

COVID-19 STRATEGY

Our elimination strategy is a sustained approach to keep it out, find it and stamp it out. We do this through:

- controlling entry at the border with routine quarantine or supervised self-isolation for 14 days;
- disease surveillance;
- physical distancing and hygiene measures;
- testing for and tracing all potential cases;
- isolating cases and their closed contacts;
- and broader public health controls depending on the Alert Level we are in.

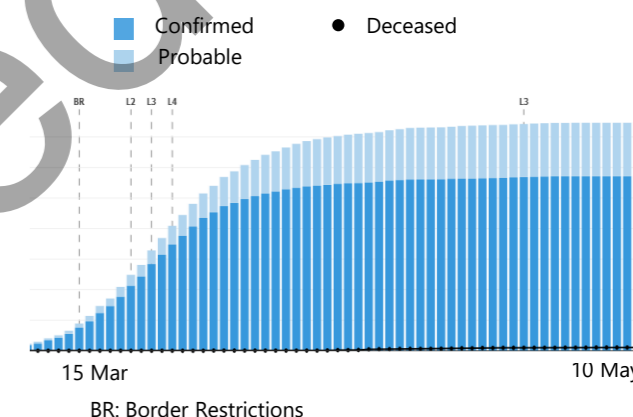
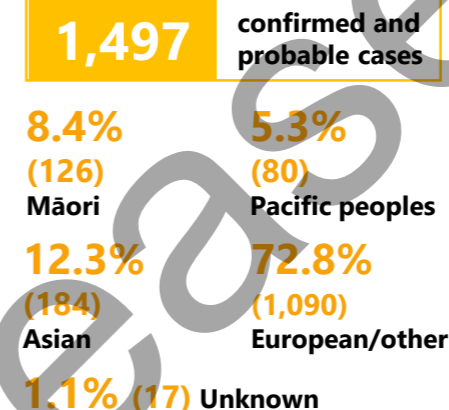
See below for an update on these measures to support our elimination strategy, and an overview of health system utilisation.

SUMMARY OF PROGRESS

At present, we are progressing well against this strategy. Despite broadening the case definition for testing and increasing testing volumes, we have not observed an acceleration in the rate of new cases. The majority of cases have been acquired overseas or are close contacts of someone who acquired COVID-19 overseas. Approximately 5% of cases are potential community transmission. The rate of new cases is anticipated to continue to flatten over the coming weeks. We remain well behind other countries in the expected progress of COVID-19.

CURRENT STATE

As at 1pm 10 May:



Change in cases over time

The rate of new cases continues to flatten out.

HEALTH-RELATED MEASURES TO ACHIEVE ELIMINATION

LAB TESTING

Status: **Sufficient capacity for current demand, with capacity continuing to increase**

Testing capacity is steadily increasing to support efforts to eliminate COVID-19. New Zealand has a high capacity for daily testing. As at 10 May, 190,326 tests have been conducted.

National capacity

11,261 test capacity as at 10 May

5,729 7-day rolling average for week to 10 May

Total tests, by ethnicity

The ethnic breakdown of the tests undertaken between 22 Jan to 30 April is as follows:

- 18,616 Māori
- 9,487 Pacific Peoples
- 11,058 Asian
- 72,272 European/other/MELAA
- 2,771 Unknown

Total tests: 114,204

Positive test rate

On 10 May, 0.1 percent of the 7,287 tests conducted were positive. If our elimination strategy works, you would expect to see this trend continue - more tests finding fewer positive cases of Covid-19.

DHB testing this week (4-10 May)

The following details the week's DHB specific asymptomatic targeted testing efforts. Unless otherwise stated, results refer to testing activity this week.

Auckland: Testing of Marist cluster (staff and students); testing of Healthcare workers (staff in labs, testing facilities, community health providers, hospital staff); aged residential care facilities; a Cook Island repatriation group; Police; and asymptomatic people through CBACs and GPs. **10,780 tests processed to date – 1 positive case identified with unknown source of transmission**

Bay of Plenty/Lakes: Testing police officers – asymptomatic testing and testing high risk groups. **153 tests processed of 170 tests total – all tests negative**

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DHB testing this week (4-10 May)

(Continues from previous column)

Canterbury/West Coast: Canterbury is testing lab workers, police, hospital staff and 11 aged residential facilities. West Coast is offering asymptomatic testing in two remote rural communities and one Māori community (Arahura).

Canterbury: 1,309 tests processed – all negative, awaiting report from West Coast

Greater Wellington: Focusing on case finding. **Tested asymptomatic health staff, and accommodation with shared facilities, 104 tests – all negative**

Hawke's Bay: Testing all staff working in the emergency department on a selected day and planning to test regional seasonal employment workers. **Undertaken 490 tests, all negative**

MidCentral: Testing in-home carers and staff of 10 aged residential care (ARC) facilities across the district. **189 tests processed (in ARC), all negative**

Nelson-Marlborough: Offering testing to health care and welfare workers and police who have been in contact with confirmed cases. Testing asymptomatic returnees from overseas, all staff at a local winery and workers at New World. **297 tests processed, all negative**

Northland: Testing healthcare workers and healthcare related workers (eg, cleaners, admin, lab staff), ARC staff, Police, Ambulance and Fire and Emergency staff. **297 tests processed, all negative**

Tairāwhiti: Focusing on extensive sampling around any cases that are presenting at mobile units, undertook asymptomatic testing at a Tongan church. **65 tests processed, all negative**

Taranaki: Focusing on DHB staff in the local lab, CBAC, Emergency Departments at Base and Hawera hospitals, and a ward in the Base Hospital. **353 tests processed, all negative**

South Canterbury: Testing in Labs, ARC Facilities and police. **125 tests processed, all negative**

Southern: Testing Alliance Pukeuri staff and at Bluff and Murihiku marae, and freezing works workers. **2,187 tests between 24 April and 6 May, all negative**

Waikato: Testing aged residential care facilities (at least 11), staff in rural and Waikato hospitals, lab workers and police. Also targeting Māori using mobile CBACs and GP practices. **1,199 tests processed, all negative**

Whanganui: Focusing on case finding. Undertaking home visits and ARC swabbing. **375 tests undertaken, all negative**

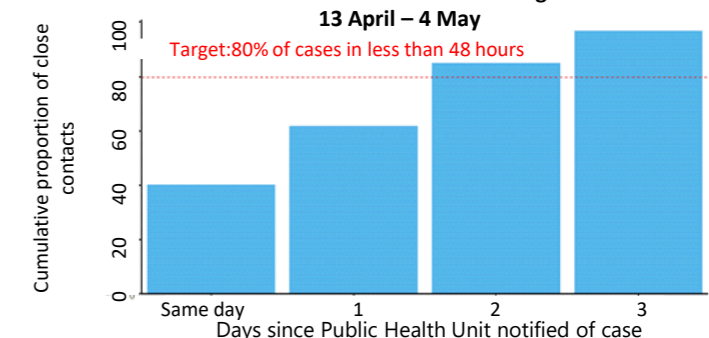
CONTACT TRACING

Status: **Building capacity and speed of contact tracing response**

18 close contacts were resolved on 10 May. Currently PHUs have the capacity to perform close contact tracing for up to 185 cases per day. Additionally the NCCS has the ability to scale to contact up to 10,000 contacts per day.

Over the last month there have been 2-3 close contacts per person on average. Close contacts per case will rise as the Alert Level is lowered. In addition to capacity, timeliness measures are critical to understanding the performance of the testing and contact tracing systems. The Ministry is developing a monitoring framework that aligns with the critical indicators recommended in Dr Ayesha Verrall's Rapid Audit of Contact Tracing for COVID-19 in New Zealand.

Time between notification of case and tracing of close contact



HOSPITAL CAPACITY

Status: **Sufficient ICU bed and ventilator capacity. Working to expand to meet any spikes in demand**

As at 10 May there were two people in hospital for COVID-19 in New Zealand, with none in an Intensive Care Unit (ICU), but one person is in a High Dependency Unit (HDU)

The Ministry is working to ensure there are sufficient staff to meet the potential growth in demand for ICU care. DHBs have been asked to train further nurses in the ICU specialty and postpone the rotation of Junior Doctors to maintain workforce competency. The Ministry is seeking retired healthcare professionals who would be willing to re-join the workforce to assist in the COVID-19 effort.

As of 9 May, 3,541 health and care workers were registered as available on the Covid-19 surge workforce portal after the move down to Alert Level 3. Of these, 547 are doctors and 945 are registered nurses. In total there are 9,814 people on the database (1,256 doctors and 1,906 registered nurses). This larger pool of health workers could potentially be called upon if case numbers rose again and we moved back to Level 4

PERSONAL PROTECTIVE EQUIPMENT

Status: **We have sufficient PPE stocks for the health and disability workforce, and other essential workers**

There is good stock of all PPE gear in the country right now (both from the Ministry of Health national reserves and DHB reserves) and the sourcing and distribution of PPE have been nationalised.

Total estimated stock on hand as at 8 May:

24.9 million
pairs of gloves

434,210
safety glasses

32.1 million
masks

BORDER MEASURES

Status: **Managed isolation and quarantine operating well**

New arrivals into New Zealand continue to be only New Zealand citizens or permanent residents. These people are closely assessed during disembarking.

All incoming passengers are required to enter a quarantine or managed isolation facility.

At 8 May:

161
in quarantine

2,756
in managed isolation