

September 2010 and February 2011 Christchurch Earthquakes

Community and Public Health's response to the devastating earthquakes of September 4th 2010, and February 22nd 2011 were based around preventing the risk of gastrointestinal infections and other diseases resulting from the loss of water, power and sewerage infrastructure around the city.

Evacuated staff from our central city office went to the City Council's Emergency Operations Centre, whilst others set up our own base of operations at Christchurch Women's Hospital.



Community and Public Health Emergency Operation Centre Photo: Geoff Cameron

Community and Public Health staff were involved in a variety of roles, including

- coordinating the collection and testing of samples of the water supply as areas of pipe work were repaired – over 5000 samples in the first month of the response
- producing maps of e.coli transgressions (to identify areas where water contamination was occurring), levels of chlorine in the reticulated water supply, and gastrointestinal and enteric disease notifications
- setting up gastrointestinal-like illness surveillance programme, and an influenza immunisation plan for emergency workers
- producing and distributing key public health messages to the media and the community, and making available translations of these messages in migrant languages
- providing a health presence at established welfare centres
- compiling a literature review on addressing best practice in terms of disaster recovery, and updating the Integrated Recovery Guide created after the September 2010 earthquake.

Up to 46 CPH staff were involved in the emergency response each day during the first 6 weeks of the response (the acute phase).

All non-earthquake related work was dealt with by the staff of Public Health South, in conjunction with the other CPH regional offices in Greymouth and Timaru.

Influenza A (H1N1) Swine Flu

Following confirmation of the first cases of Influenza A(H1N1), commonly known as swine flu, in the North Island on 25 April 2009, Community and Public Health immediately embarked upon a containment strategy which comprised:

- border Management Control at Christchurch International Airport
- the use of isolation, quarantine and provision of Tamiflu for treatment of laboratory confirmed cases and contacts
- issue of Public Health information to the media, accommodation providers, bus companies and taxi drivers etc.

This strategy resulted in community transmission being delayed for 6 weeks, thus giving both Primary Care (General Practices) and Christchurch Hospital much needed time to make arrangements for the inevitable influx of cases, given the rampant global spread of the virus.

[Read "Influenza H1N1 2009 in Canterbury: a case study in pandemic response co-ordination"](#) which details Community and Public Health's contribution to this outbreak.



Norovirus Outbreak at International Scout Jamboree

At the start of 2008, Christchurch hosted the 18th New Zealand Scout Jamboree with 4500 scouts and leaders participating. On the first day, nine scouts were diagnosed as suffering from Norovirus, a highly contagious virus that causes severe stomach upsets, vomiting and diarrhoea. It was initially expected that up to 25% of the scouts would become infected.

Medical Officer of Health Dr Alistair Humphrey, assisted by Community and Public Health staff, coordinated the response to the outbreak which involved medical, nursing and paramedic staff from various agencies, including Canterbury District Health Board, St. John Ambulance, New Zealand Army, and Red Cross, and assistance was sought from Civil Defence Emergency Management.

Jamboree organisers were given health advice and took all necessary precautions to limit the spread of the illness including isolating the sick scouts in the central first aid tent after becoming ill.

Camp chief Ross McKenzie said strict hand washing rules had been reinforced with all scouts required to wash their hands when coming back to camp sites and prior to eating.

Thanks to these preventative measures taken and excellent inter-agency collaboration, the outbreak was successfully contained, with only 138 scouts being infected.

