

District Health Board Te Poari Hauora ō Waitaha

CORPORATE OFFICE

Level 1 32 Oxford Terrace Christchurch Central **CHRISTCHURCH 8011**

Telephone: 0064 3 364 4134 Kathleen.Smitheram@cdhb.health.nz;

16 September 2021

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RE Official Information Act request CDHB 10684

I refer to your email dated 12 August 2021 requesting the following information under the Official Information Act from Canterbury DHB regarding PPE stock and readiness for another Covid outbreak. Specifically:

- 1. How much stock of PPE does each DHB currently hold? And is it enough if NZ is suddenly hit with another Covid outbreak? Does each department have adequate supply?
- 2. How frequently is PPE stock topped up? And how is extra PPE stock ordered? (i.e is it via a request to the MoH or independently sought?)
- 3. When is the next order of PPE due?
- 4. Has the DHB experienced any issues/ delays with ensuring PPE stock levels are sufficient?

Canterbury currently holds adequate PPE supplies, please refer to **Table one** (below).

Device Category	PPE Product Description	Unit of Measure	CDHB / WCDHB	On order through MoH online portal
PPE	N95 Mask (or equivalent)	each	73, 000	33,180
PPE	Procedure Mask (or equivalent)	each	893,850	
PPE	Isolation Gown (or equivalent)	each	35,705	10,000
PPE	Disposable Apron	each	105,180	
PPE	Glasses (or equivalent)	each	2,633	720
PPE	Face shield (or equivalent)	each	8,943	
PPE	Nitrile Gloves (all sizes)	pair	2,883,400	400,000

Table one:

Notes

This does not include PPE that is already on the wards / departments

CDHB/WCDHB PPE is sourced internally from the CDHB warehouse which in turn is replenished through ordering more PPE from the MoH central reserves via the online portal

We are supplied with stock from the Ministry of Health's central reserves, with each of our departments having access to PPE stock from the DHB's central warehouse.

Individual department's PPE stock is topped up as and when required based on the usage across the DHB region.

When extra stock is required to replenish the DHB's supply warehouse, it is ordered from the Ministry of Health's central reserves via an online portal, and this generally occurs on a weekly basis.

We have not experienced any issues recently in regard to ensuring our PPE stock levels are sufficient. We are confident we would have access to adequate supplies in the event of a COVID-19 outbreak in the community.

5. What specific health and safety measures does each DHB have in place if NZ is hit with another outbreak tomorrow?

Significant depth of experience and knowledge is available from a collaborative team of subject matter experts across the Canterbury Health System (Canterbury Health Laboratories, Community and Public Health, Canterbury Primary Response Group, Department of Infectious Diseases, IPC Service) that provide strategic and operational input on infection prevention and control for Managed Isolation Quarantine Facilities (MIQF), Hospital and Specialist Services (including private on request), Primary Care, Aged Residential and Long Term Care facilities and Disability sector. This is done by way of:

Strategic oversight includes activities such as:

- Monitoring overseas developments and advising on implications for the Canterbury region
- Ensuring IPC policy and practice remains fit for purpose and responsive to changes in epidemiology
- Providing balanced, timely and evidence-based decisions on complex, far-reaching, technical aspects of COVID-19 response

Operational Input includes activities such as:

- Coordinating with the laboratory and CPH to support surveillance testing
- Liaise with key stakeholders on trends and control strategies
- Collaborating with regional and national stakeholders on transmission risk management in MIQF
- Identifying opportunities to improve safety, health and welfare of staff

6. Is the DHB confident that if NZ was hit with another Covid outbreak tomorrow it would be ready?

Processes and procedures are in place to be able to triage and stream patients appropriately in both primary and secondary care. The Canterbury health system works as a whole to manage risk and support the wellbeing of the community and the workforce.

7. What has the DHB done to increase ICU capacity?

There has been no need to increase ICU staffed beds, however we have plans and resource in place to increase capacity should Covid impacts present / OR if necessary.

We have purchased the following additional clinical equipment in readiness for an outbreak

- Butterfly iQ ultrasound probe
- Hamilton T1 Transport ventilators x2
- o Hamilton C6 Ventilators & Hamilton H900 Humidifiers x4
- Draeger ventilators x2
- Bird Oxygen Blenders & F&P 950 Humidifiers x3
- PrisMax Renal dialysis machine x1
- o Glidescope Go (C-MAC) devices for intubation of critically ill patients

The Ministry of Health has also provided the Canterbury DHB with a variety of clinical equipment including invasive and non-invasive ventilators

8. Yesterday (11/08/2021), Ashley Bloomfield said there was now a well-developed ICU network across the country, but sources have told me that's not the case and nothing has changed except for converting ICU beds for pandemic which doesn't increase capacity - and the only new staff being trained are to replace staff that have left. Is this true?

There is a formal national ICU Network, clinically led, that ICU Clinical Director and ICU Nurse Managers participate in.

We have trained 30 staff from other work areas to provide care to ICU patients should our patient numbers increase. We are currently undertaking refresher training again of these staff.

We have also trained staff from theatre should we need to "prone" patients. We have made up x5 "prone Boxes"

We have approval from the MOH to employ a Nurse Educator to continue to undertake this training for us and the West Coast.

I trust that this satisfies your interest in this matter.

Please note that this response, or an edited version of this response, may be published on the Canterbury DHB website after your receipt of this response.

Yours sincerely

Tracey Maisey Executive Director Planning, Funding & Decision Support