



Briefing

FUTURE OF THE COVID-19 INDEPENDENT ADVISORY GROUPS

To: Hon Chris Hipkins
Minister for COVID-19 Response

Date	19/05/2022	Priority	High
Deadline	27/05/2022	Briefing Number	DPMC-2021/22-1934

Purpose

1. This briefing outlines the options identified for the future of the COVID-19 independent advisory groups and seeks your decision regarding which option you would prefer for each of the Strategic COVID-19 Public Health Advisory Group, the COVID-19 Independent Continuous Review, Improvement and Advice Group and the Community Panel.

Recommendations

We recommend you:

1. **note** that current terms of the COVID-19 Independent Continuous Review, Improvement and Advice Group (CICRIAG), Strategic COVID-19 Public Health Advisory Group (SPHAG) and the Community Panel are due to expire in June 2022 unless otherwise extended.
2. **note** that the global and domestic context of the context in which the COVID-19 response is operating has changed significantly since the groups' inception.
3. **agree** that the COVID-19 Independent Continuous Review, Improvement and Advice Group will be disbanded at the conclusion of their current Terms of Reference on 1 June 2022

YES / NO

4. **agree** that the Community Panel will be disbanded at the conclusion of their current Terms of Reference on 30 June 2022

YES / NO

- 5. **agree** to extend the term of the SPHAG in its current form until 30 December 2022 if there is a clear and defined need for ongoing strategic public health advice.

YES NO


OR

- 6. s9(2)(g)(i) [Redacted]

YES NO

- 7. **agree** to proactively release this report, subject to any appropriate withholding of information that would be justified under the Official Information Act 1982.


YES NO



Amber Bill

Head of System Assurance and Continuous Improvement

19/05/2021



Hon Chris Hipkins

Minister for COVID-19 Response

24/05/2021 2022

Contact for telephone discussion if required:

Name	Position	Telephone		1st contact
Amber Bill	Head of System Assurance and Continuous Improvement	N/A	s9(2)(a)	✓
None	None	N/A	N/A	

Minister's office comments:

- Noted
- Seen
- Approved
- Needs change
- Withdrawn
- Not seen by Minister
- Overtaken by events
- Referred to

Proactively Released

FUTURE OF THE COVID-19 INDEPENDENT ADVISORY GROUPS AND PANEL

Executive Summary

1. The COVID-19 Independent Continuous Review, Improvement and Advice Group (CICRIAG) and Strategic COVID-19 Public Health Advisory Group (SPHAG) were established in March 2021 to provide independent advice to the COVID-19 Response Minister and the Associate Minister of Health respectively. The advice sought from these Groups related to specific areas of the response where improvements could be made, and ensuring our ongoing response was informed by the best available expert advice and scientific evidence.
2. The Community Panel (the Panel) was established in July 2021 to provide diverse perspectives and input into policy and communications approaches.
3. The current terms for all three groups end in June 2022, unless otherwise extended.
4. The global and domestic context in which the COVID-19 response is operating has changed significantly since the inception of the groups. It is therefore appropriate to review the ongoing utility of these groups and determine what their future should be.
5. Work is underway on a post-winter strategy and on transitioning the COVID-19 response to a more sustainable model, and this has informed our advice. In keeping with the direction of this approach, consideration has been given as to whether the functions of these groups are required into the future. If so, research has been undertaken to identify whether there are other groups within the system that may be able to perform the functions of these advisory groups.
6. International evidence shows that most advisory groups that were stood up for the express purpose of providing support during the pandemic have since been, or are currently being, disestablished. Other groups that existed prior to the pandemic, with a mandate to support either a public health or emergency response, seem to be remaining in place in preparation for future events.
7. It is proposed that the CICRIAG is not extended beyond the period of their current terms of reference and that the SPHAG is extended for another six months if there is a clear and defined need for ongoing strategic public health advice.
8. Officials have undertaken a review of the Panel and propose that it will not continue past its current term. However, there is the potential for an existing reference group such as the Ministry of Health's Te Kōtuku e Rere group to incorporate its functions.
9. Alternatively, the three groups could be replaced with a reference group that could be utilised as and when needed. If the decision is made to continue one or more of the groups or replace them with a reference group, then a paper will be drafted to be taken to the Cabinet Appointments and Honours Committee, which will further outline the financial arrangements, including whether they are funded out of either DPMC or Ministry of Health budgets.

Purpose

10. This briefing outlines the options identified for the future of the COVID-19 independent advisory groups and seeks your decision regarding which option you would prefer for each of the Strategic COVID-19 Public Health Advisory Group, the COVID-19 Independent Continuous Review, Improvement and Advice Group and the Community Panel.

Background

11. The COVID-19 Independent Continuous Review, Improvement and Advice Group (CICRIAG) was established on 15 March 2021 [DPMC-202/21-521 and CAB-21-MIN-0055 refer] to provide the Minister for COVID-19 Response with advice and assurance on the work of the COVID-19 response, including the performance of the end-to-end response and areas where improvements can be made. Sir Brian Roche (as Chair), and Rob Fyfe, Dr Debbie Ryan, Professor Phillip Hill, and Dr Dale Bramley were appointed as members of the Group.
12. Throughout February and March 2022, CICRIAG has delivered weekly advice notes in keeping with its mandate. Throughout its term, CICRIAG has provided advice and recommendations on various aspects of the system response. Its activities have been concentrated around outbreaks, operationalisation of distinct policy shifts in pandemic management, and the Reconnecting New Zealanders programme with particular focus on border settings.
13. On 31 March 2021 the Strategic COVID-19 Public Health Advisory Group (SPHAG) was also established to provide independent advice to you via the Associate Minister of Health (Public Health) on the ongoing COVID-19 response informed by their expertise in epidemiology, infectious diseases, public health, and modelling.
14. Professor Sir David Skegg (as Chair), Dr Nikki Turner, Dr Maia Brewerton, Professor Philip Hill, Dr Ella Iosua and Professor David Murdoch were appointed to the Group. There are two Special Advisors to the Group: Rodney Jones and Prof Shaun Hendy. Ian Town from the Ministry of Health is an observer to the Group.
15. SPHAG has issued eight distinct advice notes to date, of which seven have already been proactively released. The scope of issues considered includes risk mitigation measures, the future of the elimination strategy, the timing and phases for reopening borders, advice on determining and designating high risk countries, the strategy for a highly vaccinated New Zealand, future-focussed key trends in the pandemic, and vaccination mandates. Advice has also been communicated to Ministers by the Chair through email or at convened meetings.
16. The Community Panel (the Panel) was established in July 2021 to provide input and feedback on specific aspects of the Government's COVID-19 response. The membership consists of Sarah Sparks (as Chair), Anthony Taueki, Callum Woodhouse, Dr Api Talemaitoga, Dr Aram Kim, Habib Ulla Marwat (until October 2021), Hafsa Ahmed (from October 2021), Jordon Milroy, Margaret Brown, and Michelle Mascoll. The members bring diverse perspectives and insights into their discussions with agencies, drawing on their lived experience. The Panel has considered many aspects of the response including the COVID-19 Protection Framework, the My Vaccine Pass, the NZ Traveller Declaration and the Care in the Community welfare response. It has also provided ongoing input into the approach to communications throughout the response.
17. The Terms of Reference for each of these groups state that they will cease operating in June 2022, unless otherwise extended. The membership of the CICRIAG is due to expire on 1 June 2022 with the Panel and SPHAG groups being due to expire on 30 June 2022¹. This review is being undertaken to assess whether the functions of the groups are required into the future, and if so, how these functions can be provided. This is particularly pertinent due to the context

¹ Cabinet originally agreed that the SPHAG group would be operational until 1 June 2022 unless otherwise extended. However, in finalising the terms of reference it was determined that they would continue until 30 June 2022 unless otherwise extended.

in which the COVID-19 response is operating, having significantly changed since the establishment of the groups.

Changing Context of the Pandemic

18. We are now two years into the pandemic and the context has shifted greatly since the groups were established. Where in March 2021, a small community outbreak had recently been extinguished, we have now seen over one million cases of COVID-19 in the community with the majority of these cases having been identified since the Omicron variant began transmitting domestically. Twelve months ago, we were beginning the roll out of vaccinations and now we have 95% of the population over the age of 12 having received two doses and the paediatric and booster rollouts are well underway. We have also seen a change in how we manage COVID-19 domestically, with our borders now open to most travellers and a move away from the Alert Level system devised for our elimination strategy, to the minimisation and protection approach of the COVID-19 Protection Framework.
19. These changes have been driven by both our high level of protection as a result of a highly vaccinated population, and a need to provide New Zealanders, both domestically and abroad, with more stability as we move through this next phase of the pandemic.

Transition of the COVID-19 Group and the wider response system

20. As a result of the above, the response to COVID-19 is moving into a new normal phase, which will see the functions of the Department of Prime Minister and Cabinet's (DPMC) COVID-19 Group transition to a new operating model, with the wider system taking on the aspects of the response work that align with the core responsibilities of individual agencies. We will also see the health system transition to its new state with new entities being established.
21. The COVID-19 Group's Strategy and Policy team is currently undertaking strategic work regarding the future functions of the COVID-19 Response. It is anticipated that this plan will be delivered to Ministers in June and outline the next phase of the response. This work will also seek endorsement from Ministers regarding the future direction for the COVID-19 Group and the wider system.
22. In keeping with this approach, consideration has been given as to whether the functions of these groups could be provided by another existing advisory group, or whether they could continue operating with another agency providing the secretariat support. The success of any such shift would depend on breadth of the alternative group's mandate, or the capacity and operational flexibility of the alternative agency.
23. Research indicates that the other existing advisory groups have a narrower scope than those discussed in this paper, with each focussing on different aspects of the response to COVID-19 or other infectious diseases. Based on available information, while it is the view of officials that the functions of CICRIAG cannot be readily picked up by other groups, the shift away from a centralised model towards a more devolved operating model supports the view that the more narrowly scoped advisory groups will be adequate to meet the needs of the system and are in keeping with the transition. Officials note further that the CICRIAG's advice throughout their term will continue to remain relevant to the ongoing response. It is likely, however, that there will be an ongoing need for independent strategic public health advice for the short to medium term, given the uncertainty that still exists with the course of the pandemic. In respect of access to community voices and perspectives, there is the potential for the COVID-19 Lived Experience Advisory Group, Te Kōtuku e Rere commissioned by the Ministry of Health to perform the functions of the Community Panel.

International Groups comparison

24. The consideration of the future role and operation of these groups can be informed by international practice with regards to pandemic-related advisory groups. A brief assessment of such advisory groups in the European Union, United Kingdom, Australia, Korea, Taiwan, and Canada reveals a variety of approaches internationally. In general, the advisory groups in other jurisdictions that are enduring are those that existed prior to the pandemic to provide their governments with public health or scientific advice when required. These groups tend to activate and deactivate as required, rather than providing regular advice. Whereas jurisdictions that established advisory groups specifically in response to COVID-19 have either disestablished them or are in the process of doing so. The establishment of such a group that is activated as needed could be considered as part of planning for future pandemic preparedness and the broader system transition work.

Options for the Advisory Groups

25. There are a number of different options for the form and function of advisory groups going forward. The preferred option for each group, or the groups collectively, is dependent on the ongoing needs of Ministers and the wider system.
26. To guide considerations regarding which of these options should be pursued, the following key steps have been undertaken:
- a. **Engagement:** feedback from discussions with the Chairs and members of the groups, Ministerial offices, the DPMC COVID-19 Group, and across agencies has been used to inform the weighting of each option and revise the future model as necessary. Discussions were framed around the value of the groups as an input into agencies' work as opposed to seeking feedback on whether the groups should continue,
 - b. **Assess:** the assessment of the domestic and international landscape provides a backdrop against which to reflect on the continued role and operation of the groups.
27. As well as providing valuable information to inform the options for the future of each group individually, feedback in the engagement phase also provided some insights relating to the groups collectively. This included:
- a. The value of the groups in providing independent advice directly to Ministers to inform their assessment and implementation of key decisions
 - b. The importance of the secretariat for the groups being located within DPMC due to its recognised role in facilitating independent advice to the Prime Minister and Ministers
 - c. Support for the three groups to be reformed as a single 'reference group', which would be available to the Prime Minister and Minister on an 'as needed' basis to provide independent advice on a range of health, social, cultural and economic issues related to the current and future pandemics
 - d. Inabilities or difficulties to gain visibility across and into the response system has acted as a barrier for one or two of the groups to carry out their mandated functions with ease or comprehensively.
28. Three options have been considered for future state of the groups:
- a. disbanding both advisory groups and Community Panel
 - b. extending the term of the SPHAG only
 - c. replacing both advisory groups and Community Panel with a single reference group.

29. The below section summarises the analysis against each of these options.

Analysis of options for the Advisory Groups

COVID-19 Independent Continuous Review, Improvement and Advice Group

30. CICRIAG was formed in the context of an all-of-government response to provide continuous improvement advice from a whole-of-system perspective. Their advice formed part of the mechanisms to provide the Minister for COVID-19 Response with assurance that the system is performing. As such, CICRIAG has principally engaged with and advised the Minister for the COVID-19 Response. Since the group's establishment they have provided advice relating to a number of system elements and system responses to outbreaks including (but not limited to) a review of the Auckland February 2021 outbreak, and the impacts of the Delta outbreak on the *Reconnecting New Zealanders* programme. Throughout February and March 2022, the Group has delivered regular advice notes in relation to the Omicron wave in keeping with its purpose and objectives.
31. It has also delivered its insights directly to agencies. Examples include the border sprint work and the broader Reconnecting New Zealanders programme, changes to the contact tracing definitions, peer review processes and strategy for surveillance testing, and equity-related matters.
32. Discussions with DPMC officials from the Strategy and Policy team and the Reconnecting New Zealanders programme have supported the view that engagement with CICRIAG has added value, noting that the timing of engagement is critical for the Group's views to be able to inform improvements.
33. The above demonstrates that CICRIAG has performed its purpose where it has been afforded the opportunities to do so.
34. In terms of a need for the group to continue, there is a potential role for it to provide an independent perspective on the future outlook of the response, scenario-planning, and the identification of innovative and performance-enhancing approaches to pandemic management.
35. In relation to this, CICRIAG is currently undertaking a rapid review of the Omicron response to identify where approaches did or would have made a difference, with a view to informing future pandemic planning, a successful transition into the new health system structures and an approach to system stewardship and delivery that reflects a whole-of-system approach.
36. CICRIAG believes, and officials agree, that this is an appropriate way for the group to independently inform future planning, rather than continuing to operate. Furthermore, the all-of-government context in which CICRIAG was set up to operate within is relevant. As the functions of the response system shift away from the all-of-government architecture to sit within home agencies in accordance with an enduring business-as-usual steady state, independent advice from CICRIAG to the Minister for COVID-19 Response may no longer be appropriate or required. Instead, it is anticipated that responsibility for stewardship of the COVID-19 (or pandemic) response system will have a clear home base within government in line with good regulatory practice.
37. On this basis, the recommendation is for CICRIAG to cease operating on 1 June 2022 in keeping with its terms of reference.

Strategic COVID-19 Public Health Advisory Group

38. SPHAG has issued eight distinct advice notes to date, of which seven have already been proactively released. The scope of issues considered includes risk mitigation measures, the future of the elimination strategy, the timing and phases for reopening borders, advice on determining and designating high risk countries, the strategy for a highly vaccinated New Zealand, future-focussed key trends in the pandemic, and vaccination mandates. Advice has also been communicated to Ministers by the Chair through email or at convened meetings.
39. Officials who have presented information to SPHAG and called upon members to review their programming, have underscored the value of its contributions to the management of the pandemic. They have highlighted the ability to test proposals, tap into the diverse expertise of the group, and tap into an independent perspective to inform the measures comprising the COVID-19 response.
40. A key contributing factor in SPHAG's ability to be effective was the clear commissioning process from the Associate Minister of Health that defined the scope and timing of specific pieces of advice. This commissioning set a clear and visible mandate that supported agencies to prioritise the provision of information required for SPHAG to deliver the commissioned advice.
41. Based on the consideration of these outputs and activities, SPHAG has effectively performed its role in keeping with its terms of reference.
42. In the next phase of the COVID-19 response, the central focus on health will be increasingly accompanied by greater emphasis on the social and economic impacts of the pandemic. Given the lifting of border measures, most vaccine mandates, and the narrowing of the COVID-19 Vaccine Certificate (CVC) system, the pandemic-related inputs of the SPHAG are expected to be less urgently and regularly sought than previously. As a result, the need for the type of advice SPHAG has provided is likely to decrease in the next phase of pandemic management.
43. The independent quality of SPHAG's considerations should also figure in considerations on whether it should be disestablished. The provision of independent advice directly to the Associate Minister of Health (Public Health) has facilitated an agile and responsive approach to pandemic management since the Group's establishment in March 2021.
44. In terms of whether another part of the system is able to provide this input, the planned Public Health Advisory Committee was considered as an option. However, based on the current understanding of its role, the Committee will have a wide brief and be looking at all public health aspects of the systems. Consequently, its members are unlikely to have the targeted and concentrated expertise related to epidemiology and infectious diseases that the SPHAG currently has.
45. It is noted that at the end of the current term, Sir David Skegg will be stepping down as Chair of SPHAG and Professor Philip Hill will be discontinuing his role (in both of the advisory groups). The ongoing availability of other members is not yet determined. If continued, the capacity of other members to participate will require confirmation and a new Chair of the SPHAG will need to be appointed.
46. Considering the above, it is recommended that the term of SPHAG is extended for six months until 30 December 2022 if the Associate Minister of Health has clear and defined need for further strategic public health advice. Officials recommend that the secretariat function remains within DPMC to maintain continuity of support.

Community Panel

47. Throughout its term, the Panel has received information and provided feedback on a range of aspects of the response from multiple agencies. Representatives from the communications and engagement teams within the COVID-19 Group have also participated in each of the Panel's meetings to provide updates and receive feedback on related activities.
48. Feedback from agency and COVID-19 Group representatives indicates that the Panel has provided valuable input into the response. While officials noted that there are a number of forums and groups that collectively can provide input from diverse communities, it is unique to receive and access input from a wide variety of perspectives in one place. They valued the opportunity to hear a good cross section of views from respected community advocates and leaders.
49. The above assessment indicates that the Panel has performed its purpose in keeping with its terms of reference.
50. As part of this review, consideration has been given to the need for a group to continue providing such perspectives on the response. As noted earlier, there is a shift away from the all-of-government system architecture to a more devolved enduring system architecture and it may better suit the steady state system to leverage existing advisory groups/panels and community-based relationships as a mechanism for the lived experience voices to feed into the system.
51. The value of a single group that brings together diverse voices from across society is highlighted as a model that should be considered and deployed not only for the ongoing response to COVID-19 but also for broader government policy development and decision-making. There may be existing groups in place that could evolve to continue this type of engagement in the response. For example, the Ministry of Health has commissioned a COVID-19 Lived Experience Advisory Group, Te Kōtuku e Rere. Its role is to ensure lived experience voices and active community engagement shapes the planning and implementation of the ongoing response to the COVID-19 pandemic in Aotearoa, New Zealand. However, it is noted that this group currently focusses on the health aspects of the response (rather than the work of other agencies) and its future is yet to be determined.
52. If there is a need for a single group to provide diverse perspectives on all aspects of the future response, it is recommended that there is further work to explore existing reference groups, such as Te Kōtuku e Rere, to establish whether their scope and membership are able to meet the broader needs of the ongoing response or can be expanded to do so. The value of the breadth of communities currently represented in the Panel (including migrant, rural, disability, and rainbow communities in addition to Māori and Pasifika) is of particular importance when considering the membership or potential expansion of membership of an existing group.
53. Considering the above, DPMC recommends that the Community Panel cease operating on 30 June 2022 in keeping with its terms of reference.

Forming a single reference group

54. Feedback received during the engagement with the Chairs of the groups is that if there is a need for continued advice there is potential to establish a new advisory group under a different operating model. From discussions, it is suggested that such a group could:
 - function as a reference group available to meet directly with the Prime Minister and Ministers as required
 - be made up of members that collectively come from diverse backgrounds and possess a wide range of expertise, so that they can provide input on any aspect of the response

- be available on an as needs basis rather than having regularly scheduled meetings.
55. If it is agreed that a reference group be established, officials will provide further advice regarding the proposed terms of reference and provide a draft paper to be taken to the Cabinet Appointments and Honours Committee if required. It is anticipated that the current groups will be disbanded at the end of their current terms with the new reference group being stood up shortly afterwards. It is not anticipated that the groups be extended until the new reference group is formed.
56. Should this option be preferred by Ministers, officials will undertake further work to identify desired areas of expertise, and, where appropriate, work with existing members of the SPHAG, the CICRIAG, and the Panel to determine their availability to be included in the membership of a new group. This would allow for the reference group to benefit from their experience and to provide for some continuity. There is also the potential to bring in members with new perspectives or areas of expertise as some members of the existing groups are not available to continue past their current terms or where different expertise is sought.

Treaty of Waitangi considerations and te ao Māori perspective

57. Should the Panel be disestablished then there will be fewer avenues for officials to seek direct input from on the ground te ao Māori perspectives when developing or operationalising policy. There are, however, other consultation processes in place and officials are able to continue to engage with iwi and Māori leadership groups as well as with their colleagues at Te Puni Kōkiri and Te Arawhiti to ensure these matters are sufficiently covered.

Financial implications

58. There is no fiscal impact to the Crown arising from decisions in this paper.
59. As of March 2022, the expenditure in relation to the advisory groups themselves has totalled approximately \$129,375 (CICRIAG), \$142,187 (SPHAG), and \$11,562 (the Panel). The Ministry of Health meets the costs for SPHAG, with the exception of the secretariat function that is resourced from DPMC. DPMC meets all remaining costs for the other two groups. Both agencies have capacity within their operating budgets to continue to support these groups should their terms be extended.

Next steps

60. If it is agreed that all or any of the SPHAG, CICRIAG and Panel will not be extended beyond the period in their current terms of reference officials will work with your offices, to ensure that the members and chairs receive a formal thank you for their service.
61. If the decision is made to continue one or more of the groups, either in their current form or as a reference group that replace the groups, then a paper will be drafted to be taken to the Cabinet Appointments and Honours Committee.