

Clinical : Emergency Response - White Island  
Proactive Release : 08 April 2020

23 March 2020

9(2)(a)

Email 9(2)(a)

Dear 9(2)(a)

### Official Information Act (1982) Request

I write in response to your two Official Information Act requests, received by us on 25 February. You requested the following information, and given these were received on the same day, and related to the same event, we are responding to both requests here:

#### **Request 1:**

**The direct costs to the DHB relating to the Whakaari/White Island incident:**

- broken down by total figure;
- A breakdown of where the costs were lost from, (*including but not exclusive to: cancelling elective surgeries, having to reschedule outpatient appointments, equipment needed, additional staffing hours*)

#### **Request 2:**

**The number of elective surgeries/ procedures which were;**

- A) Rescheduled
- B) Postponed
- C) Cancelled

**Directly related to the White Island incident, between December 9 2019, and February 1 2020.**

**As well as outlining the total figure impacted during this time period, can you please break this down by outcome (as indicated above), and what department they were under, (*for example: cardiology, gynaecology*)?**

**Please also answer the following:**

- **Is the DHB still feeling the impacts of the pressure on services as a result of the event?**
- **If so, where is this being experienced most acutely (i.e. were there particular departments most impacted by the event, and its fallout)?**
- **Have delays or amendments to elective surgeries impacted wait lists? How was this being mitigated?**

As context for this response, Counties Manukau Health (CM Health) provides health and support services to people living in the Counties Manukau region (approx. 569,400 people). Our services are delivered via hospital, outpatient/ ambulatory and community-based models of care. We employ more than 7,500 staff, and see more than 118,000 people in our Emergency Department each year.

On 09 December 2019, Whakaari/ White Island erupted, resulting in death and serious injury to visitors on the island. The injured were all transferred to the four Regional Burn Units (RBUs), co-located with regional plastic surgery units at Christchurch Hospital, Christchurch; Hutt Hospital, Wellington; Waikato Hospital, Hamilton and Middlemore Hospital, Auckland.

- Middlemore Hospital hosts the National Burn Centre (NBC), which opened in 2006 and is co-located with the Auckland RBU
- The four RBUs and the NBC make up the New Zealand National Burn Service (NBS)

**Responses for Counties Manukau Health are below each question:**

**Request 1:**

**The direct costs to the DHB relating to the Whakaari/White Island incident:**

- broken down by total figure;
- a break down of where the costs were lost from, *(including but not exclusive to: cancelling elective surgeries, having to reschedule outpatient appointments, equipment needed, additional staffing hours)*

The 09 December 2019 Whakaari / White Island eruption has had a material operational and financial impact across many services. These costs reflected both direct patient care (theatre time, clinical supplies, including dressings/skin etc), and costs as a result of the wider impact on our systems (incident management costs, diversion of acute care resources etc.). Employee overtime hours also increased to cover the increased response requirements, and to enable us to redeploy clinical staff from other areas.

As the lead Burns Centre, CM Health is continuing to work with ACC and the Ministry of Health to confirm full actual costs incurred, and a process for recovery of additional costs. While we are resourcing this work to confirm actual patient-level costs, the requirement to prioritise resources to other priorities, including immediately to COVID-19 has necessitated an extension to the anticipated timeframes required to complete this work.

Initially cost estimates were provided to the Board and Hospital Advisory Committee in February 2020, and can be accessed via our website and were reported at the time. Updates will be provided as these are available.

**Request 2:**

**The number of elective surgeries/ procedures which were;**

- A) Rescheduled**
- B) Postponed**
- C) Cancelled**

**directly related to the White Island incident, between December 9 2019 and February 1 2020.**

As well as outlining the total figure impacted during this time period, can you please break this down by:

- Outcome (rescheduled, postponed, cancelled), and
- What department they were under, (for example: cardiology, gynaecology)?

As a result of prioritising these urgent patients, CM Health 184 elective surgery cases were cancelled in December 2019, and elective bookings also ceased, with the impact being 220 patients not receiving their planned surgery as scheduled. These cases have been rescheduled.

Please refer to the available detail below (as reported in February 2020):

Specialty	Postponed/ rescheduled
Orthopaedic	65
ORL	11
Urology	3
Gynaecology	11
Renal	2
Plastic and Hands	85
Gen. Surgery	43
<b>Total</b>	<b>220</b>

Table 1

Please also answer the following:

- Is the DHB still feeling the impacts of the pressure on services as a result of the event?
- If so, where is this being experienced most acutely (i.e. were there particular departments most impacted by the event, and its fallout)?
- Have delays or amendments to elective surgeries impacted wait lists? How was this being mitigated?

As at 20 March 2020, there are three patients being cared for at Middlemore Hospital. Discharged patients still require specialist follow-up and outpatient treatment as appropriate for burn recovery. Overseas patients were repatriated when clinically ready for travel.

The White Island response had an immediate impact on our elective surgical volume capacity, particularly in Plastic Surgery, General Surgery and Orthopaedics, as theatres and critical care capacity and staffing were prioritised to treating these individuals with acute injuries. In responding to this incident, our ability to achieve the national ESPI targets for elective surgical service waiting times was adversely impacted in December 2019 and January 2020. However, this is not an excessive deterioration from earlier months.

General Surgery and Plastics have the most cases waiting longer than target (more than 120 days). We continue to provide the CMDHB Board and Ministry of Health with regular reports on our performance and a recovery action plan to resolve. We have contacted and apologised to all those whose surgery may have been, or will need to be, deferred until a later date.

CM Health moved into the incident recovery phase in January 2020, with other/ routine elective activity resuming on 06 January 2020, and plans were initiated to ensure completion of the deferred elective surgery cases. This involves a team/ system approach, which we expect will occur within the next 3 – 6 months.

All the White Island patients coming to Counties Manukau were initially admitted to the Middlemore Hospital Intensive Care Unit and the High Dependency Unit was closed to maximise resources. The incident created wider challenges across all aspects of our services, including for example in the Central Sterile Supply Department (CSSD) (priority processing theatre equipment), in Non-clinical Support (cleaning and orderlies), and for corporate support services. Some paediatric patients for admission to critical care were diverted to the Starship Hospital, Auckland, and some spinal patients were directed to other regional centres. These services are all now back to usual service levels.

The metro-Auckland region DHBs and private hospitals have provided assistance to us in managing other health care service demands during this response (including loaning staff and caring for Counties Manukau patients), through December and into January 2020. We are still mindful of the impact of serious events such as this on our staff and their wellbeing, with many individuals taking on additional workloads and/or deferring holidays and our clinical staff treating extremely unwell individuals. We continue to provide additional pastoral care and access to Employee Assistance Programmes (EAP) to any CM Health employees seeking support.

The Ministry of Health has formally acknowledged the excellent work of our CM Health staff in responding to this disaster. The teams have also received letters of thanks from overseas receiving hospitals, complimenting the condition of patients received. The Australian Foreign Minister and the State Services Commissioner have also expressed their thanks via the Director-General of Health.

I trust this information satisfactorily answers your query. If you are not satisfied with this response you are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act. Please note that this response or an edited version of this may be published on the Counties Manukau DHB website.

Yours sincerely,



Fepulea'i Margie Apa  
Chief Executive Officer  
**Counties Manukau Health**