

# WAIKATO-TAINUI IWI RESPONSE PLAN COVID-19 PANDEMIC 2020

Amohia ake te ora o te iwi, ka puta ki te whei ao

We must find ways to look after the wellbeing of the people, and we will get through this.

Kiingi Tuuheitia Pootatau Te Wherowhero Te Tuawhitu

## Introduction

This document contains a plan for how Waikato-Tainui will deliver critical services and respond to minimise the harm and impacts caused by the COVID-19 virus.

This plan is focused on the role and function of Waikato-Tainui and supporting our team to support our tribal communities to cope through a pandemic situation.

# **Background**

There is a global outbreak of the COVID-19 coronavirus.

On 12 March 2020, COVID-19 was declared a pandemic by The World Health Organisation (WHO). This declaration was made to ensure that all countries were responding to the call-to-action. This afternoon our Prime Minister increased the alert level to 3, with an increase to alert level 4 in 48 hours on Wednesday, 25 March 2020 at 11.59pm.

This means that Aotearoa will be on lockdown.

The New Zealand government's 'Unite Against Covid-19' website advises that staying home is essential to halt the spread of the virus, and the lockdown will continue for four weeks. The Prime Minister has called on all everyone to break the chain of community transmission in order to contain Covid-19 and protect whanaau from its impacts.

This means that during the coming four weeks:

- All non-essential businesses must close by the alert level 4 deadline. All bars, restaurants, cafes, gyms, cinemas, pools, museums, libraries, playgrounds and any other place where the public congregate, must close their face to face function.
- All essential services will remain open. Essential services include supermarkets, service stations, pharmacies, clinics, lifeline utilities, civil defence and emergency.

- All indoor and outdoor events are banned.
- Schools and tertiary institutes will be closed.

As at 1 April, there are 647 cases of Covid-19 in New Zealand – an increase of 47 cases from the day before. 91 cases are located to the Waikato and 53 to the Counties Manukau – all within the boundaries of our tribal rohe.

It would appear from the information made available, that the majority of infected people have travelled in the months of February and March 2020 or have been in contact with people who have travelled over the last seven weeks.

Information currently being collected by the New Zealand Ministry of Health for the Waikato and Auckland regions at the following website:

https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases

As reflected in the trends, community transmission within our tribal rohe is highly likely. It's understood that more than 7,400 tests have been carried out this week averaging 1,300 per day. Reports from tribal members who have recently been tested, indicate that it is taking around 3 days to receive test results.

It is anticipated that the extent of community transmission will be better understood over the coming 48 hours.

Waikato-Tainui will continue to respond to the developing needs of our whaanau, in an aim to support tribal members, marae and their communities during this extraordinary time.

## What is a pandemic?

A pandemic is an epidemic of an infectious disease that has spread through human populations across geographical regions globally. Pandemics occur when the general population has no or little immunity against an emerging or re-emerging pathogen.

Pandemics are characterised by "the global spread of a novel type of virus that may cause unusually high morbidity and mortality rates for an extended period".

The scale of pandemics can vary greatly, but the Ministry of Health advocate planning for a severe-level event, which could result in 40% of the population becoming ill over an eight-week period and assumes a fatality rate of 2%. This is not a prediction but allows for Waikato-Tainui to plan for a very large event impacting all operations of the organisation and tribal members.

# Assumptions of a pandemic

The Ministry of Health has had an Influenza pandemic action plan [NZIPAP] in place for some time now. Because of the nature and urgency to respond to coronavirus, this plan has informed the country's response to COVID-19.

The NZIPAP was crafted to be flexible enough to enable a response to be tailored to the level of severity of a pandemic. Key actions outlined within that document reflect the more serious end of the scale of national health emergencies, but can be customised for less serious pandemics.

The impacts in New Zealand of the 1918/19 influenza pandemic represent the severe end of the spectrum in a standard planning model providing planners with a means of determining the scope, scale and duration of future severe pandemics.

These assumptions have helped form the basis for our own response to COVID-19:

- That planning be undertaken for a pandemic that follows the standard planning assumptions shown in Ministry of Health planning documents. These assumptions include the following:
  - o A pandemic wave lasts 8 weeks
  - o 15% of the workforce is absent for 8 weeks because school closures oblige working parents to stay home and look after children.
  - o 40% of those remaining at work become ill at some time during the 8 weeks of the pandemic wave (and therefore 60% of those remaining at work will remain healthy).
  - o There is a 100% additional absence rate that is, for every person in the remaining workforce who gets ill, another does not come to work because of the need to look after a spouse or children, or a disinclination to travel or work.
  - o There is a 2% fatality rate on average.
- Notwithstanding the above, a pandémic could occur in one or more waves of equal or varying degrees of severity.

# **Maaori susceptibility**

It is important to note that typical pandemic responses will jar with how Maaoridom might typically respond to a crisis and that this may cause frustration and pushback for our whaanau. Pandemic management plans use social distancing as a tool to help reduce the spread of a virus. A typical Maaori response to any crisis is to wrap around and come together to offer communities of support, face to face contact and connect. We will need to challenge this and find other ways of connecting from a distance, through the use of technology and other means.

Ngaati Kahungunu have modelled how this can be done to replace our hariru process during this period, and discussions have begun here in Waikato around Poukai and our own approach. We support the raised hand of the Paimaarire Salute.

The 1918/19 pandemic had a severe impact on Maaori, whose death rate of 4.2 percent was approximately five to seven times higher than the non-Maaori death rate. Maaori and Pacific peoples in New Zealand had higher rates of morbidity for the influenza A (H1N1) 2009 pandemic than other ethnic groups.

Because of the impact these past pandemics have had on our Maaori populations we must approach COVID-19 with caution. We must find ways to overcome this challenge, but also ensure our tikanga, kawa and values of manaakitanga and kaitiakitanga and whanaungatanga can be upheld.

# **Business Continuity**

Our business continuity arrangements support our organisation to continue to provide critical services to tribal members, Marae and their communities. Our capability and capacity to function when alert level 4 is mandatory, is fundamental to our ability to sustain over the duration of the pandemic.

For Waikato-Tainui these are our priorities under business continuity:

- 1. Ensuring the safety and welfare of our kaimahi;
- 2. Protecting how Waikato-Tainui maintains its collective assets and investments;
- 3. Enabling Waikato-Tainui to meet its financial obligations;
- 4. Minimising business disruption; and
- 5. Enabling Waikato-Tainui kaimahi to work from home.

Business continuity planning is the process of creating systems of prevention and recovery to deal with potential threats to a company. An example includes ensuring that our networks, servers, desktop, laptop computers and wireless devices are accessible, functional to support maximum productivity, and can be maintained remotely.

Ongoing oversight and recovery strategies give confidence to governance and senior leadership that the needs of the business will be met.

Our Crisis Management Team (CMT) is overseeing business continuity planning to enable the delivery of critical services. These services include:

Critical Services
All Internal Controls
Delegated Financial Authority
Strategic Planning
Stakeholder Engagement
Strategic Support & Pandemic Oversight
Internal & External Communications
Finance, Audit & Risk
Information & Communication Technology
Infrastructure, network & security
Health & Safety
Human Resources, People & Culture

Tribal Grants & General Enquiries
Governance, Legal & Policy

Supporting business continuity, is our virus pandemic plan which has been split into three sections and includes actions under each of the following Ministry of Health "Alert Codes":

White	Monitoring and Preparation
Yellow	Standby
Red	Activation

A high-level overview of the virus pandemic plan and key actions that the CMT are responsible for, is <u>attached</u> at Appendix 1.

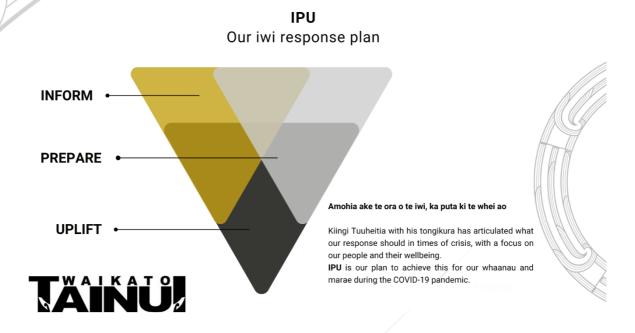
A Green – Recovery alert code section is currently a developing work in progress and will be included as an addendum in due course.

# **Iwi Response Initiatives**

As detailed in our short and long-term strategic documents, Waikato-Tainui is committed to the health and wellbeing of its iwi members.

Everything we do to respond to the needs of our iwi at this time, is underpinned by our IPU approach. IPU maps out the thinking behind developing pathways to support our whaanau and marae through this pandemic.

### **Our IPU Approach**



#### **INFORM**

To raise the awareness of the risk of COVID-19 amongst whaanau and marae.

- Sharing quality information (to both whaanau and marae).
- Know our people and where they are at (status).
- Identify needs and levels of vulnerability.

#### **PREPARE**

To ensure that our whaanau have ready, timely, and safe access to supports and resources, particularly those groups identified as 'vulnerable' within our communities.

- Initiate immunisations for our most 'vulnerable' communities
- Leverage relationships / brokering support from external agencies
- Fill gaps i.e. we provide the support/resources.

#### **UPLIFT**

To support our whaanau to maintain their taha tinana, taha wairua, taha hinengaro, taha whaanau and our commitment to Kiingitanga in strong positive Waikato ways. We will "hiki wairua" to ensure that we are "uniquely us", that we continue to maintain our Waikatotanga and Tainuitanga in our responses and initiatives, and that we remain whakapono but also comforting to ease mental health and anxiety.

• Find ways and channels to uplift wairua and strengthen connection from a distance.

### Staggered approach (Tiers 1, 2 & 3)

Our ability to respond to the specific needs of iwi members in an aim to minimise the harm and impacts caused by the COVID-19 virus, is also of fundamental importance. The way in which Waikato-Tainui is able to respond however, will become challenging from 11.59pm on Wednesday, 25 March 2020 when Aotearoa will be on lockdown.

## TIER 1: Initiatives that have the most impact without compromising business continuity – Waikato-Tainui Tribal Members

These are things that Waikato-Tainui are:

- 1. currently well-resourced to deliver;
- 2. able to do quickly; and
- 3. able to do extremely well.

Following the initial call to action from government on 19 March, Waikato-Tainui started to touch base directly with tribal members and Marae by developing our frontline resources into a dedicated Call Centre.

Marae whaanau and regional service providers have also been supporting the dissemination of key resources and are helping us to collect information about our people that are most vulnerable to the virus. The most vulnerable tribal members are:

- Kaumaatua 55 years and over;
- Tamariki under 5 years;
- Whaanau with weakened immune systems; and
- Whaanau with underlying medical conditions including high blood pressure, diabetes, cardiovascular problems, chronic respiratory disease and cancer.

We will now turn our attention towards increasing our efforts to ensure that we reach out to as many tribal members as we can as we unite to halt the spread of Covid-19 as the country moves to full isolation from 11.59pm on Wednesday, 25 March 2020.

Plans are underway to deliver initiatives that not only support our tribal members most vulnerable to the virus, but also those who are impacted by the lockdown where it causes immediate hardship.

We will turn our strategic thinking towards:

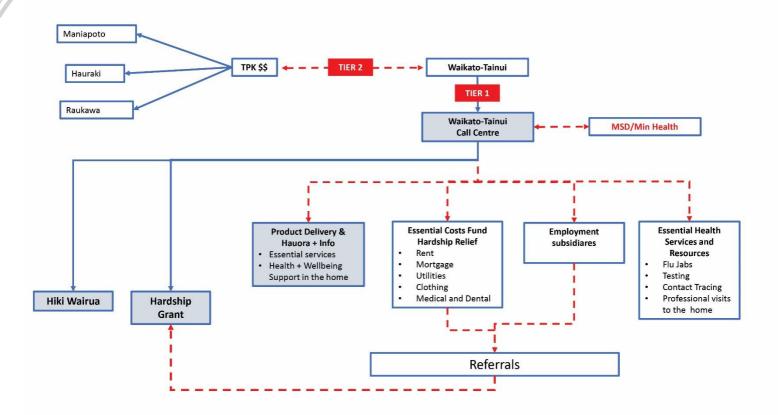
- Fast-tracking support utilising current grant policy and internal controls;
- developing tribal hardship relief to respond quickly to specific impacts; and
- by advocating on behalf of our most vulnerable with Crown agencies, related services and service providers.

#### TIER 2: Initiatives that support our Tainui Waka Alliance

Tier 2 focuses on developing our Tier 1 programme to extend our support to our whaanaunga from Maniapoto, Hauraki and Raukawa.

Waikato-Tainui would utilise government funding (currently being prioritised by Te Puni Kokiri), to grow our capacity to respond to Tainui Waka tribal member needs also.

A preliminary approach based on the types of initiatives we have been planning and / or implementing, is depicted in the following diagram:



## TIER 3: Initiatives that increase efforts to minimise the harm and impacts of the Covid-19 Virus across lwi Maaori

Under the korowai of the Kiingitanga, Tier 3 focuses on supporting initiatives that share strategies, plans and information to Iwi Maaori across Aotearoa. Many of our initial information that was developed have been utilised by many iwi and non-government agencies across the motu, including:

- Waikato-Tainui Marae plans,
- Waikato-Tainui lwi response plans,
- Waikato-Tainui communication material and collateral; and
- Waikato-Tainui general information about Covid-19

This includes the Waikato-Tainui Covid-19 Response Framework – Inform, Prepare and Uplift – named our IPU Framework.

We have been working with service providers and other agencies to understand what resources are available to help Maaori through government funded initiatives.

To expediate plans that enable Waikato-Tainui to act quickly, we have largely relied upon our own tribal database and related systems, and we have developed our own resources to disseminate utilising tribal funds as far as we are able within the parameters of approved policy and approved budget limitations.

We recognise that not all iwi have access to dedicated infrastructure and resources.

### **Our Work Programmes**

The following schedules detail our initiatives under Tiers 1, 2 & 3 and we have dedicated staff responsible for the delivery of key actions. Please contact Waikato-Tainui for further details: 0800 TAINUI or directly to our Strategy and Relationships Manager, Manaaki Nepia – Manaaki.Nepia@tainui.co.nz:

# lwi Response Team Work Programmes

Initiative	Purpose:
Call Centre	<ul> <li>Receive General Enquiries 0800 TAINUI</li> <li>Contact vulnerable tribal members + update salesforce</li> <li>Phone, Email, Mail</li> <li>Complete questionnaire to identify needs.</li> <li>Referral for support.</li> <li>External link – questionnaire to Marae and Whaanau to help their kaumaatua to complete</li> </ul>
Referral direct to Essential Services	Directory: Call Centre transfer to Essential Services  Tribal member direct to regional agent:  • Leave and self-isolation support  • Help with Essential Costs  • Wage subsidy scheme  • Business cash flow and tax measures  • Wider \$12.1 billion package  • Support for Maaaori communities and businesses  • Government Helpline
Tribal Hardship Grants	Aligned with current tribal policy     Special criteria
Flu Vaccinations	Collaboration with DHB – vaccinate kaumaatua + vulnerable and then wider whaanau

Initiative	Purpose:
	<ul> <li>Te Hiwa: Mobile services to remote areas incl. Kaawhia, Whaingaroa, Te Puuaha o Waikato, South Auckland, Ngaati Hauaa, Te Awamutu</li> <li>Vaccination of frontline staff &amp; volunteers</li> </ul>
Covid-19 CBAC Testing	Collaboration with DHB – test symptomatic
	<ul> <li>CBAC / Testing stations – Tainui Waka</li> <li>Hamilton - Claudelands Event Centre - (8am-8pm)</li> <li>Ngaaruawaahia - Panthers Rugby League Club - (9am-3pm)</li> <li>Huntly - Huntly War Memorial - (10:30am-3pm)</li> <li>Tokoroa - Tokoroa Hospital - (8am-3pm)</li> <li>Te Kuiti - Te Kuiti Hospital - (9am-3pm)</li> <li>Taumarunui - Taumarunui Hospital - (9am-3pm)</li> <li>Te Aroha - (9am-3pm)</li> </ul>
Special Home Visits	<ul> <li>Vaccination</li> <li>Testing</li> <li>U5's Action Plan</li> <li>Infection Action Plan</li> <li>Other</li> </ul>
Hauora / Care Pack	<ul> <li>Production + distribution hub at Hopuhopu</li> <li>Collaboration with Essential Services – info + products</li> <li>Packs direct to vulnerable</li> <li>Packs direct to Marae</li> </ul>
Meals on Wheels – hardship relief	<ul> <li>Provide Meals to the vulnerable.</li> <li>Provide Meals to support Service Providers.</li> </ul>

Initiative	Purpose:
Wifi in the Home – hardship relief	Wifi to the vulnerable who meet criteria.
Mobile Phones – hardship relief	Phone to the vulnerable who meet criteria.
Re-deployment Opportunities – hardship relief	Te Rau Mahi – matching tribal members to partners + Covid-19 Employment initiatives
Tribal Business – hardship relief	Opportunities to utilise our people in business – key services and / or products. Include TGH and College.
Maara Kai – hardship relief	Supplies and set up from tribal nursery (tbc)
Communications Strategy	Launch and promote all initiatives
Hiki Wairua	Initiatives – internal and external
Data Governance Project	Capture of quality data to support initiatives  • Refining location of vulnerable + other  • Update / validation of tribal register data  Collaboration of Datasets

Initiative	Purpose:
	DHB / NHI     Other