investigated at a local level through the Care Coordination Hub Clinical Governance Group and has been flagged with the Incident Management Team. The Ministry will be providing further guidance to the sector on this subject.

**Workforce:**

- Canterbury DHB is supporting local Aged Residential Care Support (ARC) facilities with 30-40 nurses per shift. This is impacting on their workforce, along with other factors such as COVID-19 isolation demands and sick leave. The view is that the alternative is ARC facilities transferring patients to hospital for care.

**Supply Chain Issues:**

- Some DHBS have raised concerns regarding low supply of IV fluids, and issues with obtaining supply from Baxter Healthcare. Baxter Healthcare has advised Pharmac that the product is in New Zealand but that it is stuck in shipping containers, and that due to COVID-19 staffing shortages they do not have the manpower to offload the containers. The Ministry is working with the DHBS to understand the products that are affected and current stock levels. The Ministry is also meeting with Baxter Healthcare and Pharmac today to work to resolve the issue and shore up supply.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982



### Daily Information Update

HSIU number	# 053
Date/time	<a href="#">Friday 25 March 2022 @ 1500 hrs</a>
DHB Info Current as at	<a href="#">Thursday 24 March 2022 @ 2359 hrs</a>
Next HSIU	<a href="#">Monday 28 March 2022 @ 1500 hrs</a>

#### 1. Update – Impact on Planned Care

An estimated total of 92,549 COVID-19 related cancellations were reported by DHBs for the period 15 August 2021 – 20 March 2022. Of these, 11,191 were planned care interventions and 49,577 were First Specialist Assessment (FSA) or follow up events. The remaining cancellations include other inpatient, outpatient, radiology, and endoscopy appointments. No data was received from Waitematā DHB this week due to data delays (see appendix 2).

Information regarding the number of Planned Care cancellations will be next updated in the Daily Information Update on [Friday 1 April 2022](#).

#### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided as part of the Daily Information Update on Thursday 24 March 2022. The next update will be provided on [Thursday 31 March 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Thursday 31 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 64.0%, with 18.5% of ventilators in use (see appendix 1).

#### 4. Update – Health System Preparedness Programme (HSPP)

##### COVID-19 Care in the Community

- Representatives from the Department of Corrections, Ministry of Business, Innovation and Employment, and the Ministry of Health met yesterday to discuss alternative accommodation requests for prisoners being released from prison that are COVID-19 positive. An important aspect of this process is ensuring that early notification is sent to Self-Isolation and Quarantine Coordinators, especially if alternative accommodation is not available for released prisoners to safely isolate for the seven-day isolation period. A process document is being developed that will be shared with stakeholders.
- Ministry Officials are meeting with the Department of Prime Minister and Cabinet today to work through planning for an increased number of visitors to New Zealand.



Health System Information Update

Ref: HSIU

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

Appendix 2 – Planned Care cancellations table (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 054
Date/time	Monday 28 March 2022 @ 1500 hrs
DHB Info Current as at	Sunday 27 March 2022 @ 2359 hrs
Next HSIU	Tuesday 29 March 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 25 March 2022. The next update will be provided on [Friday 1 April 2022](#).

### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided as part of the Daily Information Update on Thursday 24 March 2022. The next update will be provided on [Thursday 31 March 2022](#).

### 3. Update – Daily Hospital Situation

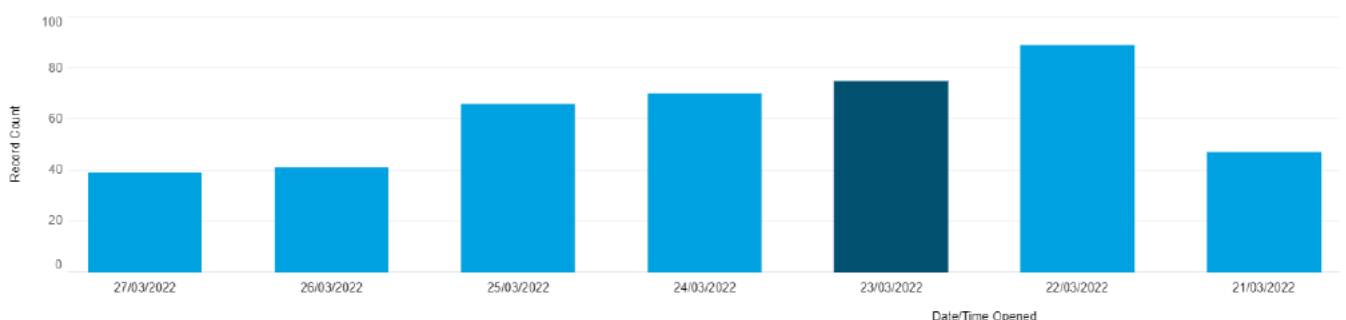
As at 2359hrs on [Sunday 27 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **56.5%**, with **15.8%** of ventilators in use (see appendix 1).

### 4. Update – Health System Preparedness Programme (HSPP)

#### COVID-19 Care in the Community

- There have been 433 alternative accommodation referrals in the past seven days (see table below). The number of self-referrals relative to the number of daily cases is relatively low. The team are continuing to work with the Hubs to support their work in the regions on this. Updated alternative accommodation guidance is being refined and will be shared with stakeholders in the coming weeks.

Total Records  
433





Health System Information Update

Ref: HSIU

- The team are meeting with the Māori Monitoring Group today to provide an update on the Care in the Community work programme, with a focus on the work that is underway for the disability sector.
- The Ministry of Social Development presented a workshop to the Ministry of Health today, sharing their COVID-19 insights, with a focus on increasing our cross-sector engagement.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

Appendix 2 – Planned Care cancellations table (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 055
Date/time	Tuesday 29 March 2022 @ 1500 hrs
DHB Info Current as at	Monday 28 March 2022 @ 2359 hrs
Next HSIU	Wednesday 30 March 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 25 March 2022. The next update will be provided on [Friday 1 April 2022](#).

#### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided as part of the Daily Information Update on Thursday 24 March 2022. The next update will be provided on [Thursday 31 March 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Monday 28 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 63.6%, with 15.5% of ventilators in use (see appendix 1).

#### 4. Update – Health System Preparedness Programme (HSPP)

##### Care in the Community

- Following reports last week from the Southern region relating to alternative accommodation support (Health System Information Update #050 refers), the team worked with Southern and have been able to source additional alternative accommodation options, increasing the availability in the region.
- A solution fix has been applied to the REACH System that identifies a single service provider (an employer or pastoral care person) when bulk RAT results are uploaded for Regional Seasonal Workers and Aged Residential Care groups. Previously in the REACH System there was no way of identifying a single service provider, meaning that separate follow-up calls were being placed to all individuals included in a bulk upload group. This change reduces the number of points of contact to those groups and puts in place a process for our calling service to make sure that they are reaching out to the relevant employer.

##### Communications

- The following COVID-19 guidance was launched on the Ministry of Health website in the last week:
  - Information on how to manage symptoms and what people need to do if they take medication.
  - Information and tools available to support mental health and wellbeing and where to get help if needed.



Health System Information Update

Ref: HSIU

- A video resource linked on the *COVID-19: Pregnant people and those who have recently given birth* guidance page. This provides information on what patients need to know if they are isolating and pregnant, and maternity care for women during pregnancy and following the birth of their child.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 056
Date/time	Wednesday 30 March 2022 @ 1500 hrs
DHB Info Current as at	Tuesday 29 March 2022 @ 2359 hrs
Next HSIU	Thursday 31 March 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 25 March 2022. The next update will be provided on [Friday 1 April 2022](#).

### 2. Update – Emergency Department Performance

The last update on emergency department performance was provided as part of the Daily Information Update on Thursday 24 March 2022. The next update will be provided on [Thursday 31 March 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Tuesday 29 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [65.0%](#), with [15.6%](#) of ventilators in use (see appendix 1).

### 4. Update – Health System Preparedness Programme (HSPP)

#### Care in the Community

- The Ministry are participating in a workshop with the Ministry of Business, Innovation and Employment today to map out future uses for Managed Isolation and Quarantine facilities.

#### Clinical

- Work is underway to produce an end-to-end process map and detailed plan for the therapeutics rollout of the first oral antiviral medicines that will be available for community use in eligible COVID-19 positive patients. The team has been engaging with sector representatives on this work and formulating the guidance for prescribers, dispensers, and patients, as well as data and digital mechanisms to support monitoring and distribution of supplies. The rollout is expected to begin on 4 April 2022.

#### Engagement

- Following the successful COVID-19 insights presentation by the Ministry of Social Development to the Ministry of Health on 28 March 2022, we are facilitating a series of these workshops to the wider health sector. The next workshop will be presented to the National Public Health Units meeting on 6 April 2022.



Health System Information Update

Ref: HSIU

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982



## Daily Information Update

HSIU number	# 057
Date/time	Thursday 31 March 2022 @ 1500 hrs
DHB Info Current as at	Wednesday 30 March 2022 @ 2359 hrs
Next HSIU	Friday 1 April 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 25 March 2022. The next update will be provided on [Friday 1 April 2022](#).

### 2. Update – Emergency Department Performance

Nationally, Emergency Department (ED) attendance volumes for the week ended 27 March increased 1% to 20,104. This is up from 19,881 last week (note numbers exclude West Coast).

At a national level, performance against the six-hour Short Stays in Emergency Department (SSED) target stayed the same as the previous two weeks, with 78% for SSED, 62% for admitted SSED, and 85% for non-admitted SSED nationally. Week on week changes have been observed within DHBs. The biggest changes from the previous week (+/- 10% change) were reported by Central Region DHBs. All DHBs from the other three regions only noted small changes (+/- 4%).

While the number of COVID positive cases in the South Island have risen over the past week, this has not resulted in significant increases in the number of patients presenting at ED or DHBs reporting higher levels of occupancy than have been seen previously.

Information regarding ED performance will be next updated in the Daily Information Update on [Thursday 7 April 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Wednesday 31 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [69.0%](#), with [16.0%](#) of ventilators in use (see appendix 1).

### 4. Update – Health System Preparedness Programme (HSPP)

#### Care in the Community:

- A Continuous Quality Improvement Framework is being developed to build an evidence-base about the COVID-19 Care in the Community Framework programme delivery. The Framework is intended to measure delivery of the Programme and ensure that it is delivering quality and equitable outcomes.



### Engagement

- Yesterday the Ministry, alongside the Ministry of Social Development, Ministry of Housing and Urban Development, and Kāinga Ora presented a joint agency update on key health measures to the Community Housing Aotearoa Housing Providers Forum. Feedback from the presentation was that it was well received.
- The team are working with the Ministry of Social Development and the Social Wellbeing Agency to better understand how we are delivering psychosocial care supports. This will link in with the work that is currently underway with Regional Leads to ensure we have a whole of system/All of Government approach to addressing psychosocial support needs required for communities.
- A hui is being held today with Iwi Chairs to provide an update on the COVID-19 Care in the Community programme.
- The Ministry is participating in a fortnightly housing forum this evening hosted by Minister Woods. An update on the Care in the Community work will be presented to housing sector stakeholders.

### Clinical

- The Ministry has progressed quickly with implementation of the therapeutics process map and plan. Further refinements have been made and we are now in the process of operationalising it ahead of the expected rollout on 4 April 2022.

### **Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 058
Date/time	Friday 1 April 2022 @ 1500 hrs
DHB Info Current as at	Thursday 31 March 2022 @ 2359 hrs
Next HSIU	Monday 4 April 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

An estimated total of 96,659 COVID-19 related cancellations were reported by district health boards for the period 15 August 2021 – 27 March 2022. Of these, 11,974 were planned care interventions and 51,654 were First Specialist Assessment or follow up events. The remaining cancellations include other inpatient, outpatient, radiology, and endoscopy appointments (see appendix 2).

Information regarding the number of Planned Care cancellations will be next updated in the Daily Information Update on [Friday 8 April 2022](#).

#### 2. Update – Emergency Department Performance

The last update regarding emergency department performance was provided as part of the Daily Information Update on Thursday 31 March 2022. The next update will be provided on [Thursday 7 April 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Thursday 31 March 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 67.3%, with 17.9% of ventilators in use (see appendix 1).

#### 4. Update – Health System Preparedness Programme (HSPP)

##### Care in the Community:

- A hui is being held today with the Pharmacy Sector to discuss their feedback on the pricing schedule for oral antiviral medicine, Paxlovid™. This feedback will be incorporated into the pricing schedule review that is commencing next week.
- We have received reports from Southern DHB regarding ACC care providers and local contracted care providers not providing care to COVID-19 positive cases should an individual be receiving care due to having a disability or injury. As a result, these individuals have been admitted to hospital as “social admissions”. This was escalated to the Incident Management Team and it was determined that the issue is a matter between ACC as the provider of services, the local contracting care service provider, and Southern DHB. The issue is currently going through internal Southern DHB processes.
- To support those who are unable to upload positive RAT results themselves, certain Supported Residential Facilities are now able to report multiple positive RAT results on behalf of individuals in their residences. Supported Residential Facilities will submit this information to the Public Health Units in that region who will determine if those identified meet the criteria to have the National Investigation and Tracing Centre



## Health System Information Update

Ref: HSIU

upload the RAT result on their behalf. Where the required criteria is met, the information is sent to the National Investigation and Tracing Centre who will bulk upload the positive RAT results. This will create a case record in the National Contact Tracing System and COVID-19 Clinical Care Module.

- A system change has been implemented to record if a person who is an active record in the National Contact Tracing System and COVID-19 Clinical Care Module passes away. This will ensure that those who have taken or are due to take action on a case are aware that the person is now deceased.

**Engagement**

- The Ministry presented an update on the Care in the Community work to the housing forum yesterday evening hosted by Minister Woods. Several providers and other Ministers in attendance gave positive feedback on this work and the cross-agency engagement between the Ministries for Health, Housing and Urban Development, and Social Development. Further work is being done with the Ministry of Housing and Urban Development to involve their providers.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

Appendix 2 – Planned Care Cancellations table (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 059
Date/time	Monday 4 April 2022 @ 1500 hrs
DHB Info Current as at	Sunday 3 April 2022 @ 2359 hrs
Next HSIU	Tuesday 5 April 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday, 1 April 2022. The next update will be provided on [Friday 8 April 2022](#).

### 2. Update – Emergency Department Performance

The last update regarding emergency department performance was provided as part of the Daily Information Update on Thursday 31 March 2022. The next update will be provided on [Thursday 7 April 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Sunday 3 April 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [62.8%](#), with [16.7%](#) of ventilators in use (see appendix 1).

### 4. Update – Health System Preparedness Programme (HSPP)

#### Clinical

- The first shipment of Paxlovid™ was distributed to the eight ProPharma distribution hubs between 1-2 April 2022. The allocation of the initial shipment to individual pharmacies was confirmed on 1 April 2022 for 19 DHBs with the last, Bay of Plenty DHB, confirmed today. Individual pharmacies can order stock of Paxlovid™ today for delivery by tomorrow morning.
- Clinical guidance for prescribing the oral antiviral medicine will be published today through the Health Pathways sites ahead of dispensing commencing from tomorrow. Prescribers have also received the live links to all monographs and support resources directly.

#### Workforce

- Health Workforce is contributing to the review of the COVID-19 Protection Framework settings. We continue to work with the Ministry of Business, Innovation and Employment to review registrations for the Critical Care Exemption Scheme.
- A nationwide funding stream has been made available to support and reinforce the capacity, capability and resilience of the Māori and Pacific workforce providers caring for at-risk communities through the Omicron outbreak and beyond. This includes the volunteer and casual workforce within communities who were mobilised during the COVID-19 response.



- A health workforce retention plan is being developed to retain and develop the core community-based workforce group. Part of the workplan will look at broadening skillsets, what further support is needed to develop this workforce to continue to meet the challenges of COVID-19 and into the future, and identifying potential career and learning pathways.

#### Engagement

- A joint meeting between the Ministry of Health, Regional Health Liaisons and the Ministry of Social Development is taking place today to discuss delivery of psychosocial care supports for communities to ensure we have a whole-of-system approach.

#### Disability

- The Ministry is meeting with the People's Group (a group set up and open to all disabled people) this week to present on alternative pathways for people with disabilities, particularly for testing, reporting COVID-19 results, and step-by-step processes for how people can get the support they need if they are non-digital or need extra help. A Q+A session will also be incorporated as part of this meeting.

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

#### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 060
Date/time	Tuesday 5 April 2022 @ 1500 hrs
DHB Info Current as at	Monday 4 April 2022 @ 2359 hrs
Next HSIU	Wednesday 6 April 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 1 April 2022. The next update will be provided on [Friday 8 April 2022](#).

### 2. Update – Emergency Department Performance

The last update regarding emergency department performance was provided as part of the Daily Information Update on Thursday 31 March 2022. The next update will be provided on [Thursday 7 April 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Monday 4 April 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at [67.8%](#), with [17.4%](#) of ventilators in use (see appendix 1).

### 4. Update – Health System Preparedness Programme (HSPP)

#### Care in the Community

- Two of the regional desktop reviews have now been completed with the last remaining two to be completed over the next two weeks. The reviews are being carried out at the regional level with regional leadership, and focus on resurgence and Care in the Community preparedness, and implementation of the Care Coordination Hubs.
- The team is meeting with the Health Quality & Safety Commission today to collaborate on reviews of deaths and provide feedback on localised governance processes.

#### Data and Digital

The following data and digital tools and updates are planned for release this week:

- Usability and functionality improvements to the GP RAT reporting form.
- Case creation by GPs via the COVID-19 Clinical Care Module.
- COVID-19 Health Hub language translations – 18 languages to deploy incrementally.
- Version 1 of the Therapeutics Dashboard.



Health System Information Update

Ref: HSIU

- Additional case health check questions on symptoms and co-morbidities from the National Contact Tracing System to the COVID-19 Clinical Care Module.
- GP COVID-19 Dashboard – visibility of GPs' COVID-19 patients from the COVID-19 Clinical Care Module via the Practice Management System.
- Ability to create cases in the COVID-19 Clinical Care Module via the GP Dashboard.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982



## Daily Information Update

HSIU number	# 061
Date/time	Wednesday 6 April 2022 @ 1500 hrs
DHB Info Current as at	Tuesday 5 April 2022 @ 2359 hrs
Next HSIU	Thursday 7 April 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 1 April 2022. The next update will be provided on [Friday 8 April 2022](#).

### 2. Update – Emergency Department Performance

The last update regarding emergency department performance was provided as part of the Daily Information Update on Thursday 31 March 2022. The next update will be provided on [Thursday 7 April 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Tuesday 5 April 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 67.3%, with 16.5% of ventilators in use (see appendix 1).

### 4. Update – Health System Preparedness Programme (HSPP)

#### Care in the Community

- We have been advised by the Ministry of Social Development that it is reducing the support hours within their dedicated 0800 COVID-19 welfare support helpline. This is in line with a reduction in demand as daily case numbers continue to reduce. The Ministry of Social Development have given their assurances that this will not impact urgent service provision and that their teams have back-up arrangements in place, including regional provider and connector networks being available for urgent requests.
- The Te Manawa Taki regional desktop review was held yesterday. The session showed significant collaboration at a local level and identified the need for further support to assist regional coordination. The final desktop review of the Central region will be completed in the coming weeks.

#### Engagement

- The Ministry of Health and Ministry of Social Development jointly presented to Public Health Units today on insights on delivering welfare support, and the role of community connectors, Regional Public Service Commissioners and Regional Leadership Groups. The presentation to the sector builds on the work to strengthen our relationship and engagement with agency partners.



### Clinical – Therapeutics Rollout

- Pharmacies began ordering Paxlovid on Monday 4 April 2022 based off their allocations. Stock has been distributed to 318 out of 370 participating pharmacies. DHB Pharmacy Portfolio Managers have been contacted to organise ordering for the remaining pharmacies.
- Paxlovid was available for prescribing from Tuesday 5 April 2022. As at 0800hrs on Wednesday 6 April 2022, a total of 16 prescriptions had been issued.

### Winter Planning Checklist

- A DHB winter planning checklist is being developed that builds on the planning tool developed to support the pre-festive season planning over December 2021 and the Omicron scenario planning in February 2022. This process is being led by Regional Leads and supported by the Ministry.

### **Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 062
Date/time	Thursday 7 April 2022 @ 1500 hrs
DHB Info Current as at	Wednesday 6 April 2022 @ 2359 hrs
Next HSIU	Friday 8 April 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 1 April 2022. The next update will be provided on [Friday 8 April 2022](#).

#### 2. Update – Emergency Department Performance

Nationally, Emergency Department (ED) attendance volumes for the week ended 3 April 2022 increased 4% to 20,897. This is up from 20,104 the previous week (note numbers exclude West Coast). Notably, ED attendances rose and reported hospital occupancy increased in all three Auckland Metro DHBs.

At a national level, performance against the six-hour Short Stays in Emergency Department (SSED) target for admitted patients decreased by two percentage points to 60%, indicating possible difficulties in admitting patients into hospital from ED. This remains higher than the rates seen in late February. The decrease in SSED from last week for all patients and non-admitted patients was less than one percentage point (77% and 84% respectively). Variances from the previous week were within five percentage points for all DHBs – except Wairarapa DHB, which returned to levels experienced two weeks ago, after a significant increase last week.

The South Island continues to see no significant increases in ED attendances, despite Omicron cases. Despite some hospitals reporting critical staffing levels with increases in absenteeism due to staff isolating, SSED and occupancy rates for this region did not show higher pressure on the system than the rest of the country.

Information regarding ED performance will be next updated in the Daily Information Update on [Thursday 14 April 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Wednesday 6 April 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 62.5%, with 17.2% of ventilators in use (see appendix 1).

#### 4. Update – Health System Preparedness Programme (HSPP)

##### Oral Therapeutics Update

- As at 0800hrs today, 337 of the 370 participating pharmacies have ordered stock of Paxlovid™ and a total of 5,060 courses have been delivered. We are exploring the reason why the other 33 pharmacies have not yet

ordered stock.

- There are only six pharmacies yet to set up an account with ProPharma, which is required for ordering the oral medicine.
- Another 20,900 courses of Paxlovid™ arrive in New Zealand today. This makes up the balance of our orders until 1 July 2022. Total stock received in New Zealand to date is 30,500 courses.
- There were 23 prescriptions issued yesterday to patients meeting the access criteria. There have been 42 prescriptions issued over the first two days.
- The QLIK Therapeutics Dashboard, a daily digital monitoring report for Paxlovid™ is being deployed today. This tool will be used by the Ministry of Health, DHBs and Pharmac to enable effective stock management, track utilisation trends over time, and will help ensure access is equitable.
- The Ministry has been meeting with Pharmac daily through the initial phase of the therapeutics rollout. This regular contact has improved levels of information sharing, as well as establishing a better model for any new medication rollouts that come in the future. The frequency of these meetings will reduce as of next week.

#### Long COVID Update:

- The Ministry is continuing work on the approach for managing Long COVID in the primary care setting and wider New Zealand Health and Disability System. The four parts to the approach are:
  - Monitoring DHBs that have/are establishing specific services for Long COVID to help develop a change package for others who may want to do the same.
  - Maintain emergent evidence to inform clinical pathways for the identification and management of Long COVID.
  - Establish an Expert Advisory Group, including people with lived experience to guide and give input into the above two points.
  - Progressively identify research gaps that are particular to Aotearoa New Zealand and how these might be addressed.

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

#### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

## Daily Information Update

HSIU number	# 063
Date/time	Friday 8 April 2022 @ 1500 hrs
DHB Info Current as at	Thursday 7 April 2022 @ 2359 hrs
Next HSIU	Monday 11 April 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

An estimated total of 98,689 COVID-19 related cancellations were reported by district health boards for the period 15 August 2021 – 3 April 2022. Of these, 12,524 were planned care interventions and 52,183 were First Specialist Assessment (FSA) or follow up events. The remaining cancellations include other inpatient, outpatient, radiology, and endoscopy appointments (see appendix 2).

Information regarding the number of Planned Care cancellations will be next updated in the Daily Information Update on [Friday 8 April 2022](#).

### 2. Update – Emergency Department Performance

The last update regarding emergency department performance was provided as part of the Daily Information Update on Thursday 7 April 2022. The next update will be provided on [Thursday 14 April 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Thursday 7 April 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 69.4%, with 16.5% of ventilators in use (see appendix 1).

### 4. Update – Health System Preparedness Programme (HSPP)

#### Winter Planning Update

- The Ministry has been working on two key aspects of winter planning preparedness:
  - gaining assurance that DHBs and hospitals have robust plans for winter preparedness, in particular with workforce resilience
  - developing a system to collect additional data and intelligence from across all DHBs to provide an ‘early warning system’, and to manage and monitor winter trends.
- A DHB winter planning checklist has been developed that builds on the planning tool the Ministry developed to support the pre-festive season planning over December 2021 and the COVID-19 scenario planning in February 2022. This will be socialised with DHBs in the coming weeks and analysis of the findings will provide the Ministry with an assessment of DHB preparedness, areas of risk, and opportunities to be shared across the sector. An overall report will be completed and ongoing engagement with DHBs will continue over the coming months.



## Health System Information Update

Ref: HSIU

Data and Digital

- The COVID-19 Health Hub language translations update started to be deployed this week with Te Reo Māori and Pacific Island languages now available on the site. The 18 languages that are being deployed over the coming weeks are: Te Reo Māori, Korean, Simplified Chinese, Traditional Chinese, Hindi, Somali, Samoan, Swahili, Ukrainian, Tongan, Fijian, Tokelauan, Niuean, Cook Island Māori, Gujarati, Punjabi, Tuvaluan, Vietnamese.

Care in the Community

- The team continues to work with Care Coordination Hubs to support them in securing accommodation through the National Alternative Accommodation Service, in particular for regions where accessibility is an issue. The Ministry is working on strategies with the Ministry of Business, Innovation and Employment to support Hubs that need campervans for alternative accommodation use.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

Appendix 2 – Planned Care Cancellations table (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 064
Date/time	Monday 11 April 2022 @ 1500 hrs
DHB Info Current as at	Sunday 10 April 2022 @ 2359 hrs
Next HSIU	Tuesday 12 April 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 8 April 2022. The next update will be provided on [Thursday 14 April 2022](#).

#### 2. Update – Emergency Department Performance

The last update regarding emergency department performance was provided as part of the Daily Information Update on Thursday 7 April 2022. The next update will be provided on [Thursday 14 April 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Sunday 10 April 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **55.7%**, with **12.9%** of ventilators in use (see appendix 1).

#### 4. Update – Health System Preparedness Programme (HSPP)

##### Clinical – Therapeutics Update

- As at 0800hrs today, there have been 84 courses of Paxlovid™ dispensed from 48 pharmacies.
- 5,313 courses have been distributed to 357 of the 369 participating pharmacies.
- There are 957 courses readily available for pharmacies to order.
- 24,130 courses are held in reserve. This includes the shipment of 20,900 courses that arrived on Thursday 7 April 2022.
- There are four pharmacies that still need to set up an account with ProPharma for ordering.
- Pharmac is working on a distribution arrangement with Onelink to act as the wholesaler for hospitals, now that more stock is available. The Ministry is working on how we capture usage from hospitals.
- The Ministry will soon move to a more business-as-usual approach to ordering for pharmacies. Rather than allocating stock to each pharmacy, once more usage data is gathered this will inform daily usage and what each pharmacy will be asked to maintain in on-hand stock. Pharmacies will then order on an 'as required' basis from ProPharma.
- The QLIK Therapeutics Dashboard used to monitor Paxlovid™ stock utilisation went live for internal Ministry use on Thursday 7 April 2022. It is expected that the tool will go live for external use by DHBs and Pharmac on Wednesday 13 April 2022.



Care in the Community

- The final regional desktop review session of the Central region is taking place today. Readouts from the reviews that have been done to date are currently with the regional participants for their assessment.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982



### Daily Information Update

HSIU number	# 065
Date/time	Tuesday 12 April 2022 @ 1500 hrs
DHB Info Current as at	Monday 11 April 2022 @ 2359 hrs
Next HSIU	Wednesday 13 April 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 8 April 2022. The next update will be provided on [Thursday 14 April 2022](#).

#### 2. Update – Emergency Department Performance

The last update regarding emergency department performance was provided as part of the Daily Information Update on Thursday 7 April 2022. The next update will be provided on [Thursday 14 April 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Monday 11 April 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **60.3%**, with **14.9%** of ventilators in use (see appendix 1).

#### 4. Update – Health System Preparedness Programme (HSPP)

##### Clinical – Therapeutics Update

- As at 0800hrs today there have been 97 courses of Paxlovid™ dispensed from 54 pharmacies.
- 5,338 courses have been distributed to 359 of the 377 participating pharmacies.
- 1,032 courses are readily available for ordering by pharmacies.
- ProPharma will begin distribution of Paxlovid™ stock from the second shipment to regional distribution centres today.
- Paxlovid™ stock will be split according to the below table:

Community			Hospital	Total Stock available from shipments 1 and 2
Available	Reserve 1 (local)	Reserve 2 (central)		
18,000	5,000	5,000	2,500	30,500

##### Engagement

- The Ministry is working with Te Arawhiti: Māori Crown Relations and Te Puni Kōkiri to ensure the Māori Communities COVID-19 Fund aligns the current COVID-19 settings and is not duplicating what is already



funded in the regions. The fund's focus is to support the welfare needs of individuals and whānau who contract COVID-19, and to support the efforts of communities and Iwi to mobilise their own approaches and build resilience. There have been some Iwi that have expressed concerns with the process. The Ministry will continue to work alongside agency partners on this.

#### Data and Digital

- Two new online tools were released on the COVID-19 Health Hub page today. These features have been developed to address ongoing confusion by people on the date they can leave self-isolation, and to make COVID-19 advice and support more accessible to communities. The two new features are:
  - Self-isolation calculator – populates a self-isolation end date based on the date that a person developed symptoms or tested positive for COVID-19.
  - Language translations in Te Reo Māori, Cook Island Māori, Tongan, Fijian, and Samoan are now live. Further translations will be deployed in the following languages over the coming weeks: Niuean, Tokelauan, Tuvaluan, Chinese (Simplified), Chinese (Traditional), Hindi, Korean, Somalian, Swahili, Ukrainian, Gujarati, Punjabi, Vietnamese, Arabic.

#### **Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

#### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

## Daily Information Update

HSIU number	# 066
Date/time	Wednesday 13 April 2022 @ 1500 hrs
DHB Info Current as at	Tuesday 12 April 2022 @ 2359 hrs
Next HSIU	Thursday 14 April 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Friday 8 April 2022. The next update will be provided on [Thursday 14 April 2022](#).

### 2. Update – Emergency Department Performance

The last update regarding emergency department performance was provided as part of the Daily Information Update on Thursday 7 April 2022. The next update will be provided on [Thursday 14 April 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Tuesday 12 April 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 66.7%, with 16.7% of ventilators in use (see appendix 1).

### 4. Update – Health System Preparedness Programme (HSPP)

#### Disability

- The first People's Group meeting was held on 11 April 2022. This was an open session designed for disabled people and their whānau and carers to provide the latest information on alternative pathways for people with disabilities, and guidance on preparing for and responding to COVID-19. Over 30 people attended the first session. The next People's Group meeting is scheduled for 5 May 2022.
- The Ministry, alongside the Department of Prime Minister and Cabinet and other cross-government agencies, has brought together COVID-19 information, support details and resources for disabled people on one page on the Unite Against COVID-19 website. This work included a stocktake of currently available information, identification of gaps, and working with other government agencies to provide a broad range of up-to-date information for disabled people and their whānau and carers. The web page provides practical details on testing, recording test results, what to do if your carer gets COVID-19, how to access welfare support, and key information on preparing and keeping safe.

#### Care in the Community

- The final regional desktop review of the Central region was held on 11 April 2022. This session identified that further support is needed in three main areas – communications, data and digital, and funding. A readout on the session is being prepared for review by the participants. The reporting from the other three completed sessions (Northern, Te Manawa Taki, and Southern) is currently under review.



## Health System Information Update

Ref: HSIU

- The Chief Ombudsman has recently made unscheduled inspections of community isolation and self-isolation facilities. This follows on from his interest in the use of detention facilities for COVID-19 isolation under Section 70 of the Health Act 1956. Due to the changes in the types of facilities being used for isolation (i.e., a shift toward alternative accommodation for health and safety of isolation individuals and whānau, rather than Managed Isolation and Quarantine or Self-Isolation and Quarantine by direction under Section 70), the Ministry is currently working with the Ombudsman to clarify alternative accommodation under Care in the Community.
- The Ministry, alongside the Ministry of Business, Innovation and Employment, is drafting guidance to the Department of Prime Minister and Cabinet on providing Self-Isolation and Quarantine for overseas visitors.

Clinical – Therapeutics Update

- As at 0800hrs today a total of 125 courses of Paxlovid™ have been dispensed across 63 pharmacies. Numbers are lower than initially expected and are likely to remain low given we are past the peak of the Omicron outbreak. There have not been clusters of prescriptions at this stage. From preliminary modelling and data from some of the Primary Health Organisations, we anticipate only 0.5-2% of cases to meet the access criteria.
- Work is underway on reviewing the access criteria to Paxlovid™. The Ministry met with Pharmac yesterday to determine access criteria changes, including looking at widening the scope in response to low numbers. There have been no access issues identified to date. The Ministry is meeting with Pharmac again tomorrow on this matter.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982

### Daily Information Update

HSIU number	# 067
Date/time	<a href="#">Thursday 14 April 2022 @ 1500 hrs</a>
DHB Info Current as at	<a href="#">Wednesday 13 April 2022 @ 2359 hrs</a>
Next HSIU	Tuesday 19 April 2022 @ 1500 hrs

#### 1. Update – Impact on Planned Care

An estimated total of 100,462 COVID-19 related cancellations were reported by district health boards for the period 15 August 2021 to 10 April 2022. Of these, 13,029 were Planned Care interventions and 52,949 were First Specialist Assessment (FSA) or follow up events. The remaining cancellations include other inpatient, outpatient, radiology, and endoscopy appointments (see appendix 2).

Information regarding the number of Planned Care cancellations will be next updated in the Daily Information Update on [Friday 22 April 2022](#).

#### 2. Update – Emergency Department Performance

Nationally, Emergency Department (ED) attendance volumes for the week ended 10 April 2022 decreased 2% to 20,681. This is down from 21,075 the previous week (note these numbers now include West Coast). Canterbury DHB is reporting an upward trend of ED attendances over the past four weeks, while Auckland and Southern DHBs returned to usual levels after spikes in attendances over the past fortnight.

Nationally, performance against the six-hour short stays in emergency department target for admitted and non-admitted patients remained the same as the previous week, with 60% and 84% respectively. Week-on-week variances within DHBs were mostly within +/- 5 percentage points.

Hospital occupancy continues to be a concern this week, with both Auckland City Hospital and Wellington Hospital reporting occupancy of over 90% at all measured censuses. Palmerston North Hospital was under very similar high occupancy pressures. All three hospitals experienced a decrease in their ability to admit patients into hospital beds in a timely manner as a result.

Information regarding ED performance will be next updated in the Daily Information Update on [Thursday 21 April 2022](#).

#### 3. Update – Daily Hospital Situation

As at 2359hrs on [Wednesday 13 April 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at 63.3%, with 17.2% of ventilators in use (see appendix 1).

#### 4. Update – Health System Preparedness Programme (HSPP)

##### Clinical – Therapeutics Update

- As at 0800hrs today there have been 145 courses of Paxlovid™ dispensed from 67 pharmacies.
- A total of 5,359 courses have been distributed to 380 participating pharmacies since Paxlovid™ became available on Tuesday 5 April 2022.
- 25,134 courses are at the wholesaler, including 10,000 in reserve.
- 2,500 courses are being transferred to Onelink today for hospitals and will be ready for ordering from next week.
- We expect approval for the oral antiviral medicine Molnupiravir from Medsafe this week. There are 30,000 courses scheduled to arrive in New Zealand on 24 April 2022, and these will be distributed to ProPharma on 27 April 2022.
- The Therapeutic Technical Advisory Group are working on creating a treatment algorithm for prescribing COVID-19 therapeutics.
- Work is underway by Health Navigator to produce a patient information leaflet on Molnupiravir.
- The New Zealand Formulary, an independent resource providing clinically validated medicines information and guidance, has created a drug monograph for Molnupiravir. The monograph provides information on drug-related uses, warnings, and side effects.
- The Ministry is meeting with Pharmac today to discuss the timeline and work plan for Molnupiravir.
- The team presented at the National HealthPathways Primary Care webinar last night on Paxlovid™. This was attended by over 700 participants and feedback from the webinar was that it was well received and an informative session.

##### **Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

Appendix 2 – Planned Care Cancellations table (WORD doc)

##### **Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

## Daily Information Update

HSIU number	# 068
Date/time	Tuesday 19 April 2022 @ 1500 hrs
DHB Info Current as at	Monday 18 April 2022 @ 2359 hrs
Next HSIU	Wednesday 20 April 2022 @ 1500 hrs

### 1. Update – Impact on Planned Care

The last update regarding the number of Planned Care cancellations was provided as part of the Daily Information Update on Thursday 14 April 2022. The next update will be provided on [Friday 22 April 2022](#).

### 2. Update – Emergency Department Performance

The last update regarding Emergency Department performance was provided as part of the Daily Information Update on Thursday 14 April 2022. The next update will be provided on [Thursday 21 April 2022](#).

### 3. Update – Daily Hospital Situation

As at 2359hrs on [Monday 18 April 2022](#), the national daily hospital occupancy metrics show overall ICU/HDU (critical care) occupancy at **61.1%**, with **16.4%** of ventilators in use (see appendix 1).

### 4. Update – Health System Preparedness Programme (HSPP)

#### Clinical – Therapeutics Update

- As at 0800hrs today there have been 189 courses of Paxlovid™ dispensed from 89 pharmacies.
- A total of 5,490 courses have been distributed to 369 participating pharmacies since Paxlovid™ became available on Tuesday 5 April 2022.
- 2,500 courses are now with Onelink for hospital supply.
- 13,000 courses are available to order from the wholesaler.
- 9,500 courses are held in reserve.
- Molnupiravir was granted provisional consent by Medsafe on Thursday 14 April 2022.
- 30,000 courses of Molnupiravir are expected to arrive in New Zealand next week to be distributed to ProPharma on Wednesday 27 April 2022.
- Prescribing of Molnupiravir is expected to commence from Tuesday 3 May 2022 across both primary care and hospitals.
- A further two deliveries of 20,000 and 10,000 courses (respectively) are expected to arrive at 60-day intervals. This will make up the total stock supply of 60,000 courses for the year.
- Pharmac is reviewing the access criteria for oral COVID-19 therapeutics over the next two weeks and is aiming to have updated guidance published prior to Molnupiravir arriving in New Zealand.



Health System Information Update

Ref: HSIU

- Sector and public communications will be developed and updated ahead of the arrival of Molnupiravir. A webinar session is not planned, as prescribing of Molnupiravir is much less complex than Paxlovid™.

**Appendices:**

Appendix 1 – Daily Hospital Situation Report tables (WORD doc)

**Distribution List:**

Hon Andrew Little, Minister of Health | Hon Andrew Little's office officials | Dr Ashley Bloomfield, Director-General of Health | Ministry of Health officials

RELEASED UNDER THE OFFICIAL INFORMATION ACT 1982