



**MINISTRY OF BUSINESS,
INNOVATION & EMPLOYMENT**
HĪKINA WHAKATUTUKI



**DEPARTMENT OF THE
PRIME MINISTER AND CABINET**
TE TARI O TE PIRIMIA ME TE KOMITI MATUA



MANATŪ HAUORA



BORDER EXECUTIVE BOARD



**NEW ZEALAND
FOREIGN AFFAIRS & TRADE**
MANATŪ AORERE



COVID-19 Response Weekly Report

04 March 2022

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1. Status Summary

Key		
Symbol	Colour	Meaning
●	Green	On track, no roadblocks, no significant delays anticipated
●	Amber	Slow progression, some delays, some roadblocks present
●	Red	Not progressing, on hold, significant delays

Border

	Agency	Last Week	→ This Week	Agency Comment
Border measures	MoH	●	●	<ul style="list-style-type: none"> Step 1, enabling New Zealanders to enter on the self-isolation pathway from Australia commenced on 27 February 2022 at 11 59pm. It was announced on 28 February 2022 that Step 2 would be brought forward from its original commencement date and arrivals were no longer required to self-isolate. Therefore from: <ul style="list-style-type: none"> 2 March 2022 all vaccinated New Zealanders from Australia are not required to self-isolate upon arrival. On 4 March 2022 this extended to all vaccinated New Zealanders around the world. 13 March 2022, further exceptions for skilled workers and working holiday visas requiring no self-isolation will commence. Steps 3 to 5 for fully vaccinated foreign nationals will be sequenced between April to October 2022. Ministry officials will provide further advice on the timing of Step 3 and Step 4 of the Reconnecting New Zealanders pathways.
Testing and vaccination of border workforce	MBIE	●	●	<p>Staff Testing</p> <ul style="list-style-type: none"> All MIQ facilities have moved from PCR testing to Rapid Antigen Testing (RAT) for workers. With the move to RAT testing, information about testing will be logged by workers in the My Covid Record. At present, this information does not flow through into the BWTR so MIQ intends pausing reporting on testing compliance. <p>Vaccinations and boosters</p> <ul style="list-style-type: none"> Site entry processes are in place to ensure only workers who are compliant with the Vaccinations Order are able to gain entry to an MIQ facility. The BWTR shows, of the workforce on site for the week of 21 -27 February 2022, 99.3% have had two doses of the vaccine, 0% had one dose and 0.6% have vaccination status 'unknown'. Vaccination assurance follow-ups for those with an 'unknown' status in BWTR on site between 14-20 February 2022 did not identify any breaches of the Vaccination Order. However, follow ups regarding boosters identified 7 workers who were on site who should have had a booster. Of the workers on site the week of 21-27 February 2022, 14 workers (0.3%) were showing in BWTR as overdue for a booster. The workforce testing and vaccination team will investigate those to identify whether they are breaches of the Vaccination Order or a result of something else (e.g. data error etc.) This indicator is at amber due to the impact on assurance systems brought about with the introduction of RAT testing for workers (as above).
Two-way QFT Cook Islands	MFAT	●	●	<ul style="list-style-type: none"> 11 new cases were detected on 2 March, taking the total number of cases in the Cook Islands to 49 (with 4 having recovered). The majority of new positive cases have emerged from a Kiribati community. This cluster is expected to increase.
Reopening new travel pathways - Pacific Islands	MoH	●	●	<ul style="list-style-type: none"> The expansion of quarantine free travel (QFT) from Nauru, Tuvalu, and American Samoa commenced on 27 February 2022 at 11.59pm.

Border (Continued)

Agency	Last Week	This Week	Agency Comment
MFAT	●	●	<ul style="list-style-type: none"> Changes to the self-isolation and MIQ requirements means that eligible travellers from the Pacific, including RSE workers from eligible countries, can now travel to New Zealand from 14 March without the need to isolate. <ul style="list-style-type: none"> As of 2 March, there are 293 active cases among RSE workers in New Zealand. Workers affected are from Kiribati, Samoa, Vanuatu, Tonga and Solomon Islands. American Samoa's confirmed COVID-19 community cases have increased to 85 as of 1 March. Authorities have imposed strict movement rules to avoid COVID spreading to outer islands. As of 25 February, Tonga has confirmed a total of 178 active cases. <ul style="list-style-type: none"> In addition to the 30,000 Pfizer doses sent by Aotearoa New Zealand to assist with Tonga's booster drive, PPE and RATs, MFAT are working to provide an additional PCR testing machine and mobile laboratory. Vanuatu has again suspended inward international flights (including RSE repatriations) as three further border workers have tested positive for COVID-19. However, restrictions on domestic travel into and out of Efate (the island where Port Vila is located) have ended.

Managed Isolation and Quarantine and Return to the Community

Agency	Last Week	This Week	Agency Comment
MBIE		●	<p>Network Transition Planning</p> <ul style="list-style-type: none"> You have agreed to the decommissioning of Tranche 1, and a cabinet paper is being prepared regarding the Tranche 2 pathway. Any announcements and associated formal notifications to these facilities will not happen until after Cabinet has made their decision regarding Tranche 2 on 7 March 2022. The Rydges Auckland decommissioning continues at pace with impacted workforce consultation now complete. This remains on track for a full decommissioning by 30 April 2022.
MBIE	●	●	<p>Ventilation Systems</p> <ul style="list-style-type: none"> Ventilation remediation work has been completed at 29 of our 32 facilities, with 26 of those facilities fully signed off (no change from last week). Note: MBIE expect to get one more facility (Sebel Manukau) signed off later this week. MBIE proposes only reporting Ventilation issues by exception going forward. The dispatch of Air Filtration Units to all Isolation facilities for "Cases Under Investigation" has been completed.
MBIE	●	●	<p>s9(2)(f)(iv)</p>



Place and conditions of stay

Community Protection

Agency	Last Week	This Week	Agency Comment
MoH	●	●	<ul style="list-style-type: none"> 20,086 tests were processed on 1 March 2022 with a rolling 7-day average of 26,004. On 1 March, 31.5 percent of tests were processed within 24 hours and 37.4 percent of tests were processed within 30 hours. As at 2 March 2022, the baseline COVID-19 laboratory PCR testing capacity is 31,410 tests per day without pooling. All PCR samples had been registered by laboratories and there were 38,201 samples older than five days. With the reduction in PCR demands from CTC and GPs, the network can support backlog testing more with distribution through the network. RATs are now the primary form of testing. Supply of both PCR and RATs is being prioritised around protecting priority populations from severe disease and/or death, ensuring equity and limiting the impact on society through the protection of critical workers and critical infrastructure. Testing plans for higher risk settings, including Aged Residential Care, Corrections facilities, Youth Justice facilities and residential care settings have been developed. s9(2)(f)(iv) On 2 March 2022, the Ministry of Health had 6.3 million RATs stock on hand plus approximately 7.7 million RATs that have been dispatched from the warehouse in the last seven days. The Ministry of Health continues to build its stocks of RATs with additional orders and delivery confirmations happening each day. As at 2 March, there were 173.5 million RATs on order to the end of June 2022, with confirmed deliveries of 105.2 million in March 2022.




Case investigation, surveillance and testing

Vaccination

Agency	Last Week	This Week	Agency Comment on Status of Focus Area
MoH			<ul style="list-style-type: none"> As at 11.59 pm on 1 March 2022, 10,652,153 vaccinations have been delivered. 3,960,970 people are fully vaccinated and 2,390,659 booster doses have been administered. 72 percent of people eligible for a booster have received a booster. 97 percent of the eligible 12+ population has now received at least one dose, and 95 percent is now fully vaccinated. As at 11.59pm on 1 March 2022, 243,224 Pfizer Paediatric first doses have been administered, with 51 percent of children aged 5-to-11-years having either booked or received their first dose of vaccine. 3,739 Paediatric second doses have been administered. Nearly 100 percent of people over the age of 65 have received two doses of vaccine, and 90 percent have received their boosters. All DHBs have now achieved 90 percent uptake of first doses. Nineteen DHBs have also achieved 90 percent second doses, with Northland 3,397 doses away from reaching this milestone. Auckland, Mid Central, Capital & Coast, Hutt Valley, Canterbury and Southern DHBs have achieved 90 percent fully vaccinated for Māori over 12 years old. Wairarapa, West Coast and South Canterbury are less than 100 doses away from the 90 percent threshold. Strategies for uptake continue to focus on increasing booster and five to 11 year old vaccinations, including directed efforts to raise vaccination rates for tamariki Māori and Pacific children. The Ministry of Health continues to work with DHBs to lift the number of sites open over the weekend to match week-day capacity, with DHB incentives proving successful in raising site numbers. To support local events from a national Level, the Programme has reached out to other central government agencies to drive support for vaccinations through their networks and engaged the PWC Vaxathon team to drive initiatives across the motu. On 28 February 2022, Cabinet approved the use of the Novavax vaccine for people aged 18 and older. Work is underway for delivery of the vaccine, with a rollout date to be confirmed. The extended deadline for the Health and Disability workforce who are required to have their booster dose expired at 11.59pm on 24 February 2022. A group application from all 20 DHBs for Temporary Significant Service Disruption exemptions for 654 staff has been submitted and is in progress. On 22 February 2022, it was announced that an additional \$140 million will be made available to Māori and Pacific providers to scale up local services to enable wraparound and holistic support and to allow communities, particularly iwi, to mobilise their own approach to building resilience against Omicron. The Programme has met with Te Puni Kōkiri, Ministry of Social Development, Te Arawhiti, and Oranga Tamariki to develop strategies on how to work with beneficiaries and support each other using tools such as heat maps and remainder data to vaccinate whānau. Disability vaccination is progressing well, with strong uptake of boosters among Disability Support Services and ACC supported clients. Uptake of paediatric vaccinations for Disability Support Clients is in line with the general population uptake rates. <p>Five to 11-year-olds</p> <ul style="list-style-type: none"> Recent consumer research undertaken for the programme reports that 74 percent of Māori parents and caregivers of five to 11-year-old tamariki are likely to have their tamariki vaccinated. The Programme staff are meeting with DHBs regionally to understand the experiences of parents and caregivers of tamariki Māori, and the opportunities to better support them in getting their tamariki vaccinated. Providers are promoting vaccination through a variety of channels, including radio, social media, and iwi communication channels.

Implementation and operation

Resurgence Planning and Response

Agency	Last Week	This Week	Agency Comment on Status of Focus Area
DPMC			<ul style="list-style-type: none"> A briefing for the CCB is underway, to support augmenting workforces across agencies, sectors and industries as workforce absenteeism escalates. It will outline any additional opportunities identified worth investigation to support workforce supplementation over the coming months. This will be an oral item at the CCB on Tuesday 08 March. Cross-agency urgent issue mitigation has been occurring daily through the AoG Ops forum and bi-weekly in the AoG Supply Chains forum to keep New Zealand moving. The first of the winter planning sessions were held this week using a scenario of ongoing COVID-19 alongside outbreaks of measles, RSV, flu, and whooping cough etc. Discussions were held regarding long-term assumptions in preparation for winter, and conversations touched on the compounding issues from the situation in Ukraine.
MoH			<ul style="list-style-type: none"> With the continued upward trajectory of cases and decreasing capacity of the wider health system to continue to manage under phase Two, the shift to Phase Three of the Omicron response plan was made at 11.59pm on 24 February 2022. Under Phase Three, the intent is that resources and effort will be targeted on the populations at risk of severe outcomes from COVID-19. The corollary is relying on most of the population to manage their own symptoms, undertake contact tracing through self-management digital platforms, test themselves and isolate at home as appropriate. The COVID-19 Assessment Committee met on 1 March 2022 and agreed that the current RED setting of the COVID-19 Protection Framework remains appropriate.

COVID-19 Management Planning and Response
Readiness Planning

2. COVID-19 Insights

2.1 Insight of Note Written by the Department of the Prime Minister and Cabinet

2.1.1 Countries That Have Removed COVID-19 Restrictions in the Wake of Omicron

Introduction

The Insights and Reporting Team in DPMC's COVID-19 Group have analysed four countries that have removed, or will be removing, nearly all COVID-19 restrictions¹ in the wake of Omicron. Looking at Denmark, the United Kingdom, the Netherlands, and Canada, this report identifies the COVID-19 situation, the justifications from policy makers for removing restrictions, as well as public sentiment around removal of COVID-19 mandates. Each country analysed has high vaccination rates, less impact on their health systems than earlier in the pandemic, and declining public support for restrictions, indicating declining social license² for government mandates. The four countries analysed are now all opting for a COVID-19 response model that offers recommendations rather than requirements, and personal responsibility for managing COVID-19 over strict guidelines. This report also briefly touches on public sentiment in New Zealand regarding COVID-19 restrictions during a surge in Omicron cases. Though New Zealand has a high vaccination rate, there is uncertainty around how the health system will cope with a rise in cases, an outcome which will likely have an impact on social license for restrictions. This is a summary of a longer report, which is available upon request.

Summary

All of the countries analysed have removed, or are planning to remove, domestic COVID-19 restrictions. Although most all countries removed restrictions in stages, most selected one date to eliminate the vast majority of domestic mandates.

Denmark - Although Denmark has the highest COVID-19 infection rate in Europe, with cases having reached record highs, the Danish government removed all domestic COVID-19 restrictions on 1 February, with settings resembling pre-pandemic life.¹ ² Though the government continues to recommend the use of face coverings and vaccination passports in hospitals and aged care facilities, COVID-19 is no longer seen as a 'socially critical disease' that can justify ongoing public health mandates.³ ⁴

United Kingdom - On 27 January 2021, the United Kingdom (UK) Government pulled back its restrictions including ending England's 'Plan B' restrictions,³ indicating a shift in COVID-19 policy from government restrictions to personal responsibility. This ended nearly all government health mandates and restrictions around COVID-19, with facial coverings no longer required in public, and vaccination certificates, and social distancing becoming voluntary.⁵ On 24 February the government removed the mandate for positive cases to self-isolate for five days, making any quarantine voluntary.⁶

Netherlands – By mid-February 2022 the Netherlands began to swiftly remove restrictions using a three staged process over 10 days, with the bulk of restrictions ending on 25 February. By this date nearly all COVID-19 mandates were removed including the need for social distancing, vaccination passes, use of QR codes for contact tracing, use of facial coverings in most indoor settings, and gathering limits.⁷ Remaining mandates in place in the Netherlands include requirements for facial coverings on public transport, at airports, and on aircraft, as well as presenting proof of a negative test prior to attending certain events.⁸

Canada - In Canada, although COVID-19 restrictions and mandates remain primarily under provincial and territorial jurisdiction, most regions are in the process of removing public health mandates around vaccine certificates, facial coverings, and capacity requirements.⁹ ¹⁰ ¹¹ Most of the removal of restrictions across Canada are occurring in stages between February and March 2022.

¹ For the purposes of this report, the terms 'restrictions' and 'mandates' are used interchangeably to refer to government imposed COVID-19 health policies, such as mask use, capacity limits, and vaccine certificate requirements.

² The term 'social license' refers to the overall willingness of the public to comply with government mandates and restrictions around COVID-19.

³ The government adopted Plan B in December 2021, which reintroduced some public health restrictions including mask use in public, social distancing and vaccine pass requirements, all intended to curb the spread of the emerging Omicron variant and allow time for the booster vaccination rollout.

Key justifications for removing restrictions are high vaccination rates, residual immunity from prior infection waves, low ICU rates, and minimal pressure on the healthcare system. All of the countries analysed have high overall rates of COVID-19 vaccinations, including rates of booster doses, as well as the population having some residual immunity from previous outbreaks earlier in the pandemic. High vaccination rates are cited as a key factor that reduced disease severity during Omicron waves, reduced hospitalisations, and allowed for restrictions to be removed.

Denmark – In Denmark, restrictions were removed during the height of their Omicron cases. The Danish government has cited high vaccination coverage and residual immunity from prior COVID-19 infections as key factors that have allowed them to remove restrictions. Nationally, 82 percent of the total population are fully vaccinated, with 62 percent of the total population having received a booster dose.¹² The Omicron wave has resulted in less severe infections amongst the population, with no increase in ICU admission despite record case numbers.¹³

United Kingdom - The UK Government justified removing restrictions indicating the surge of cases driven by the Omicron variant has peaked, with high vaccination coverage contributing to a decline in hospital and ICU admissions since January 2022.^{14 15 16} The UK has a high vaccination rate, with 72 percent of the total population fully vaccinated, and 55 percent of the total population having received a booster dose.

Netherlands - Despite record COVID-19 case numbers seen across the Omicron wave, the Dutch government removed restrictions days after cases peaked, justifying the move given high vaccination and booster levels, declining case numbers, as well as low levels of hospitalisations and deaths.¹⁷ In the Netherlands, 72 percent of the total population are fully vaccinated, and 52 percent of the total population have received a booster dose.¹⁸

Canada - Although Canada experienced a record amount of infections, high ICU levels, and deaths during the Omicron wave in early 2022, many provincial governments have justified removing restrictions given the high vaccination rate, declining cases and ICU numbers since mid-January. 81 percent of the total Canadian population are vaccinated, with 45 percent of the total population having received a booster dose.¹⁹

Public sentiment is mostly positive towards removing restrictions in the countries analysed, indicating reduced social licence for government-imposed mandates.

Denmark - Sentiment around the removal of restrictions in Denmark has been largely positive, likely due to the high level of trust the Danish public have in their national government,²⁰ and the high level of acceptance of COVID-19 policies more generally.^{21 22} A Danish poll published the day prior to the removal of restrictions indicated that 64 percent supported the government's current COVID-19 policy.²³

United Kingdom - Sentiment around removal of restrictions in the UK has been more varied. A poll in early December 2021 indicated the majority of the public in the UK did not support strict lockdown rules. 68 percent opposed closure of pubs and restaurants, 64 percent opposed restricting leaving the home for essential purposes only, while 61 percent opposed not allowing to meet with others outside their bubble.²⁴ The same poll, however showed support for more lenient restrictions including maintaining social distancing, and restricting group sizes.²⁵

Netherlands - In the Netherlands public sentiment around the government removing nearly all COVID-19 restrictions has been largely positive. One research poll shows support for the Dutch government increased from 45 to 51 percent since the announcement to remove restrictions was made.²⁶ Prime Minister Mark Rutte has also been facing increased calls to relax restrictions and reopen all businesses, given the low prevalence of severe illness.^{27 28} Reports have indicated social licence for restrictions has reduced, with much of the public and businesses openly violating rules in place.²⁹ Large scale demonstrations happened in January 2022, with thousands protesting COVID-19 restrictions in Amsterdam, with frustrations growing from the business sector, particularly hospitality.^{30 31}

Canada - Public sentiment across Canada has largely been positive towards ending health restrictions, indicating a shifting mentality towards a preference of living with the virus and a decrease in social licence around mandates. A study conducted in mid-January by the Angus Reid Institute revealed that public opinion has been growing in favour of removing restrictions. The easing of restrictions also arrived following over four weeks of the highly publicised 'Freedom Convoy' protest in the Canadian capital against vaccination mandates, and other COVID-19 related restrictions. Surveys indicate that 46 percent of the Canadian public felt that the frustration of the protest was 'legitimate and worthy of sympathy', though they did not agree with the tactics

used.³² Though evidence indicates sentiment is positive around reducing restrictions, concerns do remain around the impact this will have on vulnerable people, the prevalence of long COVID and new variants.^{33 34}

Positive public sentiment around Government COVID-19 mandates In New Zealand remains high but is slowly declining. While public sentiment towards current government guidelines around New Zealand's COVID-19 Protection Framework indicates that people think there is a good balance between restrictions and slowing infections, surveys indicate that the number of people angry about mandates under the CPF has been gradually increasing.³⁵ Government approval in handling the pandemic has also been gradually declining over the last year.³⁶ Protests around mandates have also been increasing in size, volatility and impact, with the recent Freedom Convoy protest occupying Parliament grounds for several weeks, and several other protests occurring nation-wide. Although Omicron is a less severe variant of COVID-19, New Zealand has yet to face a sustained community outbreak. The impact of COVID-19 on New Zealand's health system is still being understood as the Omicron wave continues to spread. As case numbers and hospitalisations increase, this will possibly prolong social licence for government mandates, until the extent of the impact of Omicron is known.

Thank you to the following teams which contributed to this insight: the Ministry of Foreign Affairs and Trade, the Ministry of Health, and the Ministry of Business, Innovation, and Employment.

Proactively Released

3. Ministry of Health



3.1 Policy/Programme Updates

3.1.1 Updating Accommodation Guidelines

This item advises you that in light of the increase in Omicron cases, and a shift to home isolation of COVID-19 cases, MoH have updated the COVID-19 Care in the Community guidance that is currently published on the Ministry of Health website.

The *How to isolate safely in apartments and other unit title developments* guidance was first published on 20 December 2021, before the emergence of Omicron in the community. MoH have updated the guidance to reflect feedback from individuals who reside in apartments, government agencies, the Body Corporates' Chair, and taking into account the Ministry's Omicron Response Strategy.

The updates include providing further clarity on roles and responsibilities of the bodies corporate, and practical steps to ensure individuals can safely isolate in apartments and multi-unit dwellings. The updated guidance on *How to isolate safely in apartments and other unit title developments* has been sent to key stakeholders and was published on the Ministry of Health's website on 28 February 2022.

MoH are also working alongside housing and welfare agencies (Ministry for Housing and Urban Development, Ministry for Social Development, and Kāinga Ora), to update another guidance document, *COVID-19 Public Health Guidance for Temporary Accommodation providers*. The guidance document is focussed on preparing social service agencies, emergency, public and temporary housing, holiday accommodation, managers, and owners to support guests / clients, staff, and contractors on how to house and assist individuals and families in the event that they have a case or cases requiring isolating at the property i.e., access to social services, best ways to isolate and receive assistance with refuse collection, food, medicines, etc.

Next steps

MoH intend to publish the *COVID-19 Public Health Guidance for Temporary Accommodation* on the Ministry of Health website on 7 March 2022.

3.1.2 Health System Preparedness Programme: Update

This item provides an update about the Health System Preparedness Programme (HSPP).

Programme governance group has disbanded

The programme has been focussed on the implementation of Phase 3, updating processes, communications, rolling out digital tools, supporting and getting assurance on readiness of the Care Coordination Hubs, and primary care and community care.

The programme governance group met on 25 February 2022 and acknowledged the efforts of the programme to support the preparedness of the system to manage COVID-19. The Chair and a number of the members are of the view that now that the sector has faced the first wave of Omicron, there is a reduced need for them to provide assurance. It was recommended by the Chair that the group be disbanded.

The steering group and advisory groups remain in place to ensure ongoing assurance over day-to-day operations.

Reports of families being treated as multiple contacts

There have been reports of families being treated as multiple contacts, rather than as a family, via the digital tool. The issue is one of three connected problems, within multiple systems, resulting from privacy requirements; duplication in the National Contact Tracing Solution (NCTS); and capability issues in the patient management system.

Our technology team is currently working to identify fixes across multiple front-end and back-end systems, which will then be prioritised into the existing work programme for delivery. Due to the complexity in resolving the system issues, this will take some time to resolve. Mitigations will be delivered over coming months.

COVID-19 Care in the Community

Communication and Engagement

Our communications team is working on messaging and assets to support uptake of the digital tools to support people through their isolation period.

They are also working on content to provide more information for those isolating at home with home help/home care support, isolating when pregnant, and isolating at home with children.

There are hui and fono being held to provide more information on the Omicron response, Care in the Community, and digital technology. These are:

- 1 March 2022 - older people
- 3 March 2022 – disabled people
- Week beginning 7 March 2022 - South Island Ethnic Community Groups.

The programme continues to work with the Ministry of Social Development (MSD) to jointly engage with Māori and Pasifika providers. This is in response to communities asking for further clarification regarding accessing welfare support.

The programme participated in a national fono with the Ministry of Pacific peoples on 28 February 2022, which had strong participation from the Pacific community. Feedback from the participants was that it clarified the understanding of both the Omicron Response and Care in the Community.

Disability

A number of workshops with the disability sector on COVID-19 Care in the Community were held the week beginning 21 February 2022. The outcome sought was to provide relevant and appropriate questions that could support the clinical and welfare self-assessments and identify those individuals that require specific support.

To determine their suitability to support the risk stratification tool, data sets are currently being identified, reviewed and assessed by the Ministry of Health. The risk stratification tool will prioritise those that have not responded to the initial electronic self-assessment.

Governance

Between 21 – 25 February 2022, three new governance groups for the Care in the Community programme held their inaugural meetings. The Clinical Advisory Group, Therapeutics Advisory Committee, and Digital Advisory Group have members from across the sector and the Ministry of Health and will support the Care in the Community programme.

The purpose and focus of these groups are as follows:

Clinical Advisory Group

- review of the care in the community model of care
- review of the clinical assessment tool
- review of the clinical pathways (self-management and managed pathways).

Therapeutics Advisory Group

- review implementation, logistics and funding of new therapeutics.

Data and Digital Advisory Group

- review and prioritisation of scheduled releases of new and iterated functionality (backlog).

Care in the Community Framework

The Care Coordination Hubs have evolved from a concept to 44 operational Hubs, shaped to meet the needs of their local population. To support the Hubs' work, detailed guidance in the form of an addendum to the COVID-19 Care in the Community Framework version two was released the week beginning 21 February 2022. This guidance, developed in collaboration with the health sector, clarifies roles, responsibilities, and processes for the Hubs.

The update of the COVID-19 Care in the Community framework to version three is underway and expected to be published in mid-March 2022.

Metrics

Care in the Community metrics focus on the journey from test, notification, assessment, care and support, through to release from isolation. Some of the data needed for metrics is already available, and some are subject to development. To display the metrics appropriately a report is being developed. This report will be updated for a range of new metrics as data becomes available, following technology releases across active and self-management pathways.

You received the inaugural dashboard on 2 March 2022. Additional metrics will come online by 4 March 2022, subject to technology releases and data availability.

Digital tools to support self-isolation

The digital team continues to develop and refine tools and provide post-release support to enable the self-management pathway. Additional components continue to be developed for the COVID-19 Clinical Care Module (CCCM) and National Contact Tracing System (NCTS) to increase functionality, system integration and user experience. The team has been able to resolve post-release bugs rapidly.

Following initial low numbers (approximately 30 percent) of people filling out the online form after receiving a text message notifying them of their positive result, MoH have adapted the online form. Utilisation of the form has subsequently increased to 87 percent, and further changes are being targeted at increasing its utilisation. To ensure that the Care Coordination Hubs and Public Health Units can focus their efforts on people with the highest needs, ideally over 95 percent of people would use the digital self-management pathway.

Regional Hubs/Coordination

During the week beginning 21 February 2022, the team carried out structured assessments of the 44 Care Coordination Hubs (the Hubs). These assessments are now being analysed to identify regional and national themes, centres of excellence, and areas of risk that need support. Overall, a picture is emerging of the nationally planned, regionally coordinated, and locally led, model working effectively. Some early findings from the assessments include:

- MoH typically observed excellent collaboration at the local level
- many of the Hubs are iwi led
- most Hubs have representatives from MSD, some are even co-located in the Hubs
- the Hubs are complimentary about the support they are receiving from the team and on the implementation of the digital tools and support around that
- where high-risk situations have arisen, the Hubs provided support to quickly resolve the problem.

DHB Resurgence and Readiness Planning update

Based on the analysis of the Care Coordination Hub assessments, MoH intend to undertake the desktop reviews (virtual panel-led discussions) of selected DHBs the week beginning 7 March 2022. This is to better understand community and primary care provision. The first round of desktop reviews conducted in November 2021 covered readiness planning of the full spectrum of DHB services.

Robyn Carey, the Ministry of Health's Chief Medical Officer, will Chair the desktop reviews, with attendees including senior representatives from the Ministry of Health, DHBs and MSD.

Workforce

The Ministry of Health is supporting the relaunch of the Hands Up Database, including ensuring information on candidates is current, and providing communications to sector-wide employers.

Health Workforce has approved a \$10 million funding allocation from the Care in the Community Cabinet paper [CAB-21-MIN-0555] from December 2021. MoH will seek approval at the HSPP Steering Group meeting on 10 March 2022 for how to allocate the funding urgently for use by providers this financial year.

The team is exploring opportunities for a joint MSD/Ministry of Health Recruitment Campaign targeting students to work in the COVID-19 response.

Next steps

As the response to Omicron has moved into Phase 3, the function of the Incident Management Team and the current reporting is moving to capture how the current wave is impacting on the wider health sector. The HSPP is working to support this transition.

3.1.3 COVID-19 Vaccine and Immunisation Programme

COVID-19 Vaccinations

As at 11.59 pm on 1 March 2022, 10,652,153 vaccinations have been delivered, including 4,020,089 first doses, 3,960,970 second doses, 33,472 third primary doses, and 2,390,659 booster doses.

- 243,224 paediatric first doses have been administered to five-to-11-year-old children, with 51 percent of this population now having received their first dose, 3 percent more than last week. 3,739 paediatric second doses have been administered.
- 72 percent of people eligible for a booster dose have received their booster. This is five percent up from last week.
- 86 percent of the eligible population 5 years and older have now received at least one dose, one percent rise from last week's figures. 80 percent of this population are fully vaccinated.
- 817 vaccination sites were active on 1 March 2022.
- Nearly 100 percent of people over the age of 65 have received two doses of vaccine, and 90 percent have received their boosters.

Driving uptake

Six DHBs have reached 90 percent fully vaccinated for Māori, with several more DHBs very close to achieving this milestone. All DHBs have achieved at least 90 percent first doses and nineteen DHBs have achieved at least 90 percent fully vaccinated for their 12+ populations. Northland DHB is 3,397 doses from reaching the 90 percent fully vaccinated milestone as at 11.59pm 1 March 2022.

Strategies for uptake continue to focus on increasing uptake of boosters and five-to-11-years vaccinations, including directed efforts to raise vaccination rates for tamariki Māori and Pacific children. Strategies for uptake for adults have pivoted towards generating wider support publicly for booster doses.

The COVID-19 and Immunisation Programme (the Programme) has reached out to local government agencies, including the chambers of commerce and councils, to assist in promoting boosters at a more localised level. To support local events from a national Level, the Programme has reached out to other central government agencies to drive support for vaccinations through their networks and has engaged the PWC Vaxathon team to drive initiatives across the motu.

DHBs continue to onboard Primary Care and Pharmacy sites to increase capacity for both adult and paediatric vaccinations, as well as running larger events, drive-through clinics, and community vaccination sites.

Five to 11 year olds

Fifty one percent of children aged five to 11 years old have either booked or received their first dose as at 11.59pm on 1 March 2022.

To date, 31 per cent of the eligible tamariki Māori aged five to 11 years have been partially vaccinated.

DHBs are focused on engaging with schools to provide COVID-19 vaccinations, with mobile and pop-up clinics offering vaccinations in rural and lower socioeconomic areas and a focus on areas with high Māori and Pacific populations. Extended hours and increased numbers of weekend sites are being utilised in areas of low uptake to increase the options available to families. Providers are promoting vaccination through a variety of channels, including radio, social media, and iwi communication channels.

Recent consumer research conducted by the programme reports that approximately 74 percent of Māori parents or caregivers of five- to 11-year-old tamariki are likely to have their tamariki vaccinated against COVID-19. The programme is meeting with DHBs regionally to understand the experience of parents and caregivers of tamariki Māori and the opportunities to better support them in getting their tamariki vaccinated.

Data sharing

Agreements for the sharing of data on children aged five to 11 years have been signed by five Māori and iwi groups to date.

Engagement continues to further enhance the usability of provided data. A policy statement has been published on the Ministry of Health website on five to 11-year-old vaccination data sharing. It states that no direct contact will be made with people under the age of 16 to promote or otherwise communicate about COVID-19 vaccination.

An opt-out process has been established for parents or guardians who have concerns about data sharing for this age group. The opt-out process will be managed by Whakarongorau via email and the 0800-number provided on the Ministry website.

Booster Doses

As at 1 March 2022, 2,390,659 people have received a booster dose. This represents 72 percent of the 3,334,510 people who are currently eligible for a booster, over a five percent rise since last week.

DHBs are working hard to maintain the momentum of the “Big Boost Week”, where over 370,000 boosters were administered, as the Omicron outbreak spreads across New Zealand. Regional outreach for boosters is focused on whānau and tamariki-based events, utilising community sites such as rugby clubs, marae, community halls and drive-through clinics to reach communities in rural areas.

Workplace vaccination clinics run by providers offering boosters to Corrections staff at prisons, New Zealand Police, and Foodstuffs have been completed. DHB providers have completed their onsite booster clinics at Countdown distribution centres. Work is underway to support more critical service businesses and workforces to improve access, increase uptake, and limit service disruption. This is being done, for example, by offering priority access, and onsite clinics, whānau vaccination opportunities, and dedicated clinics at convenient times for workers.

Vaccination Order

The extended deadline for the Health and Disability workforce who are required to have their booster dose expired at 11.59pm on 24 February 2022.

The Ministry of Health continues to offer support to DHBs to assist in identifying staff that require a booster under the Order. Work is underway with the DHBs who have yet to provide data sharing agreements to enable consolidated reporting across the 20 DHBs.

The Temporary Significant Service Disruption exemptions application process has been updated to make it easier for employers, who have more than two workers who have not yet met the timeframe, to apply for an exemption.

A group application from DHBs was received on 22 February 2022. This application covers all 20 DHBs for 654 staff members. The Significant Service Disruption panel met on 23 February 2022 to review the application. The panel's recommendation to the Director-General is in progress before being sent to the Minister for a decision.

Equity

All regions have events planned to raise uptake among Māori, with a particular focus on tamariki Māori. DHBs have increased hours at vaccination sites to accommodate families. As the Omicron outbreak spreads, providers planning vaccination events are working to limit the risks of disruption and ensure staff are also available to deliver testing and support to whānau diagnosed with COVID-19.

On 22 February 2022, an additional \$140 million in funding was announced for Māori and Pacific providers to scale up local services. This will enable wraparound and holistic support and enable communities, particularly iwi, to mobilise their own approach to building resilience against Omicron.

The Ministry of Health has met with the Māori Technicians group and the collective rōpu for advice and to look at different engagement strategies, in particular for the paediatric vaccination uptake.

Staff working on the programme have met with Te Puni Kōkiri, Ministry of Social Development, Te Arawhiti, and Oranga Tamariki to develop strategies on how to work with beneficiaries and support each other using tools such as heat maps and remainder data to vaccinate whānau.

Vaccination amongst the disability community is progressing well, with strong uptake of boosters among Disability Support Services and ACC supported clients. Uptake of paediatric vaccinations for disability support clients is in line with the general population uptake rates.

Novavax

On 1 March 2022 Minister Hipkins announced that the Novavax COVID-19 vaccine has been approved by Cabinet for use in New Zealand. The Novavax vaccine will be available to persons aged 18 years and older, including those who received a different vaccine for their first primary dose. At this time, Novavax is only available for a primary course.

Work is underway to prepare for rollout of the Novavax vaccine. This includes workforce training and logistics measures. The Ministry of Health is working with Novavax to confirm the delivery schedule and rollout date.

Technology

As at 11.59pm on 1 March 2022, 5,331,591 My COVID Passes have been issued to 3,885,537 individuals. This represents 97 percent of the fully vaccinated population. 9,681 Passes were generated to unique users this week. The total number of passes generated is higher due to the ability for consumers to request a new pass be generated if, for example, they have lost the original pass they downloaded and need to replace it.

Work is underway to support potential changes to the booster rollout. This includes the addition of new vaccination types, changes to age of booster eligibility, and booster intervals.

3.1.4 Technical Advisory Group: Update

COVID-19 TAG

The COVID-19 Technical Advisory Group (COVID-19 TAG) met on 25 February 2022 and discussed the following items.

- Ministry of Health Update on COVID-19 Outbreak Response
- Phase III Settings

The next COVID-19 TAG meeting is scheduled for 25 March 2022.

CV TAG

The COVID-19 Vaccine Technical Advisory Group (CV TAG) did not meet in the week commencing 21 February 2022. The next CV TAG meeting is scheduled for 1 March 2022 and an update will follow in a future report.

Therapeutics TAG

The COVID-19 Therapeutics Technical Advisory Group (Therapeutics TAG) met on 25 February 2022 and discussed the following items.

- Therapeutics
 - Pharmac update
 - Medsafe update
 - Airfinity/STA update
- Equity considerations
- Pharmac consultation on criteria for oral antivirals
- Implications for Ronapreve
- Clinical Management of COVID-19 in Adults Guideline updates

The next Therapeutics TAG meeting is scheduled for 11 March 2022.

3.1.5 Communications Issues and Activities

As at 2 March 2022

Date	Activity	Lead agency	Communications material	Ministerial Involvement
Week commencing 28/02/22	Access to RATs: Rollout from variety of health and retail outlets.	MoH/DPMC	Talking points, key messages, communications, website, stakeholder communications	Yes
2/03/22	Reconnecting New Zealand Communications regarding changes to arrival requirements, Step 2 brought forward.	MoH/DPMC	Q&As, stakeholder engagement, website updates, specific stakeholder guidance updates	Optional
2/3/22 ongoing	Managing issues with laboratory capacity.	MoH	Talking points, key messages.	Yes
2/03/22 ongoing	Health System Preparedness: Omicron Phase 3 – webinars for the primary care sector and regional health co-ordination centres with updates to Care in Community framework.	MoH	Website, health stakeholder engagement	No
2/03/22 ongoing	Omicron community outbreak: Daily communications and support for the health sector and public, including cases in a number of regions across the country. Updated health advice, rollout of RATs as main diagnostic tool.	MoH/DPMC	Talking points, key messages, communications, website, stakeholder communications.	Optional

4. Managed Isolation and Quarantine Weekly Report

4.1 Items to Note/Updates

4.1.1 MIQ Operational Update

MIQ continues to run eight quarantine facilities across New Zealand to respond to the Omicron outbreak. A number of facilities have been identified to be deactivated (not decommissioned) once demand for rooms drops after the commencement of Step 1 and 2 of Reconnecting New Zealand. This will allow for some agency staff to be redeployed outside of the MIQ network i.e.: NZDF and Health.

There continues to be a number of MIQF staff testing positive for COVID-19, however there is no evidence that this is through in-MIQF transmission. Business continuity is not compromised, and there is no impact on MIQ operations.

Though there has been an increase in community cases, the majority of these are being cared for via Care in the Community unless there is an inability for people to safely self-isolate. In Auckland, Christchurch and Hamilton there are a small number of rooms for close contacts who are unable to self-isolate at home.

Work is underway to prepare for the next release of returnees. From 5 March, fully vaccinated travellers will no longer need to self-isolate on arrival; this means that all eligible travellers who are in MIQ will be able to be released.

4.1.2 Cancelling MIAS vouchers for eligible travellers under Steps 1 and 2 of Reconnecting New Zealanders

The COVID-19 Public Health Response Act 2020 allows the Chief Executive of MBIE to cancel or amend MIAS vouchers for any person. In July 2021, you agreed to a voucher cancellation framework, which included that MBIE may cancel vouchers where MIQ is not required on entry [briefing 2021-4183 refers].

MBIE intends to cancel vouchers for eligible travellers under Steps 1 and 2 of Reconnecting NZ as MIQ is no longer required on entry for these travellers. MBIE has identified approximately 3,339 travellers holding a voucher between 5 March and 30 April.

Cancellations will be delivered as a two-step approach with an initial email to advise travellers if they have a reason to think they are ineligible, they need to contact MBIE within 48 hours. If travellers have not contacted MBIE after 48 hours, then the voucher will be cancelled. MBIE will begin this process shortly.

The Traveller Health Declaration System (and its integration with MIAS) is not yet fully operational. Therefore, in the interim, MBIE will need to rely on travellers self-identifying that they are not eligible to enter under the medium-risk pathway in order to retain their MIAS voucher. This will require communication with affected travellers and more manual intervention than previous cancellations.

4.1.3 Lobby Breakdown for 24 February and New Room Release Format

A room release was held on Thursday 24 February at 9am (NZT) for approximately 4,500 rooms across February, March and April. This was the last lobby for now, as we are returning to the 'always on' room release format in MIAS. The lobby will remain available to us until September (under our current agreement) should there be an imbalance between supply and demand again in the future.

All of the 454 users, representing 663 passengers, who joined the queue got a turn to enter MIAS. Of these, 387 users logged into MIAS and 289 users proceeded to make a booking. They booked 290 rooms to accommodate 454 passengers. These passengers were from 55 countries.

Interestingly, 62 passengers indicated Australia as their point of departure. This likely indicates that they are either unvaccinated; are booking a room in case the border settings change again; or because they did not understand that they no longer need to stay in MIQ.

In preparation for Step 1 of Reconnecting New Zealand, a manual process has been stood up for those who have vaccine exemptions and are returning from Australia from 28 February 2022.

The top five highest participating countries in the 24 February lobby were:

- India – 100
- Australia – 62
- United States of America – 30
- United Kingdom - 27
- Sri Lanka – 25

4.2 Operational Update

4.2.1 MIQ's Role in Afghanistan Evacuation

A total of 1,279 evacuees from Afghanistan have arrived in New Zealand. The table below shows the MIQ status of the Afghanistan evacuation programme as at 10am Wednesday 3 March 2022:

TOTAL Evacuees from Afghanistan that are Currently in MI	96
TOTAL Evacuees from Afghanistan that have Departed MI	1,183 - Afghanistan Evacuees: 1,092 Afghan Nationals (excludes births after arrival), includes NZ National: 1, AoG staff: 90
As this process is quickly winding down, MBIE proposes no longer reporting on the Afghan evacuation in the Weekly Report going forward.	

4.2.2 Ventilation

Remediation work completed (total number of facilities = 32)	Facilities yet to complete remediation	% of rooms complete within the portfolio of facilities fully signed off
29 completed (26 of which are fully signed off)	3	75% (4,537 rooms)
MBIE proposes only reporting Ventilation issues by exception going forward.		

4.2.3 Vaccination of Frontline Staff (Including Booster Information)

For workers on site for the week 21-27 February 2022, BWTR shows that 99.3% had two doses of the vaccine, 0% had one dose and the remaining 0.6% (28 workers) had vaccine status 'unknown'.

Of the 28 workers with an 'unknown' vaccination status, 18 still require an NHI match. The Workforce Testing Team is investigating the remaining 10 workers, to confirm vaccination status.

Vaccination assurance follow-ups for those with an 'unknown' status in the BWTR did not identify any breaches of the Vaccination Order.

Of the 16 workers who were NHI-matched but showing vaccination status 'unknown' between 14-20 February 2022, all workers have been confirmed as being compliant with the Vaccination Order.

For workers on site for the week 14-20 February 2022 with regards to booster shots:

Has received a booster	Overdue for booster	Eligible in coming months	Under 18	Unknown*	Total
4,078 (93.5%)	14 (0.3%)	247 (5.7%)	23 (0.5%)	0 (0%)	4,362

The Workforce Testing and Vaccination team will investigate the 14 workers showing as overdue for a booster to check if they were breaches of the Vaccination Order or if there was another reason for that (e.g. data error).

Of the 24 workers who were on site between 14-20 February who appeared to be overdue for a booster (in breach of the Vaccination Order), follow ups have identified 7 breaches of the Vaccination Order. The other workers were a combination of workers under 18 and therefore not eligible for a booster, data error showing incorrect booster info, and workers who were on site on Monday 14 February but not on subsequent days after the VO change came into effect from Tuesday 15 February.

*The 'unknowns' will likely have their vaccine status updated in due course as they are NHI matched, or any vaccine data issues are sorted.

4.3 Judicial Reviews, Dispute Resolution, Ombudsman and OPCAT

4.3.1 Grounded Kiwis Judicial Review

The Grounded Kiwis urgent proceedings were held before Justice Mallon at the High Court in Wellington on 14-15 February. There is still no indication of when a decision may be made by the Court. MIQ is preparing various responses for possible outcomes.

4.3.2 Osborne Judicial Review

There will be a mention's hearing for this case on 7 March 2022. This is a short hearing where the Judge checks in on what is happening with the case. Discussions about discovery are underway.

4.3.3 Ombudsman Complaints

MBIE are currently managing 64 cases, with 50 of these being preliminary enquiries. Of the 14 active requests; three are on emergency allocations; two on fee waivers; three on exemptions from managed isolation; two on undue financial hardship; one on access to fresh air in a facility; one on the legal basis of a stay in MIQ and two on MIQ facilities. MBIE are seeking Crown Law advice on some opinions to support our responses.

4.3.4 OPCAT

MBIE have received the Ombudsman's provisional report for Chateau on the Park Christchurch. Our feedback and comments are due COB Friday March 11. We have received a request for all complaints relating to the Hotel Elms Christchurch due COB Monday 28 February. MBIE have received a request for information regarding all communications for 20 individual cases. Our response with this information is due COB Friday March 11.

4.4 Upcoming Communications Issues and Activities

4.4.1 As at 2 March 2022:

Date	Activity	Lead agency	Comms material	Ministerial Involvement Y/N
10 March	Health Select Committee		Preparation material	Y
9 March TBC	Announcement MIQ future/ decommission numbers	MIQ	Proactive	Y TBC
5 March	Additional 1,300 people leaving MIQ due to border changes	MIQ	Proactive	N
14/21 Week TBC	Grounded Kiwis verdict	MIQ	Proactive	N

4.5 Invoicing

The table below shows the number of invoices issued up to 27 February 2022. Please note the addition of a new row at the bottom of the table, providing a quick snapshot of percentages around total invoices issued, and of the total invoices by value.

Grouping	Invoices issued (net of credit notes)	Paid	Issued not due	Issued over due	Invoices issued (\$)	Paid (\$)	Issued not due (\$)	Issued overdue (\$)	90+ days over due	90+ days overdue (\$)
Groups /Temp Visa	7,939	5,217	885	1,837	\$68,721,590	56,713,044	2,542,681	9,465,865	994	\$5,470,223
Maritime	687	551	64	72	\$3,297,901	\$2,964,960	\$114,687	\$218,254	22	\$91,551
Aircrew	257	241	6	10	\$3,178,376	\$2,106,180	\$955,701	\$116,494	8	\$101,437
Other	33,980	21,809	3,927	8,244	\$110,512,325	\$76,740,286	\$7,607,385	\$26,164,653	5,199	\$16,954,253
Total	42,863	27,818	4,882	10,163	\$185,710,192	\$138,524,471	\$11,220,454	\$35,965,267	6,223	\$22,617,464
Percentage	100%	65%	11%	24%	100%	75%	6%	19%	14.5% of invoices issued	12.7% of \$ value of invoices

4.5.1 Fees Collection

Invoicing is up to the point where returnees left MIQ on 9 to 12 December 2021.

4.5.2 Debt Recovery

Of the now 2,150 invoices worth \$7.294m sent to a debt collection agency:

- \$1.635m has been paid (or is being paid through instalment).
- \$990k is currently awaiting information from customers or has been credited due to an error.
- A further \$2.396m (this includes the no address/gone overseas category and passive collection) requires more detailed tracing.
- \$507k currently have waiver applications under assessment.
- The remaining \$1.766m of debt continues to be a work in progress.

4.5.3 Fee Waivers

All Waiver Applications Received	Received and not progressed	Total Completed (as at 2 February 2022)	Approved Waiver Applications			Declined Waiver Applications		
			Financial Hardship	Special Circumstances	BOTH	Financial Hardship	Special Circumstances	BOTH
15,701	1,885	9,744	90	6,647	56	1,228	1,497	226

4.5.4 Fee Waiver backlog

At the end of 2021 MBIE reported on the backlog of fee waiver applications.

- New applications received from 21 February to 27 February 2022 is 244
- Net reduction from 13 December 2021 to 27 February 2022 is 1,080
- Net decrease (weekly) from 21 February to 27 February 2022 is 176.
- Completed assessments waiting for decision maker as at 27 February is 493.

Status	Backlog at 13 Dec 2021	New Applications Received since 13 Dec 2021	Backlog at 27 Feb 2022
Processing or to be processed	3,979	2,379	3,189
Waiting for Customer	1,108	N/A	818
Total	5,087	2,379	4,007

System actions by Waivers Officers 21 February to 27 February 2022.

Actions	Applications Triaged	Assessments Completed	RFI's Sent	Outcomes Sent	Total
Total	707	339	291	388	1,725

4.6 Emergency Allocation (EA) Applications

10,114 EA applications have been processed since 30 October 2020.

39 EA applications were received in the week ending 27 February 2022 and 30 applications were processed.

Of the 39 applications processed in the week ending 20 February 2022, 77% EA were approved.

Emergency Allocation Applications	Weekly Totals 21 – 27 February 2022	Year to Date Totals 30 October 2020 to 27 February 2022
Approved	30	6,236
Declined	9	3,878
Applications processed	39	10,114

These figures only include completed applications, with all supporting evidence, which were received within the required timeframes, which have been decided by a decision marker.

5. Border Executive Board Report



5.1 Key Issues Being Considered

5.1.1 Border Executive Board Meeting

The Border Executive Board met on 2 March 2022.

The Board considered the Systems Improvements Programme first quarter update for 2022 which showed the status as amber. This programme captures six initiatives that will support the border now and into the future. The status reflects the known issues of progress across the programme due to the resource demands for Reconnecting New Zealanders, particularly the New Zealand Traveller Declaration. The Board agreed to pause the initiative Health at the Border until May 2022 while resources are moved to the New Zealand Traveller Declaration. Health now has one person in ITOC and two more people are anticipated to start soon (March and April 2022). The Board discussed the slow progress with Data and Privacy, noting this was also due to resources being diverted, but agreed it was important to try and increase momentum. All members will consider what resources their agencies can reprioritise.

The Board shared insights from the Reconnecting New Zealanders Step 1 border reopening on 27 February 2022. Overall, operations have gone well. Changes are being considered to the welcome pack to align with the recent changes to Reconnecting New Zealanders. No border processing changes are required for Step 2. The level of complexity with processing passengers is expected to increase as the volumes increase and risk profile changes.

The Board discussed the impact of the changes to Reconnecting New Zealanders regarding investment into systems and processes. s9(2)(f)(iv)

Tranche 1 will continue as planned for 31 March 2022 go-live date. It was acknowledged that the investment is designed to support the Digital Border initiative that includes a digital arrival card.

The Board discussed the new piece of work identified by the Prime Minister relating to future border settings and surveillance for health risks. Health policy team will lead the work, with MPI the other key contributing agency.

The next meeting is 9 March 2022.

6. New Zealand Customs Service Weekly Report



6.1 Items to Note/Updates

6.1.1 New Zealand Traveller Declaration System

The New Zealand Traveller Declaration (NZTD) system is planned to go live in late March 2022 to process travellers' information including health requirements, at the border. The NZTD team is planning for the transition from Nau Mai Rā to NZTD and supporting the recently announced border changes. The NZTD Cabinet paper for contingency funding is due out for consultation as planned next week.

The pilots have been progressing with two of the four completed. On 22 and 23 February 2022, the Customs Counsellor to Beijing visited Shanghai to support the New Zealand Traveller Declaration pilot programme taking place at Shanghai Pudong Airport. Together with Air New Zealand staff and officials from the Ministry of Foreign Affairs and Trade, the Customs Counsellor was at the airport to interact with and interview the passengers as they arrived and proceeded to board the flight to New Zealand. The following activity is upcoming:

- Pilot 3 is planned to start on 4 March 2022, subject to being able to make the health rule changes and associated other communication changes related to the border setting changes announced on 28 February 2022.
- Between 8-10 March 2022, eligible travellers on targeted flights departing from Pacific, Australia and Los Angeles locations will be asked to volunteer as pilot 3 participants. This pilot will test the NZTD document verification service over a short timeframe with a higher volume of passengers.
- Pilot 4 is planned to commence in mid-April with a higher number of airlines participating. Customs will provide updates as it progresses through the piloting phases.

6.1.2 Maritime – Maritime Border Programme

Work on the Maritime Border Programme is progressing with an update to be provided to the Border Executive Board at its 9 March 2022 meeting on next steps. Progress to date includes:

- Maritime New Zealand Officials have hosted three workshops with the cruise industry to co-develop options for a staged re-opening of cruise shipping for Summer 2022/23
- contactless unloading of cargo vessels has been successfully trialled at several ports
- infection prevention and control guidelines for maritime settings have been reviewed and found to be fit-for-purpose to manage the Omicron variant
- vaccinations are being offered to Pacific Island seafarers at Auckland and Tauranga ports
- Customs is working alongside the Ministry of Health and the Northland District Health board to move from PCR tests to the use of Rapid Antigen Tests for incoming small craft.

6.1.3 Vaccination requirements for non-New Zealand citizens arriving by air

As of 11.59pm on 27 February 2022, a total of 24,167 passengers since 1 November 2021 have been identified as requiring evidence of vaccination status exception or exemption. Of this number, a total of 20,343 passengers presented verifiable evidence of vaccination status, with 3,696 exceptions and 100 exemptions.

From 12.00am on 4 December 2021, travellers who do not provide the required evidence of vaccination status, exception or exemption will incur an infringement offence fee of \$500 for low-risk offences and an infringement fee of \$4,000 for high-risk offences. As of 11.59pm on 27 February 2022, 28 travellers have been issued with an infringement offence fee for not meeting vaccination verification requirements.

Pre-departure testing

As of 11.59pm on 27 February 2022, a total of 109,445 passengers (from 26 January 2021) have been identified as requiring evidence of testing or exemption. Of this number, a total of 104,789 passengers presented verifiable test certificates, with 4,504 exemptions provided. 105 warning letters have been issued to passengers for not meeting the pre-departure testing requirements.

From 12.00am on 4 December 2021, travellers who do not provide the required pre-departure testing evidence may incur an infringement offence fee of \$500 or a fine not exceeding \$1,000. As of 11.59pm on 27 February 2022, 47 travellers have been issued with an infringement offence fee for not meeting the pre-departure testing requirements.

6.1.4 Reconnecting New Zealanders

On 28 February 2022, Cabinet agreed to lift all self-isolation requirements for vaccinated travellers entering New Zealand from 11.59pm on 2 March 2022. Travellers will still be required to have a negative pre-departure test and undertake two Rapid Antigen Tests on arrival and on day 5/6.

Step 2 of Reconnecting New Zealanders, which permits New Zealanders to travel to New Zealand from the rest of the world, has been brought forward to midnight, 4 March 2022. Managed Isolation and Quarantine will remain for unvaccinated New Zealanders, refugees, and some community cases as needed.

Customs is engaged with other agencies from an operational, policy and legal perspective to establish how this change in setting is implemented, and how travel is facilitated at the border for an increased number of passengers. This also includes engaging with the Ministry of Health on any further amendments to the Air Border Order.

Initial feedback from Customs staff working at the border has indicated that the first flights on the Reconnecting New Zealander are being processed without any substantive issues but understandably there was some issues which were managed.

Customs will continue to work with partnering border agencies on a lesson learnt approach as Customs continue to reopen our borders.

7. COVID-19 Chief Executives Board

7.1 Items to Note/Updates

The COVID-19 Chief Executives Board (CCB) did not meet this week. The next discussion will be held on Tuesday 8 March, 2022.

8. COVID-19 Independent Continuous Review, Improvement and Advice Group

8.1 Items to Note/Updates

The COVID-19 Independent Continuous Review, Improvement and Advice Group met this week on Tuesday 1 March 2022. Leaders from the Primary and the Emergency Care components of the system attended to discuss the impact of COVID-19 on the provision of health services. The Group's weekly advice note and DPMC coversheet will be provided to your office following this meeting.

9. Strategic COVID-19 Public Health Advisory Group

9.1 Items to Note/Updates

The Strategic Public Health Advisory Group provided advice to Minister Verrall on 27 February 2022 on the subject of 'self-isolation of travellers' in line with its recent commissioning. It is in the process of providing further advice on the circumstances in which other public health measures should be used to help control COVID-19.

The Group did not meet this week. Its next discussion will be held on Wednesday 9 March 2022. Minister Verrall will join the Group for this meeting to provide further context on aspects of the advice she has commissioned.

10. Business Leaders Forum

10.1 Items to Note/Updates

The Business Leaders Forum is meeting with you on Friday 11 March 2022. The Prime Minister has also been invited to attend.

11. Community Panel

11.1 Items to Note/Updates

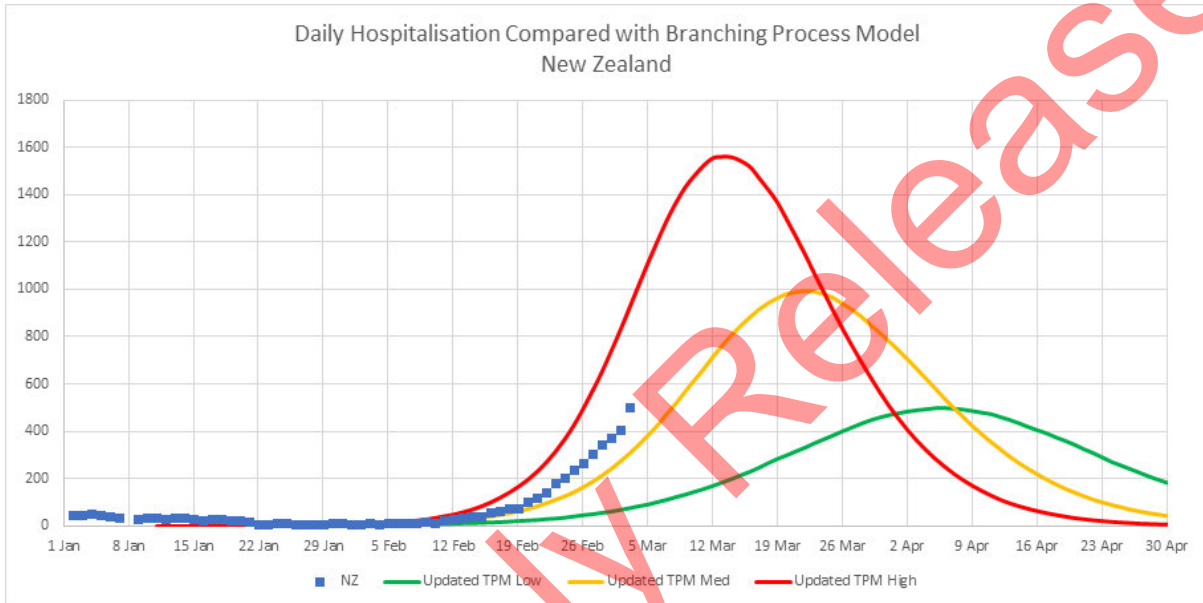
The Community Panel held its monthly meeting on Wednesday 2 March 2022 to discuss the next stage of the response to Omicron, the nature of and responses to COVID-19 misinformation, and the approach to COVID-19 management post the Omicron wave.

12. Government Modelling Group

12.1 Items to Note/Updates

Tracking cases against model scenarios has been challenging since the introduction of RATs and the rapid escalation of cases that followed, particularly in Auckland.

DPMC have transitioned tracking charts to the updated TPM model scenarios, which show that Nationwide, cases are tracking slightly higher than the high transmission scenario, but in Auckland several times above the case peak. A more important metric now is COVID-19 hospital bed occupation, which is tracking between the medium and high transmission scenarios – it is important to note that peak hospitalisation rates in the updated scenarios are significantly lower than the original omicron scenarios.



DPMC will also be tracking community deaths as numbers unfortunately increase.

s9(2)(g)(i)

13. Upcoming Cabinet Papers

s9(2)(f)(iv)



Proactively Released

14. Appendix – Audit

	Audit summary	IPC Standard Operating Procedures (SOPs), operations frameworks and guidance documents
Managed Isolation and Quarantine Facilities (MIQFs)	<ul style="list-style-type: none">• Round 6 IPC audits of MIQF is completed.• Progress reporting on actions and recommendations is continuing.• Awaiting direction on border IPC auditing activities, with planning for next round, due to start in mid-March 2022, now on-hold.• Undertaking “check-in” assurance phone calls with 226 smaller Aged Residential Care (ARC) facilities regarding Phase two COVID-19 preparedness. DHB Health of Older People (HOP) contacts have provided a priority list of any facilities already identified requiring support.	
Airports	<ul style="list-style-type: none">• No audit activities this week.• Awaiting direction on border IPC auditing activities.	The revised version of the IPC guidance for air border workers was sent to All of Government key stakeholders. This has also been published on the Ministry’s website.
Maritime/Ports	<ul style="list-style-type: none">• No audit activities this week.• Awaiting direction on border IPC auditing activities.	In discussion with Maritime New Zealand to undertake a review of current IPC guidance documents.

Proactively Released

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