

# Briefing

## District Health Board (DHB) planning for regional management of COVID-19 spread in areas without an MIQ facility

<b>Date due to MO:</b>	N/A	<b>Action required by:</b>	N/A
<b>Security level:</b>	IN CONFIDENCE	<b>Health Report number:</b>	20212218
<b>To:</b>	Hon Chris Hipkins, Minister for COVID-19 Response		
<b>Copy to:</b>	Hon Ayesha Verrall, Associate Minister of Health		

### Contact for telephone discussion

Name	Position	Telephone
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### Minister's office to complete:

- |   |                                    |  |
|---|------------------------------------|--|
| <input type="checkbox"/> Approved             | <input type="checkbox"/> Decline   | <input type="checkbox"/> Noted               |
| <input type="checkbox"/> Needs change         | <input type="checkbox"/> Seen      | <input type="checkbox"/> Overtaken by events |
| <input type="checkbox"/> See Minister's Notes | <input type="checkbox"/> Withdrawn |  |

Comment:

# District Health Board (DHB) planning for regional management of COVID-19 spread in areas without an MIQ facility

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**Security level:** IN CONFIDENCE      **Date:** 8 October 2021

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**To:** Hon Chris Hipkins, Minister for COVID-19 Response

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## Purpose of report

1. This briefing responds to your request for information on the preparedness of DHBs for managing the isolation or quarantine of cases or higher needs close contacts in regions without a MIQ facility (MIQF).
2. This report discloses all relevant information.

## Summary

3. During an outbreak, the Ministry of Health's (the Ministry) preference is that people who test positive for COVID-19 go into a MIQF wherever possible. This ensures their full needs can be met, that there are clinical staff on hand if their condition deteriorates, and that there are compliance arrangements in place to minimise the risk of further COVID-19 transmission in the community.
4. However, for a small number cases, this is not possible. This could be due to the remoteness of where the person lives or their specific welfare or health needs. Where this is the case, a Medical Officer of Health can determine an alternative place of quarantine – which could be a person's home or a locally based accommodation option (for example accommodation on a hospital site).
5. In contrast, generally most close contacts can isolate safely at home. However, for a small number of people with higher needs, there may be additional wrap-around services needed to enable that person to isolate at home.
6. In recognition of this, the Ministry contracted all DHBs to develop a community supported isolation and quarantine service (Community-SIQ). This service requires the DHBs to coordinate and provide wrap-around services to higher-needs cases or close contacts to enable them to safely isolate at home and to provide small-scale locally based accommodation for cases if they cannot be transferred from home to a MIQF.

7. DHBs are at different levels of readiness but they are all able to provide wrap-around care to a small number of cases being managed in the community. Eighteen DHBs either have suitable accommodation secured or options identified.
8. Given the current outbreak, the Ministry has asked DHBs to scale up their accommodation capacity for people who cannot safely isolate in their home 'bubbles' from a minimum of 1-2 'bubbles' to 5-10 'bubbles'.
9. This would enable DHBs to manage a small number of cases identified in their region, while other options are being stood up to respond to potential further increase in case numbers.
10. DHBs are currently being asked to provide operational plans summarising how the Community-SIQ service will support the COVID-19 response in their region. We will provide you with these plans within the next week.

## Recommendations

We recommend you:

- a) **Note** the information in this briefing.

Yes  No



Bridget White  
Deputy Director General  
**COVID-19 Health System Response**  
Date: 8 October 2021



Hon Chris Hipkins  
**Minister for COVID-19 Response**  
Date: 12/10/2021

We need to get MIQ working on some contingency options to stand up extra facilities in areas they don't currently have them should we see significant outbreaks in those places.

Given the vulnerability of the population, Northland needs particular attention.

# DHB planning for regional management of COVID-19 spread in areas without an MIQ facility

## Background

1. The Ministry of Health has contracted DHBs to develop a community supported isolation and quarantine service (Community-SIQ), designed to manage public health risk and support a small number of cases and higher needs close contacts to isolate/quarantine successfully in the community.

## **DHBs are contracted to provide wrap around services to higher-needs close contacts and to have small scale locally based accommodation for cases to quarantine**

2. The intention of the Community-SIQ service is to enable DHBs to:
  - a. manage a small number of cases and higher needs close contacts in-place (the usual place of residence)
  - b. coordinate provision of comprehensive wrap-around health, well-being and welfare needs
  - c. provide small scale local alternative accommodation options for those whose usual place of residence is not suitable or where transfer to a MIQF is not feasible
  - d. coordinate the safe transport of cases or close contacts inter or intra-regionally where this is not provided by another agency.
3. The Service formed part of the Elimination Strategy to minimise the risk of COVID-19 transmission within the community and in the context of an expectation that most cases should quarantine within a MIQF. This service was developed and designed prior to our understanding of the Delta variant and our understanding of the speed of transmission of Delta.
4. This Service now forms part of a wider system and is integral to the health system readiness programme that is also looking at a community-home based isolation model of care. There is a working group established with primary and community representatives working with the Ministry of Health. This will be looking at how people can be supported in their own home with the right medical and community/welfare supports.
5. There are a number of other programmes of work that will be critical to ensuring regions (particularly those more than a 3-hour drive from a MIQF) can respond to an outbreak in their area. This includes:
  - a. a programme to stand up a National Service Model for caring for COVID-19 in the community – this would enable home quarantine at scale if required

- b. contingency planning by MBIE to change isolation facilities into quarantine facilities
  - c. contingency planning for alternative quarantine delivery models – such as the use of motor homes for quarantine.
6. DPMC is coordinating these workstreams and will be briefing on this separately.
  7. This briefing focuses only on your request to understand existing DHB planning for quarantine and isolation if they experience small scale outbreaks.

## Summary of DHB readiness

8. DHBs are at different levels of readiness but are all able to provide wrap-around care to a small number of cases or close contacts being managed in the community. The accommodation available to quarantine cases outside of the home varies across DHBs.
9. The Community-SIQ service has been developed to augment local ability to manage community outbreaks, and specifically to provide support to Public Health Units and primary care.
10. The service is led by a dedicated Community-SIQ Coordination Manager in each DHB and services are currently being developed and stood-up at pace across all regions.

### *The provision of wrap-around services*

11. DHBs have been working with their communities to strengthen their ability to identify and coordinate the provision of health, wellbeing and welfare services to those required to isolate/quarantine in the community. Many DHBs have existing contracts with Whānau Ora, Pacific and other community providers to deliver a wide range of services to cases/close contacts and their whānau.
12. Based on Auckland's experience with the current outbreak, meeting welfare needs at scale is likely to be a significant challenge across any region. This is an area of continued attention and development at the all-of-government level.

### *The provision of alternative local accommodation*

13. Given the current outbreak, we have directed that DHBs increase their accommodation capacity from 1-2 'bubbles' to 5-10 'bubbles', based on the size and needs of their regions. The size of these 'bubbles' range from 1-8 people units.
14. Most DHBs have either already entered into contracts to retain accommodation or have identified potential accommodation options but have not yet entered into contracts. The numbers of secured and or identified accommodation bubbles across DHB regions is detailed in the table set out in **Appendix One**.
15. The 'bubbles' of accommodation currently secured are a mixture of hospital-owned accommodation and rented motel units funded under the Community-SIQ service. DHBs with larger geographical locations and/or multiple urban townships have spread this accommodation across their regions. For example, Southern DHB has two 'bubbles' of accommodation each in Queenstown, Invercargill, and Dunedin.
16. Wairarapa and the West Coast are the only regions that have not identified any accommodation options. While Wairarapa is within close proximity to neighbouring

DHBs (including Wellington MIQFs), the West Coast is vulnerable, with main centres at least a 3-hour drive from other DHBs.

17. A number of DHBs have found it difficult to find any accommodation providers who are willing to engage with them. This is predominantly due to perceived reputational risk associated with housing cases or close contacts. For example, Lakes DHB has not been able to secure accommodation in Tāupo (despite the number of accommodation options available). The Ministry has been working with MSD, MBIE and Kāinga Ora to provide advice and support these DHBs to identify and contract suitable accommodation providers.

#### *The provision of safe transport*

18. Transport of cases and close contacts involves risks. The Ministry has worked with DHBs and MBIE to develop guidance and processes for intra- and inter-region transport for situations that do not involve transfer to a MIQF. MIQF transports are coordinated between the Ministry and MBIE under a contract with Johnston's.
19. There is ongoing cross-agency work required to secure an integrated national solution that would enable safe transport from any part of New Zealand.

#### **Equity**

20. The Community-SIQ model has been developed on an understanding that different people will require different levels and types of support in order to isolate/quarantine successfully in the community. In the development of the service, DHBs have been expected to take a whānau-focused approach that actively acknowledges and seeks to support individual needs by providing responsive services tailored to the individual.
21. The service emphasises the need to prioritise and work closely with Māori, Pacific and other community providers to ensure that adequate and culturally safe support and services can be mobilised for individuals and their whānau.

#### **Next steps**

22. DHBs have been asked this week to provide updated operational plans setting out how they will manage cases in their region in response to our request to increase locally acquired accommodation to manage between 5 – 10 'bubbles'.

ENDS.

# Appendix One

## Accommodation 'bubbles' secured and/or identified

DHB	No. of accommodation bubbles secured under current contracts				No. of accommodation 'bubbles' identified & under consideration but not yet secured
	0	1-5 range	6-10 range	11+ range	
Northland		4			
Auckland Region			7		
Waikato	0				5
Bay of Plenty			9		
Lakes			6		
Tairāwhiti	0				56
Taranaki		3			11
Hawke's Bay				90	
Whanganui		5			
Mid Central		2			3
Wairarapa	0				
Capital and Coast/Hutt Valley	0				20
Nelson Marlborough		4			
West Coast	0				
Canterbury	0				40
South Canterbury	0				6
Southern			6		