

COVID-19 Independent Continuous Review, Improvement and Advice Group

4 June 2021

Hon Chris Hipkins
Minister for COVID-19 Response
Parliament Building
WELLINGTON

Dear Minister Hipkins

COVID-19 Independent Continuous Review, Improvement and Advice Group rapid review of Auckland February 2021 outbreak and future focus of the Group

On 6 May 2021 I wrote to you to provide you with a summary of the findings of the COVID-19 Independent Continuous Review, Improvement and Advice Group's (the Group) rapid review of the Auckland February 2021 outbreak to identify opportunities for continuous improvement in the ongoing response to COVID-19. As expressed in my letter, overall, we found that although the February response builds on some lessons from previous outbreaks, there are a number of areas where continuous improvements should be made to further enhance and de-risk performance. The report highlights areas where the Group considers learnings should be applied to enhance the performance of the system. The final Review Report ('Review of the February 2021 Auckland COVID-19 Outbreak and New Zealand's current COVID-19 Outbreak Response Capability') is attached to this letter.

The Review Report has been sent to the Ministry of Health (the Ministry), Te Kawa Mataaho Public Service Commission (PSC) and the Department of the Prime Minister and Cabinet (DPMC) for fact checking, and minor adjustments have been made in response to the feedback received.

We would like to note that in addition to fact-checking the document, the Ministry has sent thoughts/feedback on the recommendations. It is pleasing to note that the Ministry and others have already made progress on some of the recommendations, such as increases in Public Health Units staffing and scenario planning. You will note that there is disagreement with some of the other recommendations contained in our report. That is not in itself surprising nor do we see it as unhelpful. We see diversity of opinion as healthy and reflective of judgements being challengeable in a situation where the future has uncertainties. We are happy to engage further if you would like us to comment on any matters that you would like further work on.

Now this initial phase of work is complete, we are shifting the focus of our work to capturing lessons and innovations to inform the 'fit-for-the-future' model. That future operating system, which will build on what is already in place, must reflect a different environment, namely a progressive opening of the borders and an increasingly vaccinated population (both domestically and globally).

The current COVID-19 response system was set up as a crisis management system to deal with a present and substantial threat. It has served us well delivering results that those involved in it can justifiably be proud of.

It is now clear that we will be managing and dealing with COVID-19 for the longer term. As such, the system must necessarily shift from a crisis management response and become part of the broader preparedness and response system that can sustainably manage cases of COVID-19 that occur while continuing to deliver other functions both in the health system and the COVID-19 preparedness and response system.

In terms of the future operating system we would like to identify (and working with the Strategic COVID-19 Public Health Advisory Group) the core components to you (and their current state of readiness and resourcing) of the operating system involving such things as:

- policies, processes, technologies and infrastructure deployed to support the flow of people across our border, including pre-departure and post-arrival testing, vaccine passports, and managed isolation and self-isolation
- building domestic population resilience and reducing pandemic risk including vaccination, baseline public health measures, and surveillance testing
- outbreak/case management, including tracing and tracking technologies and expectations, contact tracing, outbreak testing, isolation protocols, and the Alert Level Framework.

Similarly, we would like to actively explore the organisational arrangements that would be required to ensure clarity of accountability, decision rights and leadership. The future model, must in our opinion, have a culture of learning and innovation.

One additional area we would also like to highlight for further exploratory work is the readiness of the health system to manage the COVID-19 cases that may occur once the borders reopen. Outbreaks may well be able to be stamped out, but the cases that occur will need to be managed. Although substantial work has been done to date on boosting the public health response, it is not clear whether the personal health response including such things as agreed clinical pathways and adequacy of clinical infrastructure across community and hospital settings has been strengthened sufficiently to deal with the cases from COVID-19 outbreaks of various sizes and locations. In the future it would be desirable to ensure the health system continues to fully function whilst at the same time being able to care and treat cases that may require medical support.

The recently announced reform of the health system presents an opportunity to realign the COVID-19 response system to be well integrated into the wider health system. We would welcome the opportunity to connect in with work to establish the new public health agency Health New Zealand to ensure the right foundational pillars are put in place for the Agency to be positioned to be able to both continue to manage COVID-19 and respond effectively to pandemics and infectious disease outbreaks in the future.

An observation we have made is that due to the need to respond to the COVID-19 crisis in an extremely quick timeframe, some of the current system participants needed to operate in areas outside of their usual areas of expertise. We recognise that this was necessary (and we commend the efforts in all parts of the response) and that this enabled New Zealand to be successful in largely keeping the virus out of communities. Now is the time, however, to take a step back and assess roles across the system, look at where the expertise lies and play to each other's strengths in a fit-for-the-future operating model with high performing organisations delivering operational excellence at the forefront.

High performing organisations are those that meet a number of key success criteria. These criteria include:

- world-class leadership (that is typically demanding, inspiring, courageous, honest, transparent, empathetic, articulate and consistent)
- a clear and unifying sense of purpose and definition of success
- a culture that supports, encourages and celebrates people
- a performance management, measurement and recognition system that clearly identifies key performance criteria and connects people together across the organisation and with the organisation's sense of purpose
- being open minded to new ideas, seeking continuous performance enhancement and demonstrating agility.

For us to be effective in supporting and enabling continuous system improvements we propose to shift away from the 'review' and 'report' type approach used in our rapid review of the Auckland February 2021 outbreak to an approach that is iterative and identifies improvements in real time for immediate implementation, and provides you with regular briefings. It is critical for the system to be agile and able to adapt in real time.

For this to be an effective approach we will need to work alongside the Ministry, DPMC, PSC and other agencies through open, collegial and transparent relationships. We look forward to moving onward together as we continue to respond to COVID-19 and shift into an operating model that is world-class and fit-for-the-future for the benefit of all New Zealanders.

Yours sincerely



Sir Brian Roche

Chair of the COVID-19 Independent Continuous Review, Improvement and Advice Group