

AT Pandemic Plan

31 March 2022





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1 Chief Executive's Foreword

Auckland Transport (AT)'s vision for risk management is for all decision makers to be fully informed of risks and that risks be effectively managed in the achievement of our organisational objectives. As employees of a Council Controlled Organisation (CCO), and providers of essential services to the Auckland region/Tāmaki Makaurau, we have a duty to conduct critical business activities in line with Auckland Council (council) general policy, and the Civil Defence Emergency Management Act (2002) to provide services even if the organisation is impacted by a crisis.

The AT Pandemic Response Plan (PRP) provides guidance on the roles, responsibilities, processes, and tools that are an adjunct to the AT Crisis Management Plan and facilitate effective response to a Pandemic for our Board, Executive Leadership Team (ELT) and business areas across the organisation.

The plan incorporates the Auckland Transport (AT) values of Auahatanga – better, bolder, together; Whanuangatanga – we connect; Tiakitanga – safe with us; Manaakitanga – we care, full stop, and reinforces AT's commitment to the principles of Te Tiriti o Waitangi.

As we responded to Covid-19 over the last 18 months we have seen significant changes and a substantial increase in knowledge about the role of transportation in pandemics. Auckland Transport, the New Zealand Transport Agency (NZTA)/Waka Kotahi and the transport industry have produced new strategies and ways of doing business that have increased the safety, security and resilience of our transport systems whilst facing a near perfect storm in the transport industry.

AT has incorporated these changes into this plan including pandemic impacts on public transport and delivery of the Regional Land Transport Plan (RLTP), leadership decisions and the practices that have arisen to date. Included in the plan are recommendations captured in 2020 from a review of AT's response to the current COVID-19 outbreak and international best practice on pandemic response for the transport industry.

Shane Ellison Chief Executive





2 Authority and classification

Owner	Executive GM Risk and Assurance, Rodger Murphy,			
Stakeholders for consultation	All Auckland Transport Business Units			
Authorised by	Chief Executive			
Name	Shane Ellison	Signature		
Version no	2			
Issue date	01 April 2022			
Review date	01 April 2023			
Plan contact	Brigitte Theuma, Manager R	isk Services		
Document Classification				

Copies of this plan are available on the Engine Room





3 Introduction

Community services are vital to the functioning of the communities in which they operate. With people across the Auckland Region/Tamaki Makaurau, New Zealand, and the world, affected by COVID-19 and the ongoing challenges of responding to it, our transport systems must be as safe as possible and available toall. It is vital that simultaneously AT continues to meet its responsibilities as a PCBU for our people, and contractors, and support the council, our operators, our contractors, and the people of Auckland.

At the date of writing this plan, COVID-19 is the most recent pandemic. In the past, there have been other pandemics - H1N1 ("Swine Flu") in 2009, H3N2 ("Hong Kong Flu") in 1968–1969, and H2N2 ("Asian Flu") in 1957–1958. Others are likely to occur in the future. All pandemics have had real effects on health, transportation, and the delivery model in AT.

3.1 Pandemic basics

Characteristics of pandemics

A pandemic is a "global disease outbreak" that may easily spread because there is little or no immunity to the disease and thereby result in a high rate of sickness and death. At the onset of a pandemic, no vaccine is available and there are limited, if any, successful medical treatments. Treatment or a vaccine may take some time to become available, if ever. Pandemics differ in their persistence, contagiousness, method of contagion, mutability, and lethality. These factors determine risk and must be included in the response to the disease¹. Understanding pandemics, their impacts on AT, and potential effective responses to them has become more important, as the World Health Organization warns, the world is now "living in a time of viruses."

What to expect

Given the high rate of global traffic, the pandemic virus may spread rapidly with little or no time to prepare.

Vaccines, anti-viral agents, and antibiotics to treat secondary infections will be in short supply and will be unequally distributed. It will be several months before a vaccination becomes available.

Medical facilities are likely to be overwhelmed and alternative assessment centres, at the very least will be needed.

Widespread illness may result in sudden and potentially significant shortages of personnel to provide essential community services.

The effect of a pandemic on communities will be relatively prolonged when compared to other natural disasters, as it is expected that outbreaks will occur.

Comparing the pandemic to other natural or man-made disasters

Most natural and man-made hazards create a distinct emergency event - an occurrence that lasts for a specific, brief period. There is an event and then a post event response and recovery period. Pandemics do not present as a distinct "event." Once there is an initial outbreak, the pandemic can last for months or longer. Instead of





a recovery or return to normal there may be a series of recovery phases. Pandemics have other characteristics that differ from hazards (see the table below).

Pandemic
Can last for months or longer after the initial onset, with no
certain ending or a threat that is ongoing, though possibly
more manageable.
Social impacts
May require change of habits and modification of normal
operations
Legislative and administrative issues may require special
attention
Increased supporting role for state and community
Long-term service disruptions and revenue impacts
May require a series of recovery phases

Table 1 Differences between natural/man-made hazards and pandemics1

3.2 Scope

The plan is designed to respond to any pandemic event that affects the operations of the organisation, our people, customers, suppliers or stakeholders, or our services and is limited to the operations of AT. The plan is governed by the Business Continuity and Recovery Management Policy.

This plan is used in conjunction with the Crisis Management Plan and AT Business Continuity Plan (BCPs). It supplements these plans by addressing considerations and elements specific to pandemics and emerging infectious diseases.

The plan is aligned with the responsibilities contained in the Governance Manual for substantive council-controlled organisations October 2019 for the management of risk and the AT COVID-19 Response Policy

The Ministry of Health (MoH) is the lead agency for any response to a Pandemic outbreak in New Zealand. The AT approach is to align with MoH recommendations and health advice. This plan supports, but does not cover, any response and recovery assumed by the Ministry of Health (MoH) the lead agency for any pandemic, Auckland Council (AC), Auckland Emergency Management (AEM), and/or any other agencies that respond to a pandemic outbreak in New Zealand.

The processes in this plan do not replace the responsibilities of our people to:

- Perform regular risk assessments and apply the appropriate mitigation in line with our Risk Management Policy, and
- Adhere to the Business Continuity requirements in the Civil Defence and Emergency Management
 Act (2002) to plan for business disruption, and
- Prepare and maintain BCPs for each functional area managed by an Executive General Manager,
 and
- Adhere to all requirements in the Health and Safety at Work Act.
- Assist Auckland Council to respond to the outbreak via the Lifeline Utilities Coordinator,
 Emergency Operations Centre when needed.

¹ National Academies of Sciences, Engineering, and Medicine 2021. A Pandemic Playbook for Transportation Agencies. Washington, DC: The National Academies Press.





3.3 Purpose

This document:

- Details the AT principles for pandemic response
- Outlines the AT measures that will be considered in response to a pandemic
- Describes the activities that are undertaken to ensure that AT is prepared for a pandemic outbreak that affects the population in New Zealand, and specifically the Auckland Region/ Tāmaki Makaurau
- Sets out the AT procedures to respond to a pandemic or potential pandemic in New Zealand that impacts on the Auckland Region
- Can be used in preparation for a pandemic that has not reached New Zealand (NZ) shores, but has the potential to disrupt the operations of AT and its partners, and/or arrive in NZ and affect Auckland Region/ Tāmaki Makaurau

The document is designed to allow AT to protect our AT personnel, directors, and contractors as far as practicable, continue to serve our communities, and minimise the impacts to AT and Auckland Council.

The plan complies with the Civil Defence and Emergency Management Act 2002 19(2), which requires that government agencies and Lifeline Utilities functions "to the fullest possible extent (even at a reduced level)".

AT will be guided by the MoH as to generic workplace strategies and preventative measures during a pandemic. AT and its contractors have a substantial number of customer-facing departments and teams. Where required, AT may implement measures to reduce the probability of infection from members of the public by introducing temporary preventative measures at points of service.

This plan is aligned with the MoH New Zealand Influenza Pandemic Plan (Second Edition) 2017.

3.4 Audience

This plan is intended for the use of the AT Board (the board), ELT, Senior Leadership Team (SLT) and AT staff and contractors involved in planning, preparation, or response to or recovery from a pandemic that impacts on New Zealand, and the Auckland Region/Tāmaki Makaurau.

3.5 Concept

This plan has the support of ATs Executive Leadership Team (ELT) and the board

The Crisis Management Team is activated for the strategic response to a pandemic. In support, an extended operational working group may also be set up to provide tactical support to the CMT.

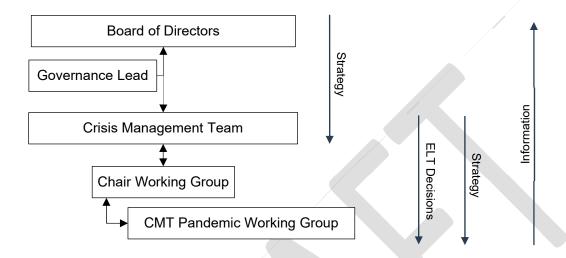
Simultaneously, the ATOC Incident Management Team (IMT), may be activated to support Auckland Council, Auckland Emergency Management (AEM) who are responsible for coordinating the response to the Civil Defence requirements of a pandemic in New Zealand. The following information is supplied via the Emergency Coordination Centre (ECC) when activated.

- Situation reports
- Credible communication information from the Public Information Manager (PIM)





- Emerging emergency information for any concurrent events
- The Board have agreed their roles and responsibilities for any crisis as outlined in the Business Continuity and Recovery Policy (2021), and the ELT, represented by the Chair of the CMT liaises with the Governance Lead to agree requirement for the Board to meet. At the Board Meetings the Chair of the CMT will formally update the members about the response to any pandemic, and receive feedback and direction from the Board, as necessary. The governance structure for crisis management is summarised in the diagram below.



3.6 Plan Assumptions

3.6.1 Crisis Management Team (CMT)

- Enough knowledgeable people are available to activate the CMT and initiate crisis management proceedings.
- The CMT will activate and adapted to suit outbreaks in specific regions or communities across
 Auckland based on their severity and implication to AT people and the services it manages.
- The CMT will have the right people in place in a pandemic—including an industrial hygienist, or a
 health, safety and wellbeing medical professional, or other medical professional to provide guidance
 and advise AT and the board and credibility to the mitigation and response efforts.

3.6.2 Continuity of Operations

Business continuity

- All AT functions are compliant with the Business Continuity and Recovery Policy (2021) and have a current, robust Business Continuity Plan (BCP).
- Essential services/critical functions as defined in the BCPs, and support functions will continue to be dependent on our people to operate.
- The BCPs have appropriate delegations assigned should the ELT, Senior Leadership Teams, or essential roles be impacted.
- Those people who are required to attend AT premises to perform their duties are able to enter the buildings to work and are issued with documentation identifying them as essential workers. (See 3.6.5 Safety for protocols in place for the health safety and wellbeing of our people working in AT buildings)
- Opportunities to work flexibly are available to all AT staff and will be mandated, as necessary.
- New policies and arrangements may be developed depending on the situation.





• Our people have the equipment needed to deliver critical processes and procedures

Incident management

- The ATOC and the Harbourmaster continue to manage incidents using the New Zealand Coordinated Incident Management System (CIMS)
- All AT functions that need an Incident Management Plan have a current, robust IMP to:
 - Respond to concurrent incidents (ATOC, Security Operations Centre (SOC), Harbourmaster).
 - Contribute to the regional response to a pandemic.

Emergency management

All AT functions those that own Emergency Response Plans to respond location-based emergencies
have current, robust plans that are used to respond to an emergency that occurs at those locations
e.g., ATOC, 20 Viaduct Harbour, Britomart Station, Auckland Harbour.

3.6.3 Monitoring

 AT monitors the severity of any pandemic and establishes continuity triggers for the unique nature of a pandemic event.

3.6.4 Guidance

- The Ministry of Health (MoH) provides information and/ or direction leading up to and during a pandemic.
- Auckland Council is provided with guidance and/or direction from the National Emergency Management Agency (NEMA) during a declared Civil Defence Emergency which will be cascaded to AT via our IMT.

3.6.5 **Safety**

The following safety measures may be required to respond to a pandemic.

- The Safety team supplies health information from agreed credible sources, including:
 - whether Personal Protective Equipment (PPE) is required for front line workers, and
 - in AT controlled buildings, what health, safety and wellbeing signage or instructions are required in AT occupied buildings, council buildings where AT personnel are collocated, and those that are associated with AT services (Stations, Terminals, etc.)
 - Facilitation of Health & Safety risk assessments.
- The Safety Team aids internal functions, as necessary, for instance review of internal work plans/methods i.e., site investigation for property acquisitions, review of submitted contractor pandemic return to work control plans
- The Integrated Networks together with the Safety team review submitted contractor pandemic return to work control pans.
- AT Metro Services acts on any Health Safety and Wellbeing measures required for customers in response to guidance from MoT and Waka Kotahi, as they are the lead agencies for Transport Operator Response





- AT Parking and Enforcement act on any Health Safety and Wellbeing measures required for customers in response to guidance from MoT for all on and off-street parking
- AT Metro provides guidance on H&S measures for employees of transport operators.
- AT controlled buildings are operational during a pandemic; right of entry may be limited to our people who provide essential services.
- Workplace Experience keep information about the use of AT Head Office and may asked to leverage council wider portfolio of properties to secure alternative accommodation as necessary for social distancing.
- Metro Services, Parking, Facilities Operations is consulted on the impact to AT assets in the public transport network.²
- The Road Network Engineering Team, together with ATOC, implement operational changes to support increased safety of active modes of transport and redirect vehicular traffic (temporary cycle lanes, auto pedestrian calls for traffic signals, etc.).
- Business Technology supports increased use of virtual communication tools if face to face interactions are not viable.
- Workplace Experience, with the assistance of the Procurement Team ensures that there is appropriate
 quantities and type of PPE is procured (e.g., hand sanitiser, masks etc.) and supplied to front line staff
 and in AT occupied buildings.
- AT adapts to any restrictions that may be implemented in the Auckland Region/ Tāmaki Makaurau.
- AT will ensure that all buildings used by AT staff have appropriate health, safety, and wellbeing
 protocols in place during a pandemic, using MoH guidance and/or orders issued under the Pandemic
 Act, assistance from the Safety team, and direction from the ELT

3.6.6 Communications

- Stakeholder Communications and Communities (SC&C) and Internal Communications have a Crisis Communications Plan (CCP) to support all communication activities during a crisis and/or pandemic.
- The internal and external communications teams work collaboratively to ensure that there is consistent messaging throughout the pandemic outbreak.
- The SC&C communications team consult with Public Information Manager (PIM) when a regional or national emergency declaration has been made.

3.6.7 Stakeholder Management

All AT functions have identified all current and critical stakeholders and will work to establish
appropriate communications and contact scenarios with the assistance of the SC&C function. This
information is linked to the Crisis Communications Plan and updated regularly.

3.6.8 Travel

- Travel restrictions, such as limitations on mass transit, implemented at international, national, and local levels may affect:
 - our ability to generate revenue
 - the ability of some of our people and contractor staff to report for work



² From 16 January 2022 responsibility for the Rail Stations will transfer to the new franchisee



3.6.9 Finance

- Financial resources are available or will be made available through regional or local government resources.
- Finance assigns specific Work Breakdown structure (WBS) codes to track costs associated with the Pandemic to support analysis and budgeting.

3.6.10 Intelligence and Information

 Misinformation will proliferate, via social media and the internet, and it will be necessary to validate any data not received from named reputable sources.

3.7 Legislation and supplementary documentation

The following legislation, agreements or documents are associated with this plan.

Table 2 Legislation and external pandemic response plans

Document Name	Location
Civil Defence and Emergency Management Act 2002	NEMA
Communicable Disease Control Manual 2012	Ministry of Health
COVID-19 Epidemic Notices and Orders (including Maritime)	Ministry of Health
COVID-19 Public Response Act 2020	New Zealand Legislation
Epidemic Preparedness Act 2006	New Zealand Legislation
Health Act 1956	New Zealand Legislation
Health Amendment Act 2006	New Zealand Legislation
Health and Safety at Work Act 2015	New Zealand Legislation
Human Rights Act 1993	New Zealand Legislation
Land Transport Act 1988	New Zealand Legislation
Local Government Act 2002	New Zealand Legislation
National Health Emergency Plan (Ministry of Health 2015)	Ministry of Health
National Health Emergency Plan: Infectious Diseases	Ministry of Health
Navigational Safety Bylaw 2014	Auckland Transport
NEMA Pandemic Planning Guide 2006	<u>NEMA</u>
New Zealand Bill of Rights Act 1990	New Zealand Legislation
New Zealand Influenza Pandemic Plan (2010)	Ministry of Health
Port and Harbour Marine Safety Code	Maritime New Zealand
Ports of Auckland Limited Pandemic Response Plan	
Privacy Act 1993	New Zealand Legislation
Public Transport Management Act 2008	New Zealand Legislation
Railways Act 2005	New Zealand Legislation
Waka Kotahi Pandemic Response Plan	



The following documents are used in conjunction this plan. These are internal procedures, standards and guidelines that directly support any pandemic response.

Table 3 Documents used in conjunction with Pandemic Response Plan

Document Name	Location
AT COVID-19 Response Policy ³	Covid19 Response Vaccination
	Policy
Business Continuity Plans	Each BU
Crisis Management Plan	Crisis Management Plan
Governance manual for substantive organisations	Auckland Council
Health, Safety and Wellbeing Policy	Health, Safety and Wellbeing
	Policy
Marine Oil Spills	Marine Oil Spills
Risk Management Framework	Risk Management Framework

3.8 Digital resources

The following reliable digital resources are available to support situational awareness and decision making.

Table 4 Digital resources

Resource	Access
Auckland Regional Public Health Services	https://www.arphs.health.nz/
Centres for Disease Control and	https://www.cdc.gov/
Prevention	
Employment New Zealand	https://www.employment.govt.nz/
Engine Room	https://aucklandtransport.sharepoint.com/sites/engineroom
Healthline	https://healthy.org.nz/
Ministry of Health NZ	https://www.health.govt.nz/
National Emergency Management Agency	https://www.civildefence.govt.nz/
Unite against COVID-19	https://covid19.govt.nz
WorkSafe	https://worksafe.govt.nz/
World Health Organisation	https://www.who.int/
NZ COVID Tracer	Download Application from Apple Store, or Android Store

3.9 Terms and definitions

Table 5 Terms and definitions

Term	Definition
AEM	Auckland Emergency Management
ARPHS	Auckland Regional Public Health Services
AT	Auckland Transport
ATOC	Auckland Transport Operations Centre
CMT	Crisis Management Team
EGM	Executive General Manager
ELT	Executive Leadership Team
Endemic	A disease persisting in a population or region, generally having settled to a relatively constant rate of occurrence.
HSW	Health, Safety and Wellbeing
HSWA	Health and Safety at Work Act
МоН	Ministry of Health
MoT	Ministry of Transport, Te Manatū Waka
Operators	Organisations responsible for operating AT Public Transport (PT)

³ Due for review June 2022





Term	Definition
Pandemic	An epidemic that becomes very widespread and affects a whole region, a continent, or the world.
Person Conducting Business or Undertaking (PCBU)	A PCBU means a Person Conducting a Business or Undertaking. It is a broad concept used throughout HSWA to describe all types of modern working arrangements which we commonly refer to as businesses. Businesses are usually conducted with a view to making a profit and have a degree of organisation, system, and continuity.
Playbook	A stock of usual tactics or methods
POAL	Ports of Auckland Limited
Personal Protective Equipment (PPE)	Personal Protective Equipment is anything used or worn by a person (including clothing) to minimise risks to the person's health and safety. This may include respiratory protective equipment, hearing protection, eye protection, protective clothing, and safety harness systems.
POAL	Ports of Auckland limited
SLT	Senior Leadership Team
SOC	Security Operations Centre
Social Distancing	Within the workplace, social distancing measures could take the form of: modifying the frequency and type of face-to-face employee encounters (e.g., placing moratoriums on hand-shaking, substituting teleconferences for face-to-face meetings, staggering breaks, posting infection control guidelines); promoting flexible work hours or worksite, (e.g., remote working); promoting social distancing between employees and customers to maintain one metre spatial separation between people; and implementing strategies that request and enable employees with influenza to stay home at the first sign of symptoms.
Stakeholders	 A person with an interest or concern in AT including but not limited to: Auckland Council (including Auckland Emergency Management, elected members, local boards), WK, POAL, Central Government (including National Emergency Management Agency) Employees, contractors, suppliers (including business consulting companies, engineering consultants), Business partners, service providers, alliances, Customers, and members of the public, Communities, special interest groups (active modes, environment), Trade unions t, Internal stakeholders (member of the Board of Directors, Executive Leadership Team, Senior Leadership Teams, Business Units, specialised teams), and Sub-lessees of 20 Viaduct Harbour
WK	Waka Kotahi/New Zealand Transport Agency
AALZ	waka Kutani/New Zearanu Transport Agency





4 Principles

AT has established the following principles for response during a pandemic:

- The safety and wellbeing of our people and their families is at the forefront of our approach.
- Supporting our community, we enable our communities to function the best way we can.
- Resilience of our services, we are agile and respond to the situation as it unfolds.
- Optimise financial management, we support Council to not breach its debt covenant.
- Collaborative partnering, we ensure joined up thinking across our eco-system.
- Build capacity, we are agile in how we respond and deploy our resources.
- We **support and maximise** MoH guidelines and the government approach.
- Sustaining Auckland's economy, we have a critical role to play in sustaining employment and business with our suppliers.

These principles incorporate the Auckland Transport (AT) values of Auahatanga – better, bolder, together; Whanuangatanga – we connect; Tiakitanga – safe with us; Manaakitanga – we care, full stop!





5 Impacts and assumptions

5.1 Assumptions

The New Zealand Government and its agencies reference a standard model to consider the potential impact of a pandemic. This modelling predicts that a severe pandemic may impact the health and wellbeing of up to 40% of the population.

This means that, at its peak, if uncontained, up to a third of New Zealand's population may be ill or recovering from illness.⁴

Additionally, it is recognised that there is no way to know the specific characteristics of a novel virus that may start a pandemic.

Should a pandemic appear, Auckland Transport will source information directly from the Ministry of Health and Auckland Regional Health Services and follow published guidance.

AT makes the following assumptions to facilitate pandemic planning efforts:

Pandemic information

- Efficient and sustained person-to-person transmission signals an imminent pandemic in country
- The timeline for response will be extended and indeterminate rather than finite.
- There may be profound employee, community, and economic impacts.
- Susceptibility to a pandemic will be universal.
- The infection rate will be 40% in the overall population over an eight-week period during the pandemic.⁵
- Among working adults, an average of 20% will become ill during a community outbreak
- Asymptomatic or minimally symptomatic individuals can transmit infection
- Rates of serious illness will depend on the virulence of the pandemic and differ by an order of magnitude between more and less severe scenarios
- Risk groups for severe and fatal infection cannot be predicted with certainty but are likely, for the purposes of this document, to include the elderly, and people with chronic or immunosuppressive medical conditions
- Misinformation will proliferate, via social media and the internet, and it will be necessary to validate any data not received from named reputable sources
- Multiple waves (periods during which community outbreaks occur across the country) of illness are likely to occur

Pandemic timeline

 The extended, indeterminate timeline of a pandemic can lead to employee burnout and public complacency and noncompliance with protective measures.

⁵ MoH 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 all sectors to plan for a large event impacting all aspects of society. Ratified by the studies performed by National Academies of Sciences, Engineering, and Medicine 2021 for pandemic planning for transport agencies.



⁴ New Zealand Influenza Pandemic Plan 2017, page 6



 All action plans will require revision depending on how a pandemic plays out in New Zealand, this will include the scenarios, modelling and projections submitted by the working group to inform actions and decision making.

Employees

- Some of our people will become infected but not develop clinically significant symptoms
- The typical interval between infection and onset of symptoms is commonly one to fourteen days⁴
- Rates of absenteeism will depend on the severity of the pandemic. In a severe pandemic, absenteeism attributable to illness, the need to care for ill family members, and fear of infection may reach 40% during the peak of an uncontained community outbreak, with lower rates of absenteeism during the weeks before and after the peak
- Certain public health measures (closing schools, quarantining household contacts of infected individuals) are likely to increase rates of absenteeism
- MoH requirements for self-isolation or quarantine are likely to increase rates of absenteeism
- The total period of absenteeism could last for 6 to 16 weeks

· Health, safety, and wellbeing

- AT must avoid becoming a vector for the pandemic
- Practical workplace controls may need to be implemented to prevent the spread of the pandemic virus following the Safety Hierarchy of Controls
- Social distancing and remote working controls may lengthen the timeframe for executing tasks.
 In some cases, this may prevent certain tasks being undertaken.
- Safety of essential workers, customer facing staff

Public health

- AT must avoid becoming a vector for the pandemic
- At will be required to implement public health measures as announced by the government and MoH
- Responding to a pandemic emphasises Ats's need to balance safety with service

Support

- The AT response to a pandemic will go beyond continuity of operations and will extend to our contractors and will assist in managing the predicted secondary impacts.
- AT plays a leadership role for our partners, operators and other stakeholders and continues to do this throughout any pandemic response.
- AT may engage in non-traditional but important support roles, such as providing essential
 equipment, food, and prescription deliveries; logistics support; screening of passengers; traffic
 management for mass testing sites; installation of temporary infrastructure as required; traffic
 management at motorway border controls; and contact tracing on behalf of MoH.

Community

 The adverse impacts of a pandemic may be proportionately much greater on traditionally underserved populations than on privileged communities and the review of AT action plans will





- avoid unintended consequences, positive and negative, through its actions and inactions in pandemic response and consider our obligations under the Te Tiriti o Waitangi.
- The adverse impacts of an impact of a pandemic may be greater in isolated communities, and AT action plans will avoid unintended consequences through its actions and inactions in pandemic response and consider our obligations as an essential service.
- Relationship management
 - AT has a role in supporting the Ministry of Health and the council. By horizontally and vertically synchronising with Auckland Council, MoH, WK, POAL, the Emergency Operations Centre and our contractors AT will enable a better outcome for Auckland and assist the economy to bounce back.
- Construction, maintenance, and innovation
 - AT may have the ability to suspend or fast track projects, bring forward maintenance and repairs and pursue mainstream innovation during a pandemic.
- Public Transport
 - AT must ensure the continuation of public transport as an essential service.

5.2 Potential Impacts

The potential high-level impacts to AT are as follows:

- Health, safety, and wellbeing⁶ issues arising out of a pandemic, with associated requirement for:
 - Alignment with health and safety messages from Ministry of Health and / or (Auckland Regional Public Health Services (ARPHS) and distribution via Communications on agreed council channels
 - Social distancing
 - Increased cleaning, provision of PPE, bins, and paper towels
 - Provision of PPE and other measures to our customer facing people in public locations
 - Quarantine
 - Psychosocial support
 - Decrease in workforce, including leadership positions, arising from:
 - Infection (self, family) or fear of infection
 - Stand down of vulnerable workers
 - Self-isolation
 - School, childcare, or school holiday programme closures
 - Cluster control (closure of regions or suburbs, community isolation)
 - Activation of the Council Emergency Control Centre (ECC) resulting in call up of council ACEs (Auckland Council Employees⁷) who have volunteered to support any Civil Defence and Emergency Management activation

⁷ Includes Auckland Transport



⁶ See also "Location"



Decrease demand for services:

- Culture and Transformation (recruitment)
- Public Transport (decrease in patronage)
- Customer Experience (incoming calls)
- Portfolio Delivery (during severe lockdown), including decrease in requirement for consultants
- Supplier engagement (reduced staffing due to infection)

Increased demand⁸ for services:

- Communications
- Business Technology (Service Desk, Procurement, accelerated IT projects to deliver critical IT services more quickly)
- Culture and Transformation (leave policy, support for people leaders, support for our people, psychosocial support)
- Safety (Health, Safety and Wellbeing changes)
- Finance (procurement, forecasting and modelling)
- Network management and operation
- Planning and Investment (acceleration of some projects)
- Risk and Assurance (crisis management support, risk support)
- Safety
- Compliance and enforcement
- Service Delivery
- Communities and Communications (communications)
- Governance (Board liaison)
- Increased public transport coverage to service essential travel, including hospital shifts, vaccination appointments, attending to personal needs
- Increased roading support including traffic management around testing centres, vaccination sites
- Increased workload at the ATOC which runs the Incident Management Team
- Potential increase in workload for ATOC supporting roadblocks, traffic management etc.
- Multi-mode travel changes to meet the needs of the Auckland Community
- Third party suppliers unable to meet contractual obligations (e.g., public transport, cleaning)
- Remote communities do not have readily available public transport (e.g., communities with single routes in and out of the community, including Auckland islands).

Economic impact resulting from:

- Decreased demand for services e.g., PT, parking, disruption in revenue streams
- Restrictions placed on AT revenue generating activities or locations
- Potential reduction of ability of Aucklanders to make payments
- Potential reduction in cash handling at Service Centres
- Potential reduction in capability at key financial institutions
- Potential increase in costs associated with pandemic response
- Potential distribution of free services or HOP cards
- Inability of government agencies to supply additional funding during pandemic



⁸ May include different use of some services, or different duties for front line



Disruption to travel including:

- Travel restrictions national and international
- Ability of PT to service routes

Governance:

- Ability to meet statutory obligations under the Local Government Act and continue the democratic process (Board Meetings, Committee Meetings)
- Inability to meet legislative requirements.
- Disruption of one or more of the resources needed to maintain critical or essential services through denial of access to:
 - IT systems (Cyber-attack, CCTV, failure of systems)
 - Place of work, tools, supplies and / or specialised equipment
 - Financial resources or banking systems required to continue to run AT essential services
 - Key people needed to support essential services, including those at contractors
 - Transport
 - Lifeline utilities, e.g., water, electricity, communication etc.
 - Critical dependencies (internal, external).
- Disruption to one or more resources needed to respond to incidents and emergencies through denial of access to our people, including ATOC and Harbourmaster⁹.

Workplace / location:

- Inability to work from business-as-usual locations (work from home) due to government pandemic interventions
- Activation of backup facilities to ensure continuation of critical business functions such as Compliance and Transport Operations
- Use of mobile deployment of Transport and Parking Officers
- Using confirmation bias when making decisions about our people, stakeholders, customers, and the public.

⁹ For example, marine oil spill







6 Activation

6.1 Impact assessment and plan activation

When an emerging pandemic is identified or there is the potential for a pandemic, the Executive GM Risk and Assurance (EGM R&A) conducts an impact assessment and notifies the Chief Executive Officer (CEO). The assessment includes likelihood event, estimated duration of the event, impact to AT, the potential for a phased approach, and what phases might be applied.

A decision is made as to whether to activate the CMT. To aid this assessment, a list of potential impacts is captured within this document. The process to activate the CMT is outlined in the Crisis Management Plan. The CEO / delegate or the CMT may assess an incident and activate this plan in isolation or in conjunction with other response activities in AT, the council, and our business partners.

6.2 Triggers and actions

Table 6 Triggers and actions

COVID-19		New Zealand MoH Pandemic Strategy		Auckland Transport		
Alert NZ Govt		New Zea	liand Mon Pandemic	MoH/DHB	Auckland	ransport
Level	Strategy	Stage	Strategy	Alert Code	AT Stage	Generic Strategy ¹⁰
1	Prepare	1	Plan for it (Planning)	White Yellow (Standby)	1 ¹¹	Activate CMT to plan for and direct the response to a pandemic
2	Reduce	2	Keep it out (Border Management)	Red (Activation)		Activate full CMT, and supporting working group, to direct response to pandemic
3	Restrict	3	Stamp it out (Cluster Control)		2	Reprioritise functions and
4	Eliminate	4	Manage it (Pandemic Management)		3	activities to meet the specific impacts of a pandemic virus Activate additional processes
		5	Manage it (post-peak)			consistent with MoH advice e.g., social distancing, cleaning, closure of premises, self- isolation Activate business continuity solutions and include rostering of staff Accelerate or decelerate/stop activities as require Prepare to return to normal operations, support the economy, bearing in mind there may be new ways of working.
		6	Recover from it (Return to BAU)	Green (Stand down)		Stand down Bounce back Post event review

AT aligns with all published MoH pandemic management strategies and frameworks as described in the MoH strategy and stages for any pandemic. The current government COVID-19 strategy and alert codes have been included alongside the ongoing staged planning that has been undertaken by the AT CMT since January 2020.

¹¹ AT Staged planning table is based on three scenarios, 1. No infection in NZ, 2. Local Infection, 3. Community Infection. Similarly staged planning has taken place to take into account current government strategy.



¹⁰ The full strategies for AT are available in the Crisis Management Teams site in the centralised online environment



13 Appendix 2 Ministry of Health COVID Protection Framework illustrates the COVID-19 approach in New Zealand as of 15 December 2021.

AT activates this plan when there is an emerging, potential, or current pandemic threat in New Zealand that needs to be managed proactively or when focus is needed to plan for specific actions, to direct AT, inform Auckland Council and/or respond to the emerging, potential, or current pandemic threat.

COVID-19 Protection Framework

The New Zealand COVID-19 Protection Framework or Traffic Light System that will be implemented in New Zealand for COVID-19 on 3 December 2021 has not been included as this is not part of the current NZ Pandemic Plan¹². It is a response to the current COVID-19 Delta outbreak. There is a level of uncertainty around what the result of this traffic system will be for AT. AT has prepared for this with the procedures for entry into Buildings at Alert Level 2, the Pandemic Policy, Flexible Working Policy, specific actions for the red, amber, and green traffic lights, and other measures discussed in this document.

An ongoing pandemic would require that AT continue to implement these measures until such time as the pandemic is controlled through vaccination and other health measures, and/or the virus becomes endemic in the population.

6.3 Endemic

Over time, with the support of health measures, a pandemic may resolve itself, or become endemic in the world-wide population, resulting in continuing infections with no MoH enactment of the Pandemic Act to leverage special powers to control a pandemic outbreak in New Zealand.

There have been several viral infections that have reached endemic status world-wide, which are managed through vaccination, and/or post infection anti-viral treatment with varying degrees of efficacy.

This may be managed in New Zealand through controls such as vaccination policies and other mitigation measures, such as the presentation of negative pandemic tests, or entry testing (temperature checks).

¹² Diagram of Traffic Light System - 13 Appendix 2 Ministry of Health COVID Protection Framework



Auckland Transport Pandemic Plan



7 Health, safety, and wellbeing management

7.1 Approach¹³

Auckland Transport's approach to a pandemic threat is to align with the MoH recommendations whist meeting our obligations as a Person Conducting Business or Undertaking (PCBU). AT will be guided by the MoH regarding all health-related advice.

Although a pandemic outbreak may not directly affect the physical infrastructure of AT it may threaten all operations either by its impact on an AT's people and/or those of our partners.

The health risk to our people is the primary threat to maintaining essential functions and services during a pandemic outbreak.

All areas on AT's Public Transport Network and AT's workplaces that may be transmission points, will be managed according to guidance from Ministry of Transport (MoT), Waka Kotahi (WK), and MoH, to avoid becoming transmission vectors for a pandemic.

AT will take a risk- based approach in the event of a Pandemic and will use the Safety Hierarchy of Controls for HSW as a first line of defence. across the AT Public Transport Network and AT workplaces, for example:

- Hygiene
- Physical separation
- Face coverings
- Ventilation
- Vaccination and alternative options, if/when available (See 6.3 Endemic)

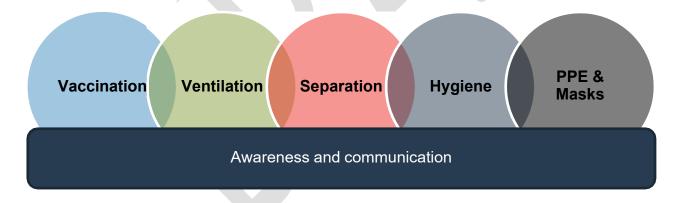


Figure 1 Health, Safety and Wellbeing Controls

This approach covers AT customers and contractors, our people, and their families.

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 $^{^{\}rm 13}$ To be read in conjunction with the COVID-19 Pandemic Vaccination Policy 2021



8 Managing illness, absenteeism and working from home

8.1 Approach

Auckland Transport will display MOH, health and safety information as a preventative measure and assist contractors with same.

8.2 Working in the office

In the initial phases of a pandemic outbreak, modifications to business-as-usual processes and contact procedures will be made as necessary (dependent upon the severity of the outbreak) to minimise spread of the virus at the workplace. All instructions to staff during a pandemic are published on the Engine Room (AT Intranet) and updated in a timely manner.

Government issued QR codes will be displayed prominently at all office locations, and on assets, i.e., buses, ferries, trains, if and when the Government initiate the practice, and our people will be regularly reminded of the importance of scanning in each time they enter the facility.

Workstations will be regularly disinfected.

Staff will practice heightened hand hygiene routines and be prepared to exercise social distancing when attending meetings or group functions, etc. Keeping personal contact to a minimum during an outbreak should be regarded as a primary safeguard against the spreading of viruses.

Within the workplace, social distancing measures will take the form of.

- Modifying the frequency and type of face-to-face employee encounters (e.g., placing suspension on handshaking and/or hongi)
- Substituting tele and video conferences for face-to-face meetings, staggering breaks, posting infection control guidelines
- Promoting flexible work hours, flexible worksites, and work from home
- Promoting social distancing between employees and customers to maintain spatial separation between people as per the most current advice from the Ministry of Health
- Implementing strategies to support and enable employees who are most at risk or are unwell to stay home when appropriate or when needed
- Implementing strategies that request and enable employees confirmed as meeting the case definition for the identified disease (or those in contact with confirmed case) to stay home at the first sign of symptoms
- Splitting critical teams across separate locations (e.g., ATOC split teams in two and ensure one is working remotely and while the other is in the office, and rotate teams without face-to-face interaction)

8.3 Staff falling ill at work

• Staff should inform their People Leader if they are displaying symptoms (via phone ideally) as soon as possible. If the symptoms are concurrent with the outbreak the staff member will be required to leave work, return home, and inform their GP (or response helpline) by telephone.





 If a staff member suspects another staff member is displaying symptoms but is not acting, the suspected staff member should be alert their People Leader who will follow the guidance issued by the Culture and Transformation Team, with support from the Safety Team.

8.4 Staff falling ill at home

- People leaders will continue to support remote working arrangements during a pandemic. Our people
 who are at risk, have the initial symptoms may work from home.
- Staff should inform their People Leader if they fall ill (via phone or email) as soon as possible. If the symptoms are concurrent with the outbreak the staff member will be required stay at home and inform their GP (or response helpline) by telephone.
- Staff will not have to work if they are too sick to do so.
- Any staff with public facing roles or those who are unable to work remotely must not go to work if they
 are displaying symptoms.
- During a pandemic People Leaders may be granted discretion to grant special leave in these circumstances.

8.5 Staff living with or in close contact with a confirmed, suspected, or probable case

- If a staff member becomes aware that they have been in close contact with a person who is a confirmed, suspected, or probable case, they must immediately inform their People Leader and follow MoH directives.
- Specific advice for Covid-19 can be found on the MoH website or the COVID19 website.

8.6 Staff wellbeing

- The welfare of all staff members is essential, whether at work or at home.
- If the pandemic virus threatens to enter New Zealand immediately prior to the usual influenza season, AT will endeavour to place vaccination orders with our health provider earlier than usual
- At risk groups within AT will be updated and the appropriate instruction and support given to our people
 e.g., should the virus have a higher impact on a specific age group
- People leaders should remain in contact with their staff on a regular basis. If a member of staff is working from home due to mild but suspected symptoms, they should continue to work if possible.
- Any staff that fall ill must not return to work unless advised safe to do so by an authorised health professional.
- People leaders must consider arrangements for staff who must self-isolate due to family illness or are disproportionately impacted by the illness.
- People leaders should encourage the use of leave to ensure our people take time off, especially for critical roles that may work during an emergency for sustained periods of time.
- AT maintains a wellbeing hub, <u>Hauora AT's wellbeing framework & programme</u> which supports the health and welfare of our people.

8.7 Absenteeism

The Executive Leadership team works with Cultural and Transformation to determine the most appropriate approach to absenteeism, in line with the Pandemic response Principles in Section 4.





9 Continual Improvement

9.1 Business Continuity Exercise

The continuity and Recovery Management programme of work uses pandemic outbreak as one of the scenarios selected to evaluate AT preparedness on an annual basis.

9.2 Review

The Pandemic Plan reviewed by Executive GM Risk and Assurance and Executive GM Safety to ensure the ongoing accuracy and relevancy of the document. It is reviewed and signed off annually by the Chief Executive.







10 Business continuity

10.1 Critical activities

It is essential that functions and departments are aware of critical activities within their teams and ensure that these activities receive priority during a pandemic.

Given the expected duration and potential multiple waves of pandemic outbreaks, AT will review the process involved in conducting essential functions and services. This informs the development of plans to mitigate the effects of the pandemic, and the subsequent relevant/appropriate controls, while simultaneously allowing the continuation of operations which support essential functions.

AT has identified essential functions and services needed to sustain operations and meet legal obligations during a pandemic. The following list highlights the expected critical functions during a pandemic:

- The CMT and / or
- The IMT which may be activated to support Auckland Council Emergency Operations Centre to support Ministry of Health priorities
- There may be a national emergency declaration under the Civil Defence and Emergency Management Act (which will put a different lens on these priorities).

Identification of critical functions will consider the delivery of the following general activities, over and above the services delivered to our customers and stakeholders:

- Communications
- Critical technical infrastructure
- · Essential building and contractor management
- Essential transport
- Governance
- Online information channels
- Payment services (payroll, accounts payable or essential online payment systems)
- Professional services (e.g., legal or accounting) compliance or legally mandated
- Security
- · Staff wellbeing and tracking thereof
- Supplier support
- Compliance and audit
- Event management
- Maintenance and repairs to navigation aids and beach markers¹⁴

The identification of critical Auckland Transport functions has been extracted from the planning for a response to Covid-19 undertaken January – March 2020. Other situations may require a different approach depending on the characteristics of the pandemic. The identification of critical functions should focus on the Auckland Transport's people, health, safety and wellbeing, reputation, and legal obligations. This information is required to be submitted through to the Auckland Council CMT as part of all of Council view of a pandemic response.







11 Returning to business as usual and continual improvement

This process is enacted when AT has regained the capability and physical resources necessary to return to levels of normal (pre-pandemic) operations. The objective during recovery is to effectively manage, control and, with safety in mind, expedite the return to normal operations. AT has considered the possibility that not all our people may be able to return to work at the time of recovery and reconstitution of AT operations, and that it may be necessary to hire temporary or permanent workers, or reassign some of our people, to complete the process.

A separate workstream may be needed to plan for the recovery process and reconstitution of AT operations.

The process of returning to business as usual (in whatever form that takes) involves a devolution of the command-and-control structure of the CMT and return of the ELT into their usual operating roles.

11.1 Exercise and review

This plan is reviewed and exercised annually as part of the Business Continuity Management Programme of Work.

11.2 Post incident review and debrief

A thorough debrief of the event is held with our people who have been part of the Crisis Management and Incident Management Teams and the CMT WG, with specific care being taken to ensure lessons learnt in the post debrief report are implemented and/or considered and included in the Post Incident Review.

Should the pandemic persist for an extended period, the response team holds regular reviews and implements the lessons learned immediately.

Following a pandemic or potential pandemic that has resulted in this response plan being invoked, the Executive GM Risk and Assurance conducts a post incident review of the response, together with any recommendations and ensures that any corrective actions arising are implemented.

This plan will be updated as a result of any improvements identified as a result of the review.

11.3 Audit

This plan and associated documents and appendices are subject to periodic audit.





12 Appendix 1 Formation of the AT working group

Once the CMT (comprised of the Executive Leadership Team) has been activated, AT will further stand up a CMT Pandemic Working Group (CMT WG) which will be comprised of senior leaders in AT who are able to identify and manage the risks and impacts arising from a Pandemic outbreak in Auckland and have the knowledge and capability to create appropriate action plans, and escalate decisions as required. The CMT WG uses a modified version of the Coordinated Incident Management System (CIMS) used by the ATOC Incident Management Team (IMT)

The working group is required to interface with Auckland Council CMT and Auckland Council, Auckland Emergency Management via the IMT.

The CMT WG is formally run by a Project Manager and chaired by a member of the ELT. The participants are be grouped into Business Continuity workstreams, from parts of the organisation that are impacted by the pandemic, as follows, with a primary and secondary person who represent each focus group:

- Community & Communications
- Construction Delivery
- Customers
- Intelligence
- Logistics
- People and Safety¹⁵
- Public Transport
- Road Network Operations¹⁶
- Safety
- Supplier Support

The finance function supports the workstreams with additional information and the creation of WBS codes for capital and operational expenditure undertaken as a result of response to a pandemic.

The Business Technology function supports the working group with Business Analytics and other technology support as required.

Risk Services attend the meetings to give overall guidance on risk management.

The IMT provides additional intelligence and information about the current response to any pandemic, by the MoH and National Emergency Management Agency (when activated), into the CMT WG via the situation reports (SITREPS) from Auckland Emergency Management Emergency Operations Centre.

The Chair of the WG will appoint additional team members as required to support the evolving situation. The CMT WG reports into the CMT via the Chair of the WG.



¹⁵ Includes all functions under

¹⁶ Includes all operations under Service Delivery



13 Appendix 2 Ministry of Health COVID Protection Framework 17

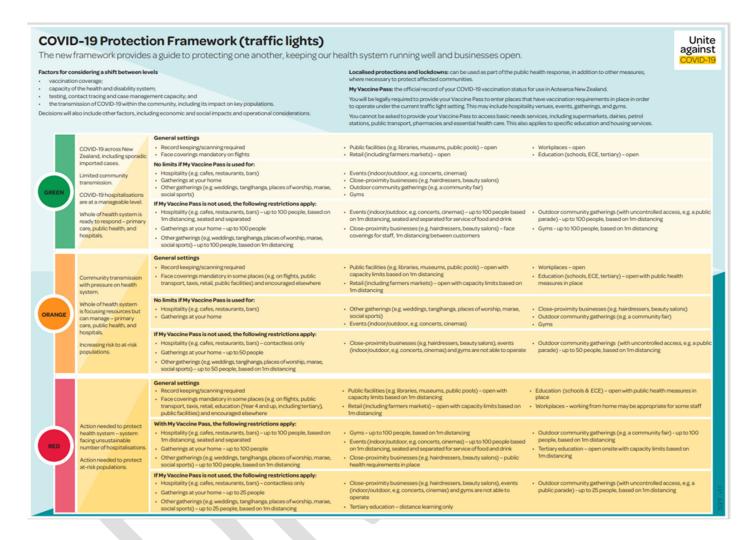


Figure 2 Ministry of Health COVID Protection Framework



¹⁷ As of 15 December 2021 10:55 am, – supplied for reference purposes only

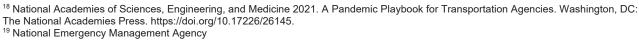


Appendix 3 Pandemic playbook

The following Pandemic plays have been modified for use by AT from the National Academies of Sciences, Engineering, and Medicine 2021 for pandemic planning for transport agencies¹⁸. The Pandemic Playbook (playbook) is designed as an aide memoire for AT. New Zealand uses the 4 R's approach to preparedness and response¹⁹, and the plays in this appendix are aligned with the 4R's.

4Rs	Category	Play	Page
Reduction	Planning	Planning, training, and exercises	31
Readiness	Employee impact	Employee Impact	31
	Protective actions	Pandemic protective actions	33
		PT protective actions	34
	Situational awareness	Situational awareness and reporting	36
Response	Communications	Communications	38
		Restore public confidence	40
	Response actions	Traffic management	41
		Service operations	42
	Financial	Financial management	43
Recover	Lessons learned	Stabilisation	44
ALL	Multiple events	Concurrent emergencies	45
	The second secon		

Table 7 Pandemic Plays







14.1 Planning, training, and exercises

14.1.1.1 Improve and update planning

Update the Pandemic Plan.

14.1.1.2 Conduct Training

• Include training for the CMT WG in Business Continuity and Recovery Programme of Work

14.1.1.3 Exercises

- Short tabletop exercises that might include small but important processes such as:
 - Health, Safety and Wellbeing of our people
 - Setting up buildings for pandemic restrictions
 - Ergonomics regarding work from home, checklist, and register, capturing submitted checklists and results
- Longer tabletop exercises for business continuity that incorporate pandemic considerations into planning for more typical emergencies scenarios.
- Involve partner organisations²⁰.

14.2 Employee impact

14.2.1.1 Overview

Employee health and safety is paramount in a pandemic. Like other events, pandemics impact employees' availability for work because of family circumstances, illness, and safety. During pandemics, exposure or illness in the family may require isolation or quarantine. Work responsibilities change as tasks are halted or reduced while new tasks emerge.

14.2.1.2 Establish appropriate policies

- Address absenteeism, including family sick leave. AT may provide additional sick leave or other paid time
 off for employees who are required to self-isolate or quarantine for a designated period. AT may choose
 to institute more flexible sick leave and other leave policies to encourage employees to stay home when
 they are feeling ill.
- Establish compliance requirements and standards about the use of PPE.
- Confirm and communicate requirements and guidelines for personnel health information related to personally identifiable information.
- Assign staff non-traditional functions on a temporary basis.
- Work with public health officials about testing or vaccinating employees and families.

²⁰ Auckland Emergency Management, Coordinating Executive Group have a working group that will include AT in training and exercising, and will make agencies such as NZ Police, FENZ, AEM, MoH available for exercises with ATOC, and other AT departments.





14.2.1.3 Demonstrate good leadership and employee relations

- ELT support "demonstrable, long-term, substantive commitment" to enhance organisational morale. Leadership, especially CEOs, play a critical role.
- Create clear expectations for employees through Culture and Transformation with staff and union input.
- Supply reasonable accommodation about performance of certain tasks in consideration of personal safety or health risks.
- Work with employees and unions to set up safe work processes and procedures.
- Be alert for improvements as changes in public health guidance or new opportunities are presented.
- Encourage employees to stay home when sick to avoid exposing others.
- Have a simple system to aggregate and report employee absences following MoH guidelines.
- Recognise stress and psychological impacts and provide support services for stress reduction. Make sure
 employees understand how to access programs as needed.
- Try to keep staff working, if possible. Assign staff non-traditional functions on a temporary basis and facilitate working from home, if possible.
- Recognise and address potential morale impacts of new or different duties. If furloughs or unpaid leave are necessary, be open and honest with employees about decisions and future expectations.
- Keep lines of communications available with employees up and down the chain to identify issues early and adjust if advisable. If not, explain why not. Continue communicating with furloughed employees and help them gain government assistance if available.
- Have good methods for tracking employee availability and accountability while supplying flexibility for family needs and multiple priorities.
- Have good mechanisms for letting employees know about new policies and procedures.
- Explain how employees will be evaluated during the pandemic.
- Document policy and procedure successes and failures for future reference and lessons learned.





14.3 Protective actions

14.3.1.1 Overview

During a pandemic, voluntary or mandatory protective actions may be required to ensure the safety of our people and customers. Because work requirements may differ, different types of protective actions may be necessary. AT has positions that require physical presence and public interaction, e.g., customer service, bus, train, or ferry operators; parking offers, traffic officers, and some customer service positions; on site safety inspections.

14.3.1.2 Apply public health principles to protect everyone

- Follow credible health authority guidance, which can include social distancing; requiring the
 wearing of masks in common areas in the workplace and on the job; regular handwashing and
 surface disinfection; and quarantine in the event of symptoms, potential exposure, or confirmed
 infection.
- Develop guidance and standards for visitors, contractors, meeting rooms, use of shared vehicles etc, include standards for any business collocated in 20 Viaduct Harbour Building.
- Develop active health monitoring and contact tracing for employees who become ill or are exposed to an active infection. Communicate employee tracking plans.
- Establish clear policies and procedures on PPE, procuring and using supplies or equipment (e.g., cleaning or fogging), and training.
- Involve employees in developing safety protocols. Facilitate feedback on effective procedures and available alternatives.
- Monitor complacency and weariness with restrictions as a pandemic continues, as these may prove a major impediment to compliance and contribute to a resurgence of disease rates.

14.3.1.3 Facilitate remote work for positions that are suitable

- Encourage our eligible people to take laptops, headphones, and other equipment for home regularly to ease any transition to working from home.
- In addition to supplying computers for employees, consider letting them take their office chair home.
 Employees may appreciate this consideration. Be sure to maintain good records on all equipment leaving the workplace. When examining software policies and programs, consider expanding collaborative software options. Many recent technology improvements facilitate group work, regardless of location.
- Consider a transition phase for moving back to the office²¹. The spacing of desks and other adaptive
 measures for facility use can promote social distancing in the office environment, in tandem with mask
 protocols for common areas.

14.3.1.4 Enhance protection for our people and contractors with public-facing Jobs

- Follow the advice of MoH.
- For respiratory-based pandemics, public health guidelines are likely to recommend that all employees
 and travellers wear masks to protect themselves and others and follow regular handwashing and
 sanitation measures. Make sure there is a clear policy and enforcement guidelines for employees.



²¹ For example, AT Return to Work plan for Alert Level 2 - COVID-19 2021



- Site inspections involve our people moving in and out of environments where mask wearing is required; these personnel must continue to socially distance themselves unless all are wearing masks.
- Include information in AT training about why these policies are in place, so that employees continue sound public health practices while on breaks or commuting.
- Clarify expectations of employees, such as wiping down company car surfaces at the end of the shift; wiping down and possibly fogging a bus; and regularly cleaning and disinfecting high touch surfaces in common areas such as door handles. Consider changes in protocols over time as conditions change.
- Consider contactless systems to reduce the spread of disease, such as automatic doors, soap dispensers etc.
- Consider any engineered controls such as Perspex screens for customer facing people.
- Consider stopping non-essential services.

14.4 Pandemic public transport protective actions

14.4.1.1 Overview

To ensure the safety of employees and passengers, voluntary or mandatory protective actions may be needed. For the COVID-19 pandemic, public health authorities recommended the universal use of face coverings (PPE); support for contact tracing through QR codes and use of registered HOP card, social distancing on public transport and in transit stations; frequent sanitising of high touch surfaces.

14.4.1.2 Establish clear programs regarding protective actions

Wearing masks/personal protective equipment (PPE)

- Clarify policies and procedures regarding compliance, exceptions, and enforcement. Be aware there
 may be aggression involved with noncompliance and make sure employees know their limits and
 boundaries.
- Incorporate a mask mandate that is enforceable into code of conduct; consider it similar to clothing mandates (shirts, shoes).
- Establish how to and who should enforce wearing a mask i.e., NZ encouraging compliance by using
 messaging and free mask distribution is a better, safer, strategy than active enforcement of compliance
 by AT personnel.
- Clarify expectations for potential passengers through a comprehensive public awareness campaign involving multiple media, including social media. Use words, pictograms, and multiple languages as appropriate to clearly convey AT messages.
- Use the mask program as an opportunity to improve customer relations, for example, by giving away masks at community events, creating AT branded masks, or placing AT ambassadors at stations.

Social distancing

- Carefully establish and communicate social distancing policies with staff and passengers.
- Introduce measures to protect our frontline employees and encourage customers to distance such as HOP-only fares, rear-door boarding, and signage on-board and at PT facilities.
- Enforcing social distancing requires information and agility. A real-time passenger count using the HOP system can ensure limits are not exceeded. If passengers know capacity in advance, they may be able to time travel accordingly. Dispatchers may need to notify operators to pass people up and alert waiting passengers that an additional bus has been dispatched to avoid overcrowding.





- Keep some flexibility in social distancing measures so family groups can sit together.
- Social distancing may require additional equipment as ridership recovers.

14.4.1.3 Mobile positions

Mobile positions include inspectors (safety or other), parking officers, transport officers, on-site staff, and others.

- Limit crews to one per truck or two in a split cab with both wearing masks or allow crews to use their
 own vehicles. If the logistics of parking multiple vehicles at a work site are unwieldy or impractical, limit
 the number of individuals in the cab and require ventilation (open windows) and masks with regular
 surface sanitation.
- Organise our people into self-contained units/sheds/pods/teams to eliminate interaction intentionally
 and deliberately with other teams. With this framework, if one member of a team is exposed to or
 infected with the virus, the team can be quarantined. Other teams can step in to help with the workload,
 but the entire organisation is not side-lined possible, provide supplies, such as hand sanitiser, to
 encourage safe practices.

14.4.1.4 Semi stationary positions

Semi stationary positions include bus and train operators and station attendants.

- Require the public to adhere to specific protocols such as masks to protect other passengers and operators or station attendants.
- Train operators and station attendants are typically in a cabin or kiosk that offers protection under most circumstances. Decide whether AT mask protocols (if in place) also extend to train operators and transport officers, extending such protocols models appropriate behaviour to the public.
- Protect the bus operator from infection through social distancing:
 - Implement rear door boarding.
 - Use barriers such as a chain or partition to keep passengers at least two metres from the operator. One can use shower curtains, plexiglass, or other materials to protect operators when front door boarding resumes.
- Consider providing drivers mobility services such as paratransit with protective masks, visors, and
 training in safe securement under pandemic conditions. These operators are often required to closely
 assist passengers (e.g., securing seat belts to a wheelchair or applying other fasteners to secure a
 mobility device). Passengers can be requested to turn their heads during securement and should wear
 masks or face shields if physically able.
- Provide regular cleaning and disinfection of surfaces, particularly high touch surfaces.
- Review air filtration systems and improve ventilation wherever possible.
- If passengers are confirmed or suspected to be infected, AT or the operator consider asking that ADHB
 to provide transportation. In at least one small community, volunteers in full protective medical attire
 volunteer to transport such patients to medical appointments.
- Consider whether the operators require training to assist with identification of potential symptomatic passengers.





14.4.1.5 Cleaning and disinfecting

- High visibility of cleaning crews and sensory cues, such as scent, can reassure passengers.
 Frequency of surface cleaning will vary depending on health guidance, organisation policy, operations schedules, and use.
- Investigate ventilation systems equipment and see if there are ways to improve air circulation and replenishment of fresh air if necessary. Air circulating through rail cars (EMUs) and buses is typically replaced with fresh air close to 18 times per hour; more frequently than 12 times per hour is recommended for airborne infection isolation rooms in medical facilities.
- Contactless access can reduce the spread of disease. Evaluate options for reducing or eliminating
 passenger contact with surfaces, for example, by temporarily eliminating fare collection until alternate
 means of collection are established.
- Monitor employee and public responses and adjust the program to address issues that may arise.

OTHER CONSIDERATIONS

- New Zealand Transport operators may need to coordinate to achieve a common set of standards or enforce different standards at different locations. Consistent, clear communication is the key to success.
- Document successes and failures and adjust policies and plans accordingly.
- Be alert for health advisories and updates to policy recommendations on PPE and social distancing on public transport, which may vary depending on passenger adherence to mask policies, passenger adherence to limiting conversations, local infection rates, and bus or train ventilation systems.
- Keep AT customers informed of the changes.
- Develop screening and tracking tools for symptoms and for support of contact tracing for outbreaks if asked to by MoH.

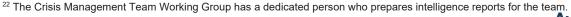
14.5 Situational awareness and reporting

14.5.1.1 Overview

Situational awareness allows AT to understand the existing environment in which it works, comprehend the current situation, and project appropriate actions for the future²². Although maintaining situational awareness presents a significant challenge during emergencies and crises, it provides an essential common view for the organisation to develop and use for decisions up and down the line.

Situation reports, which are passed through preestablished reporting channels, contain verified information and details (who, what, where, when, and how) related to events. Status reports, which may be contained in situation reports, relay specific information about resources.

During a pandemic, disease spread outside of the Auckland Region may be informative, in that it can prepare AT for future situations. Likewise, techniques for mitigating spread, such as protective measures for people and sanitation techniques for equipment, if discovered and tested by others, can help AT get a head start on the AT response.







14.5.1.2 Understand the environment

- Continuously monitor relevant sources of information to discover emerging issues and understand context that could have an impact on AT.
- Prevent information overload. Find ways to sort credible, verified information from rumours and opinions. Both can be helpful but need to be clearly identified.
- Establish protocols for data collection, information updates, and reporting within AT and for those who receive information from the organisation. The scope and type of monitoring varies on the basis of the type of incident and on reporting thresholds.
- Consider using the operational period concept from the CIMS model so the rhythm for updated information submitted to AT and reports generated by AT can be anticipated.

14.5.1.3 Understand the current situation

- Monitor logistics and travel through and into the Auckland Region and on our network and transport systems. Unlike during natural disasters, where the impact is usually to the physical environment, the impact of a pandemic is on people—staff and customers.
- · Although data elements may change, to the extent possible, use or modify existing protocols
- and systems for information exchange. Setting up an entirely new system can result in confusion and delays.
- In addition to monitoring AT staff and customers served for operational purposes, AT may need to
 track information of use to others, such as the number of vehicles crossing into the Auckland Region
 or traffic counts within the Auckland Region. Be alert to opportunities to help the community improve
 overall situational awareness through tools accessible to AT.

14.5.1.4 Continuously monitor and evaluate

- Track the health and availability of operators and key staff every day, division by division.
- Strategise and consider options for quick adjustments to routes should illness among our people increase.
- Watch for emerging issues in equipment availability due to maintenance issues, lack of spare parts, or other logistic considerations.
- Recognise that the virus may mutate, and new approaches may be needed.
- Undertake serious and periodic risk analysis.

14.5.1.5 Consider future options

- Use the Auckland community's or AT/Auckland Council disaster experience, whether from response
 to storms, cyber-attacks, or exercises to help guide planning for future actions. Recognise the
 differences and similarities between a pandemic and previous event.
- Build flexibility into decisions about the future, so AT can course correct as needed.
- Identify lessons learned through after-action reviews and incorporate recommendations into existing plans and procedures.





14.6 Communications

14.6.1.1 Overview

Clear, consistent messaging across levels of government and AT is crucial for credibility and for public and employee confidence and compliance. During events, regular communications keep our partners, the press, and public informed and address rumour control. Although messages and directions will change over time as situations evolve, one voice is much more effective than many voices. Make sure that the communication with all stakeholders is timely, credible and addresses concerns as well as the AT approach to the pandemic. Decide who speaks for AT and when. Confirm and clarify roles with the Board, the CEO, Auckland Council, Auckland Emergency Management, and the Ministry of Health.

14.6.1.2 With our people

- Meet in small groups for two-way communication, such as toolbox talks.
- When employee or public compliance with health directives declines, renew public health information and education.
- Emphasise personal resilience and stress reduction.
- Find ways to communicate other than email. Our public facing people may not read emails whilst working with the public.
- Use familiar formats for communicating with operational staff, such as an Incident Action Plan, which
 helps communicate and refresh priorities (ATOC) or direct contact via the Traffic Communication
 Room.
- Explore and use collaborative platforms such as Microsoft Teams, or other technology tools.
- Make sure there are opportunities and methods our people to voice their concerns and ideas.

14.6.1.3 With executive leadership, the board and council

- Jointly establish routines for ongoing communications so leaders know what to expect and when.
- Use key indicators or dashboards to reflect status. Select elements that are readily available, to keep reporting from becoming too burdensome.
- Be ready for impromptu reports, depending on need.

14.6.1.4 With the media

- Maintain relationships with newspaper, radio and television reporters who understand the transportation context.
- Provide regular briefings and press releases on policies, service changes, and events.

14.6.1.5 With other Organisations

- Work with our suppliers to establish and maintain lines of communication, ensuring transparency of AT response and recovery efforts and the impacts of the pandemic to AT's ability to operate.
- Keep current with public health guidance and leadership policies for AT areas of interest (transport, construction).
- Changes in the policies and procedures of others can change AT's requirements. Examples are the
 opening and closing of schools and other public facilities. Keep communicating with government and
 agencies so AT can anticipate future needs.





- Stay in touch with mutual aid organisations, especially in preparing for additional hazards and sharing resources. Communicate both what AT has available and what AT needs.
- Work with the union(s). Use this as an opportunity to improve relationships and partnerships.

14.6.1.6 With our customers

- Use all media, including social media and apps. Many people spend extensive time online.
- Develop a special web page regarding the pandemic and highlight not only schedule changes but also public health precautions and expectations of customers.
- Put visible vests or other markings on cleaning crews so customers can notice and easily identify them
- Understand customers' diverse communications needs, for example, the needs of those with visual or
 hearing impairments or both, those with limited English skills, those who are distracted (e.g., wearing
 headphones and focused on electronic devices), those who are not familiar with the system or the
 schedules, those with cognitive disabilities, and those with mobility issues who may require accessible
 information about accessible entrances and exits.
- When preparing communications, consider that anxiety due to the pandemic may make people less open to information and changes.
- Allow public access to some virtual meetings.
- If AT makes a mistake, own it, and clear it up immediately to retain trust and confidence.

14.6.1.7 ATOC, road network management

- Use variable message signs for public health messages, road closures, border closures.
- Notify travellers if there is a mandatory mask order in place and about other highway travel restrictions, such as an area closed to traffic as a result of quarantine or other actions.
- Provide tips for fighting disease spread in public spaces such as train stations and where employees gather.
- Be careful to balance public health with safety messages, such as those regarding temporary traffic measures.

14.6.1.8 Public transport

- Keep employees and customers informed on what, how, and why changes are made to AT services. Use signage, apps, and social media to keep information flowing.
- Make sure service planners and schedulers communicate with dispatchers, supervisors, communications managers, and other personnel on the ground, such as operators and customer service staff to ensure that timely, pertinent information is reflected in evolving service adaptations.
- Notify passengers about PT capacity limits²³ and about the next bus, train, or ferry train available if they are passed by.
- Publish information about sanitary procedures and cleanliness to reassure customers.
- Report information about infected bus operators or public-facing staff, not only to the Board, SLT and council but also to the public.
- Consider modifying AT Mobile app to include bus, ferry, and rail car fill information.

²³ AT has modified the AT Mobile app to show some of this information and will continue to mature the capability of the application in the future.





- Repeat messages frequently using many different delivery methods:
 - Display reminders onboard, at bus stops, in stations, and at ferry terminals.
 - Include pictograms where feasible to overcome language differences.
 - Use public messaging (visual and spoken) for service announcements.
 - Employ and publicise service availability on AT Mobile.
 - Make use of electronic bus and train message signs for reminders of safety policies as well as service status.
- Consider stepping up suicide prevention messages where the specific pandemic is impacting on health and wellbeing of our customers and communities, or an increase in incidents in our public transport network.

14.7 Restore public confidence

14.7.1.1 Overview

Employees, customers, and the general public may fear returning to the workplace; resuming riding buses or trains; resuming water sport, and resuming interactions with co-workers, eating in restaurants, and other facets of everyday life. Those who are in high-risk health categories or have family members at high risk may be particularly concerned. One of most important tasks of AT will be restoring confidence to employees and the traveling public.

14.7.1.2 Ensure that the PT looks and feels safe

- Perform high-visibility cleaning. Clearly identify how and when the system will be cleaned and what cleaning agents are being used. Consider having cleaning staff wear distinctive vests or uniforms or use scented cleaners to reassure passengers.
- Create a system culture that reinforces safety and compliance with health recommendations,
- using a multi-layered approach—policies, education, communication—for employees and the public.
- Use ambassador programs to place AT staff at locations in the system to promote safety recommendations and compliance. Be sure these staff and volunteers are visible and actively work with customers for safety and comfort.

14.7.1.3 Psychological comfort is important

- Provide accurate information to customers on arrival times, so as to reduce wait times, especially in Britomart and other enclosed areas. Passengers feel more comfortable above ground than in trains and underground stations, and they want to limit the time spent in contained areas.
- Report demand and overcrowding in real time to customers so that they can make their own decisions on the safest times to travel.
- Recommend actions that the traveling public can take to contribute to their safety such as personal hygiene (e.g., use of hand sanitisers) and PPE (e.g., facial coverings).
- Provide accurate information about the activities of the Harbourmaster to provide confidence around maritime safety for the environment, harbours, and users navigating in or on the water of the Auckland region.





14.7.1.4 Institute concrete measures and communicate what is being done

- Provide regular reports to the public on the measures AT has taken, any modifications that were made as a result of updated information, and any changes in the pandemic.
- Create education and communication campaigns to build confidence among passengers.
- Partner with others in the Auckland region to develop a joint plan to reinforce trust in the transportation system.

14.8 Traffic management

14.8.1.1 Overview

Pandemics can disrupt community life by causing changes in commuting patterns; closures of schools, stores, and gathering places; and creating the need for new services that disrupt traffic management, such as testing or distribution centres. Traffic monitoring at borders and enforcement of local quarantines can interrupt normal traffic flow. Commonly used traffic management tools and techniques, such as disseminating traffic information, controlling traffic, and managing the traffic demand, can be effective approaches for pandemics. Recognise that traffic instability may last for a long time.

14.8.1.2 Adapt and improve traffic management²⁴

- Analyse emerging traffic needs and priorities. Use traffic management techniques for planned special
 events as a model to support pandemic testing or vaccination sites and other locations with high traffic
 demand, such as food distribution and testing sites.
- Use traffic control devices (cones, barriers, portable static signs) to guide and regulate traffic and enforce social distancing.
- Incorporate lessons learned from exercises and experiences with border traffic management.
- Be prepared to use detours and alternate routes to enforce local travel restrictions as needed.
- When the government implements policies, such as permitting outdoor dining, consider how traffic management, such as closing lanes nearest the sidewalk, can contribute to public health and safety.
- Implement health-based changes on the transport network i.e., auto pedestrian call, removal of fences that prevent social distancing, one-way footpaths etc.
- If AT has initiated alternate uses of traffic lanes for bikes, pedestrians, or dedicated bus lanes, consider the impacts of maintaining those changes.
- Work with partner organisations, such as health departments and school districts, to anticipate traffic changes and proactively meet new challenges.
- Coordinate with border regions in enforcing traffic restrictions.
- Actively manage the inventory of traffic control devices to support needs and establish priorities if required.
- Be prepared to both request and provide mutual aid, especially if there are additional hazards such as a natural disaster or civil action.
- Document successes and failures for lessons learned and corrective actions.

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²⁴ Within the legal requirements of the Land Transport Act (1998), Land Transport Road User Rules and the New Zealand Transport Agency, TCD rules.



Transport

14.9 Operations adjustments

14.9.1.1 Overview

During a pandemic, it is critical to continuously monitor and dynamically adjust service and operations in response to both passenger demand and operator and vehicle supply and capacity. Demand can change dramatically: passenger volumes by time of day, definitions and requirements for essential travel, and passenger trip patterns. The ability to provide service can change rapidly in relation to the availability of operators, vehicle capacity constraints due to social distancing requirements, and impacts of current or anticipated funding shortfalls.

14.9.1.2 Set good policies

- Set clear policies regarding pandemic requirements and consider them in service planning, schedules, and procedures. AT policies should reflect priorities of Auckland Council and government agencies; if public health and policy decisions are to reduce interactions, AT policies should reinforce that guidance.
- Consider designating several levels of employees as "essential." Recognise and acknowledge additional expectations and hardships essential employees face and reward them as possible.
- Consider waiving fares or move to a cashless system to avoid contagion through contacts.
- No longer accepting cash may require an AT to allow some passengers to travel without paying.
- Consider adjusting or temporarily waiving requirements for licensing and medical examinations (e.g., for operators or maintenance personnel) if enforcing them presents an undue hardship.
- Be aware of the potential for local leaders or lwi to establish a "quarantine zone" involving an area with
 a particularly high infection rate, or to isolate their community from potential infection, and be ready to
 quickly implement existing standby procedures.

14.9.1.3 Continuously monitor and adjust routes

- Identify routes that must be continued "no matter what." Although overall demand may fall, routes to
 hospitals and other essential services may experience increased demand. Routes to remote
 communities should be maintained.
- Use schedules that the riding public is already familiar with, if possible, such as weekend or
- holiday schedules. Consider closed businesses and changes in destinations that may require route adjustments.
- Be alert for new opportunities, such as working with local government to establish new bus
- lanes and priority signal timing to facilitate higher operating speeds. Investigate maintaining some of these changes for the long term.
- If AT service coordinates with routes of adjacent regions, be sure to consider these interfaces when adjusting routes.
- Monitor traffic and usage. Some systems have been able to maintain equivalent headways with fewer
 buses because of less congestion and higher operating speeds. Track ridership by time of day, by
 line, and by bus, as compared with capacity under social distancing policies. Also track "pass-bys," or
 passengers not picked up because bus capacity has been exceeded.
- Experiment and innovate. Some organisations have been able to implement floating operator
 assignments for more nimble scheduling; others have started 'mobility-as-a-service' initiatives to use
 buses on higher density routes while subcontracting with transportation network companies (TNCs)
 such as Uber and Lyft for low density or late-night service with accessible paratransit as an on-call
 backup.



• Make flexible plans for mid- and long-term operational adjustments. Consider dynamic scheduling to rapidly adjust to changes in demand.

14.9.1.4 Communicate changes clearly with passengers and staff

- Keep employees and customers informed on what, how, and why changes are made to AT services.
 Use signage, apps, and social media for timely notifications.
- Make sure service planners and schedulers communicate with dispatchers, supervisors, communications managers, and other personnel on the ground such as operators and customer service staff to reflect pertinent information in evolving service adaptations.
- Notify passengers of capacity limits and "next bus/train" availability if they are passed by.
- Update AT Mobile app to show this information.
- Use signage at ferry terminals to show current information.

14.10 Financial management

14.10.1.1 Overview

Pandemics can have broad ranging impacts on the financial aspects of AT, ranging from the tracking and documentation necessary for reimbursement of emergency expenses, to immediate loss of AT revenue (fares, parking, infringements, and related revenues) as travel shuts down, to the long-term impacts of potentially reduced federal, state, and local funding and business demand as the economy settles into an altered state.

14.10.1.2 Recognise impacts on revenue

- AT may lose income from shortfalls in fuel tax revenue, executive decisions to redirect funds, fewer paying customers, or other shortages.
- Eliminating fares may be a wise public health strategy but review this decision periodically.
- Consider implementing contactless fare systems.
- Distinguish between short-term and longer lasting reductions. Keep projections up to date and differentiate actuals from projections.
- Identify the availability of financial assistance from other levels of government. Explore and take advantage of all opportunities to supplement AT funds or receive in-kind donations, such as face
- Prioritise organisational costs and project outlays. If possible, delay some projects and transfer funding to operations.

14.10.1.3 Manage expenditures

- Set up accounting function codes to track pandemic related resources, expended time, and expenses. Some may be reimbursable.
- Review priorities and cut where possible. Provide options to executive leadership with cost-benefit analysis.
- Be prepared for some expenses to increase, such as those for sanitation and cleaning and the initial costs of setting up employees to work at home. Some expenses may decrease.
- Review current project and vendor contracts to determine whether they can be terminated or accelerated, if necessary, without significant penalty.
- Review current project and vendor contracts to determine whether the vendor requires early payment in order to be able to provide services in the long term,





- After making a careful analysis of short- and long-term implications:
 - Consider options to furloughing employees (e.g., partial across-the-board furloughs leave without pay),
 - Consider reassigning staff to a capital program (staff costs are capitalised), and
 - Consider assigning staff to other agencies with surge requirements, such as contact tracing or processing unemployment claims.

14.10.1.4 Look for Opportunities

- Manage contracts proactively. Expedite projects that are ready complete at reduced time/cost and stop projects that can be delayed conserving available budget if necessary.
- Access funds that may become available in special legislation focused on "shovel ready projects."
 Make sure AT has a list available the organisation can respond quickly to opportunities.

14.11Stabilisation

14.11.1.1 Overview

Because pandemics can last for months or longer, an initial AT emergency response cannot be sustained for the long term. Developing a stabilisation approach, strategy, and plan that address when and how AT can return to more stabilised operations can allow the organisation to fulfil its objectives over the longer term during a pandemic.

14.11.1.2 Establish a reconstitution or stabilisation plan

- Review essential functions and priorities for the longer term. Note needed functions, personnel, and facilities. Being careful to ensure flexibility, begin to scope out the longer-term impacts.
- Review AT functions separately to assess capabilities and limitations that
- could have an impact on stabilisation.
- Address differences in functional needs, such as operations versus administration.
- Recognise that stabilisation may require changes of habits and modifications of normal operations.

14.11.1.3 Use a phased approach to provide flexibility

- Identify and define phases to be used to roll out the stabilisation. A phased approach allows AT to test the safety and effectiveness of the approach and modify, as necessary.
- Consider using state or federal guidelines to establish phases, if possible.
- Decide the trigger points and decision criteria for each phase. Consider the measures and data to determine when it is safe to move from one phase to the next.
- Determine how AT will assess safety and effectiveness.

14.11.1.4 Ensure Confidence of Staff in safety of approach

- Provide accurate information to employees about what is being planned, the specific approaches and measures being taken, and their role.
- Clarify expectations and responsibilities of employees.
- Provide regular reports to employees on results and modifications to be made due to updated information and any changes in the pandemic.





14.11.1.5 Monitor, Assess, and Document Lessons Learned

- Monitor whether strategies and actions are fully implemented as intended and analyse data on how effective those strategies and actions are.
- Consider using the safety assurance program with indicators to assess safety. Include performance
 measures to track staff pandemic cases and audits to monitor compliance with policies and
 procedures.
- Continually review data and information and be prepared to modify the AT approach.
- Document results and lessons learned and modify plans accordingly.

14.12Concurrent emergencies with pandemics

14.12.1.1 Overview

The long-lasting nature of pandemics means one or more other major emergency events may also occur. Interconnected events are not simply additive; they create complications and stressors greater than the sum of the parts.

14.12.1.2 Consider impacts and influences of multiple simultaneous events

- Conduct tabletop exercises of potential major events—for example, earthquake, civic protests, with the overlay of a pandemic. What changes and what does not change?
- Find creative ways to get additional bench strength for our people. Consider using volunteers and
 retirees for certain tasks. Work with NEMA and council, Auckland Emergency Management to
 strengthen community volunteer resources with training on how to safely help while socially distancing.
- Consider the emergency needs of remote working staff and encourage them to make viable family emergency plans that include evacuation.
- During operations, ensure that public and employee safety remain priorities, along with other operational needs.
- Review common protocols for response, damage assessment, and recovery to find safe and healthy
 ways to perform essential functions in a pandemic environment.
- Make sure to update support contracts to require adherence to health directives and ensure that your contractors for debris management and reconstruction are available to support recovery efforts while adhering to safety guidelines.
- Review your supply chain for traditional, emergency, and pandemic related supplies. Make sure AT
 has adequate stock and backup suppliers for critical items.
- Help staff and systems develop flexibility. Normalise change. With participant engagement, help build
 capacities for self-organisation. Such capacities will pay off both during complex emergencies and in
 normal times.
- Make sure AT has a system for establishing priorities. Document them and communicate them
 throughout the organisation. There may come times when not all priorities can be met initially. People
 generally are more understanding if they know all the facts.
- Evacuations typically require more transportation because, during a pandemic, buses can only safely
 be partly filled. Communities will likely use no congregant shelters, such as hotels, and arriving
 vehicles will require more stops. New Zealand Police are the lead agency for evacuations and are
 supported by ATOC and Metro.
- If requested by the New Zealand Police to transport evacuees, determine the level and type of screening for evacuees AT will transport. If AT must transport sick or contagious passengers, keep them separate from the general population.



- Be aware of social justice, equity concerns and obligations under the Treaty of Waitangi. Establish enhanced partnerships as needed.
- Consider increasing use of technology to limit human exposure. For example, for damage
 assessment, use existing cameras, unmanned aerial vehicles (drones), video, lidar, Google Street
 View and 360 imaging, and geospatial imagery rather than on-site teams of individuals, which is
 aligned to the safety hierarchy of controls.
- The recovery phase in a multiple concurrent disaster scenario is different because the crises will not
 end concurrently. Especially when stringent health directives are still in place, supporting people
 through this phase will be more challenging because they will want to get back to normal, even though
 a crisis may still be taking place.
- Coordinate fleet movements (such as power and communications restoration crews) for response and recovery with the utility fleets (e.g., via Lifelines Utilities, and/or council Auckland Emergency Management) to ensure consistent guidelines and safe and expeditious transit across borders or within the Auckland region.

