









FOREIGN AFFAIRS & TRADE

MANATŪ AORERE

COVID-19 Response Weekly Report

10 December 2021

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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

44	Agency	Last Week	This	Agency Comment
MoH Saliva testing at boundary The Ministry's updated position on the use of saliva for diagnostic testing for COVID-19 will mean saliva testing for surveillance purposes for some groups of workers can be reduced from twice weekly to on the Required Testing Order will be amended before the end of the year to reflect this. Response to Omicron Variant of Concern As a precautionary measure to reduce the chance of Omicron entering New Zealand, nine southern African countries (South Africa, Namibia, Zimbabwe, Botswana, Lesotho, Eswatini, Seychelles, Malawi and Mozambique) have been added into the very high-risk countries list. From 11.59pm on 28 November 2021, New Zealand citizens who arrive from these countries will be required to stay in managed isolation for a full 14-day period. The Ministry of Health is continuing to monitor all developments.				
Testing and vaccination of border workforce	МВІЕ	Staff Testing Compliance reporting is at 90%, (up 1% from last week), for staff who worked in the week of 29 November – 5 December 2021. 10% of workers on site in the week of 29 November – 5 December 2021 are showing in the BWTR as overdue (504 workers). We will continue to follow up with workers overdue for tests to ensure they understand the new requirements. As at 6 December, 3,979 MIQ workers have opted-in to saliva testing (up 209 from this time last week). Vaccinations The BWTR shows, of the workforce on site for the week of 29 November – 5 December, 96.5% have had two doses of the vaccine, 0 2% had one dose and 3.2% have vaccination status 'unknown'. Vaccination assurance follow-ups for those with an 'unknown' status in BWTR reported last week did not identify any breaches of the Vaccination Order. Vaccination boosters were available from 29 November for anyone who had their primary course of the vaccination at least six months ago. We are encouraging workers through our regular comms channels to get their booster shot if eligible. There are 1,210 MIQF border workers who have had one booster dose. There were no vaccine exemptions granted last week. Two incidents have occurred in the last week relating to our entry procedures. One new worker failed to sign into Who's-on-Location but was fully vaccinated. In another instance a member of the public signed in, provided proof of vaccination, but when questioned were found not to be the Police Officer they claimed to be. Further information on these incidents is contained in the body of the report.		 Compliance reporting is at 90%, (up 1% from last week), for staff who worked in the week of 29 November – 5 December 2021. 10% of workers on site in the week of 29 November – 5 December 2021 are showing in the BWTR as overdue (504 workers). We will continue to follow up with workers overdue for tests to ensure they understand the new requirements. As at 6 December, 3,979 MIQ workers have opted-in to saliva testing (up 209 from this time last week). Vaccinations The BWTR shows, of the workforce on site for the week of 29 November – 5 December, 96.5% have had two doses of the vaccine, 0 2% had one dose and 3.2% have vaccination status 'unknown'. Vaccination assurance follow-ups for those with an 'unknown' status in BWTR reported last week did not identify any breaches of the Vaccination Order. Vaccination boosters were available from 29 November for anyone who had their primary course of the vaccination at least six months ago. We are encouraging workers through our regular comms channels to get their booster shot if eligible. There are 1,210 MIQF border workers who have had one booster dose. There were no vaccine exemptions granted last week. Two incidents have occurred in the last week relating to our entry procedures. One new worker failed to sign into Who's-on-Location but was fully vaccinated. In another instance a member of the public signed in,
• Eligibility settings for low-risk jurisdictions and individual travellers entering via the Reconnecting New Zealand low-risk pathway have been proposed. The settings have streamlined tho welcome change will remove the burdensome verification by governments that a traveller was in country for the preceding 14 days, in favour of traveller self-declaration. • The low-risk pathway is proposed to be extended to a number of other Pacific countries in January 2022, most of which do not have direct travel routes to New Zealand and will therefore.		Eligibility settings for low-risk jurisdictions and individual travellers entering via the Reconnecting New Zealand low-risk pathway have been proposed. The settings have streamlined those required for QFT entry. A		
Reopening travel path Pacific Islands	MFAT	 Officials have provided advice on expanding the Pacific low-risk pathway ahead of its consideration by SWC on 15 December. This advice will be updated as the practicalities of operationalising public health requirements are worked through. Officials have provided separate advice on moving from the current burdensome manual verification of Pacific QFT traveller eligibility to a traveller self-declaration. This would come into effect immediately and would apply to both current one-way Pacific QFT partners (Samoa, Tonga and Vanuatu) and the additional Pacific countries to which it is proposed QFT be expanded (Solomon Islands, Tuvalu, American Samoa, Kiribati and Nauru). 		

Managed Isolation and Quarantine and Return to the Community

Agency		This Week	Agency Comment	
MBIE	•	•	 Ventilation Systems Ventilation remediation work has been completed at 28 of our 33 facilities, with 17 of 28 of those facilities fully signed off. Ventilation remediation work for Jet Park Hamilton was signed off this week. There are sufficient air filtration units in stock in the country to fulfil MBIE's expected near term requirements. 	
ditions of stay	•	•	olation Pilot All participants have arrived and the flight window is now closed. There have been 79 participants in total. There are currently 17 participants self-isolating in Auckland and 7 in Christchurch. 55 participants have exited their self-isolation to date, following negative test results. The evaluation report for the second part of the pilot was sent to the Minister on Tuesday 7 December, and covers the application process.	
Place and conc	•	•	 Health workforce supporting MIQ The difficulty in recruiting and retaining health workforce continues to have implications for the MIQ system. The current border settings and MIQ practices means we are in a strong position with regards to protecting NZ from the Omicron variant. There is still some uncertainty whether or not the Omicron variant will impact upcoming border setting changes. Increased pressure on the laboratory system continues, which is leading to delays in results. DHBs are looking to offer staff permanent contracts to provide more security to staff and alleviate concerns about the short-term nature of MIQ. MOH is working with DHBs and MBIE to better understand the gaps in the workforce and identify areas where the operating model can be amended as policy settings change. There is joint MOH/MBIE advice going to the Minister next week outlining health workforce implications of the shortened stay and impact if throughput is increased, including suggestions as to how to lessen the impact on the health workforce. 	
isolation processes	•		on the health workforce. P2/N95 Mask Implementation Fit testing commenced on 11 November and more than 1,190 fit tests have now been completed with quarantine and dual facilities being the priority. We are working to ensure that we have 40 people per site booked for testing each day, to ensure that we test as many people as possible prior to the holidays. Workers are being asked to self-book for testing. We are planning for an additional round of Fit Testing to be provided in January, to capture those workers who were not available to be tested when testers were onsite during December. We are engaging with PCBUs about the approach to ongoing BAU fit testing. MBIE will support this by providing the following: trainers to train testers, access to Porta Count Machines, supplementary testing where required, and offering guidance. We are working through manual data reconciliation for people who were fit tested prior to FaceFit testing being available.	

Community Protection

Agency	Last Week	This Week	Agency Comment
МоН	•	•	 As at 1.30 pm on 9 December 2021, there have been 9,457 community cases associated with the Delta Community Outbreak. Of these, 6,516 are active cases, 2,923 are recovered and 18 deaths. There are 70 cases linked to the Auckland Community outbreak who are currently in hospital. There are 7,089 open contacts. Of these, 385 are close contacts, and 15 are Close Plus contacts. There are Community Testing Centres operating in the following DHBs: Auckland, Waitemata, Counties Manukau, Northland, Waikato, MidCentral, Wairarapa, Lakes (including Taupo and Rotorua), Bay of Plenty, Nelson-Marlborough, Capital and Coast, and Hawkes Bay
МоН		•	The COVID-19 Testing Strategy for Anteraroa New Zealand (the Strategy) published on 26 November 2021, provides a new way forward in our testing response to the pandemic. With the move to a minimisation and protection strategy, CPF, the Strategy provides a roadmap to help us navigate our way through the presence of COVID-19 in the community. It is based on public health recommendations for COVID-19 testing of different groups in differing scenarios (where COVID-19 is either contained, spreading or unsustainable). The Testing Strategy sets out an approach to testing under the following different levels: symptomatic individuals; asymptomatic surveillance testing; essential and mandatory testing; and patients and hospital visitors. A targeted approach to testing will see the deployment of testing modalities in settings to 'test the right people, using the right type of test, at the right time.' With high rates of vaccinations, we can now introduce a wider range of testing options that provide increased accessibility, convenience, and speed. Assopharyngeal PCR tests will continue to be used as the primary diagnostic test, but this will be supplemented by saliva-based PCR testing, rapid antigen testing and rapid PCR tests. Equitable access to, and options for testing are central to the Strategy, ensuring those at greatest risk are prioritised, and results are delivered in a timely manner. Targeted testing will possible access to, and options for testing are entral and under the saliva provide greater capacity for laboratories to undertake priority testing as part of our efforts to protect high-risk communities. The Strategy will st alongside community level management and wrap-around health and welfare services for people isolating at home as part of a toolkit to enable a more rapid and local response. Rapid Antigen Testing Rapid antigen Testing Rapid antigen Testing of the public health response, Public will be subjected businesses began on 1 December 2021. The Ministry of Health is centrally managing supplie

Vaccination

Agency	1/3	This Week	Agency Comment
МоН	•	•	 As at 11.59 pm on 7 December 2021, 7,787,966 vaccinations have been delivered, including 3,710,234 people who are fully vaccinated. 94 percent of the eligible population has now received at least one dose. 88 percent of the eligible population is now fully vaccinated. 1,909 doses of AstraZeneca have been administered. 123,479 booster doses have been administered. 3,929,222 My Vaccine Passes have been issued. Seventeen DHBs (Waitemata, Auckland, Counties Manukau, Waikato, Lakes, Bay of Plenty, Hawke's Bay, Taranaki, Midcentral, Capital and Coast, Hutt Valley, Wairarapa, Nelson Marlborough, West Coast, Canterbury, South Canterbury, and Southern) have hit or passed 90 percent first doses, and all DHBS have reached at least 85 percent for first doses. Auckland, Waitemata, Capital and Coast, Canterbury, and Southern DHBs have all reached 90 percent fully vaccinated. All DHBs continue to focus on vaccinating hesitant and under-vaccinated populations, using a combination of small, targeted events and initiatives, mobile vaccine clinics, and onboarding additional Primary Care and community pharmacies as vaccination sites. Medsafe is reviewing Pfizer's application for vaccines for 5-11-year-olds. If approved, rollout to this age group is likely to commence from mid-to-late January 2022.

COVID-19 System Planning, Readiness and Management

1	Agency	Last Week	This Week	Agency Comment
COVID-19 Management Planning	DPMC	•	•	 The COVID-19 National Management Approach Q1 has been shared with agencies and the document is going through final sign off. Monitoring and system alignment and planning for decision making architecture under the CPF, and summer rostering across the system, is underway.
Readiness planning	МоН	•	•	 The inaugural meeting of the Ministry of Health's COVID-19 Protection Framework Assurance Committee was held on 24 November 2021. Chaired by Dr Caroline McElnay, the Committee undertook an initial assessment of current health system capacity and the expected demand on this capacity over the upcoming fortnight. This process was based on a series of rating principles and assessment was delineated by District Health Board regions. The factors considered when setting the colours in each region include vaccination, the state of the health system, testing, contact tracing and case management capacity, as well as the rate and effect of COVID-19 transmission. MOH maintains a cautious approach focused on protecting people, whānau, communities and jobs. The next phase is focused on minimising the impact of COVID-19 and protecting people. MOH is pivoting its operational and response systems, in preparation for the transition to the CPF. This includes such aspects as the health system assessment process, establishment of an Assurance Group, refined case management and contact tracing practice, incident management structures, expanding testing modalities and others. The CPF is designed to respond to localised outbreaks and manage risk to particular regions, to broadly reduce the risk of COVID-19 transmission and hospitalisations. DHBs are working to ensure appropriate systems are in place for the Care in the Community model within their regions. This includes workforce support, facilities, and connecting with hard to reach and vulnerable populations. MOH is the lead response agency, working closely with the Ministry of Social Development and Iwi and Pacific providers to ensure alignment and readiness of an integrated welfare, public health and clinical response. Each region is establishing a care coordination hub that will include general practice teams, with Primary care, iwi and Pacific providers critical to this regionally delivered, locally le
	DPMC	•	•	 Summer readiness initiatives are progressing, with a national level workshop planned for 15 December 2021. In alignment with the first CPF review cycle, regions and agencies completed the CPF checklist advice process for the first time. Regions provided regional input into the NRG, representing the regional context and impacts of their CPF setting. A follow up workshop is scheduled on Friday 10 December to go through the advice provided and refine the process and outcomes with regions. A regional summer pack is under development and will be shared with regions in the next week. This will contain a range of information that seeks to guide regions in management of COVID-19, over the summer period.
Domestic Response	DPMC	•	•	 Key activities are supporting understanding across the system and public of the CPF and maintaining the Auckland boundaries. COVID-19 is being managed in the community with 10 of the 12 public health units activated with cases within their communities. Ongoing push for increasing vaccination and introduction of boosters. First cycle of the new CPF decision making cadence underway with input from all 16 regions.

COVID-19 System Planning, Readiness and Management (Cont'd)

Agency	Last Week	This Week	Agency Comment on Status of Focus Area
МВІЕ	•	•	 MIQ's Response to the Delta Outbreak: Community cases There are three quarantine facilities in Auckland and with a high number of community cases self-isolating at home, the pressure on quarantine rooms has eased with over 300 rooms available over the last two weeks. Future demand for quarantine rooms is difficult to predict due to uncertainty about the forecasted cases that will require MIQ, the impact of the Omicron variant and those who will be under community care. The Amohia in Hamilton is a community isolation and quarantine facility. It is being used as a quarantine facility and for a small number of community cases who are unable to isolate at home. Quarantine facilities in Christchurch have a small number of community cases, further work is underway to look at options for additional quarantine capacity. Options for increased quarantine capacity are being considered in Auckland and across the regions (where we already have facilities) as positive cases appear throughout New Zealand. Serious incidents involving community cases and community close contacts are occurring; this includes domestic violence within bubbles that require separation, drug-related incidents and bubble breaches. These are placing further pressure on staff in these facilities in both Auckland and Hamilton.

2. COVID-19 Insights

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

2.1.1 Economic Update Related to COVID-19

Introduction

The Insights and Reporting Team in DPMC's COVID-19 Group have analysed the economic environment in New Zealand and overseas given the impacts of COVID-19. This includes inflation, economic and consumer spend, and business and wage support, using data and forecasts from the Reserve Bank of New Zealand (RBNZ), and other sources. The following insight is a summarised version of a long form report, and further details including charts are available on request.

Inflation

Inflation over the third quarter of 2021 reached 4.9%, the highest level since the second quarter of 2011. This is higher than the earlier projection of 4.1% suggested by the RBNZ in August. Accordingly, the RBNZ's outlook for inflation over the next year has been revised, with expectations that it will reach a peak of 5.7% over the start of 2022, higher than at any point since 1990. ²

Global supply chain issues are considered to be a major contributor to current inflationary pressures, an issue magnified by strong global demand for goods.⁴ A significant part of these increased supply chain costs has come from disruption to international shipping patterns caused by COVID-19, which continues to work its way through the system, leading to a rise in shipping costs.

Further inflationary pressure has come through capacity constraints in the economy. Support for the labour market through the Wage Subsidy Scheme has limited the amount of available labour by keeping people in jobs, an issue that has been exacerbated by the lack of migrant workers entering New Zealand as a result of COVID-19 border restrictions. Tightness in the labour market has seen wages increase by 2.5% in the year to September 2021, the highest annual growth in wages since the second quarter of 2009.⁵

To combat non-tradable inflation, the RBNZ's Monetary Policy Committee (MPC) has agreed that higher interest rates are required and that raising the Official Cash Rate (OCR), should be the main policy tool. ⁶ The OCR was raised from 0.25% to 0.5% on 6 October and from 0.5% to 0.75% on 24 November, a signal that the RBNZ is looking to control inflation. The RBNZ has also moved up its projected track for the OCR compared to its August outlook, a signal that it intends to lift the Official Cash Rate further next year to manage inflation. ⁷

At the same time, the MPC expects to gradually reduce the level of government bond holdings purchased earlier in the pandemic through the Large Scale Asset Purchase Programme. The MPC stated that it will provide more details on how it intends to achieve this next year.⁸

As a point of comparison, despite similarly high levels of inflation in the United Kingdom, the United States, and Europe, the Bank of England, the Federal Reserve, and the European Central Bank have yet to raise interest rates. However, these central banks have signalled their intention under the right circumstances to implement measures to manage inflation, such as increasing interest rates and winding down asset purchasing programs.⁹

Economic and Consumer Spending Outlook

Prior to the pandemic, New Zealand's economy was performing relatively well, with household spending, and demand for exports underpinning this strength. Following a decline in economic activity in 2020 due to the effect of economic lockdowns, economic activity is expected to have expanded by 4.3% in 2021, and is projected to expand by a further 4.7% in 2022. These are higher rates of growth than have been observed in the five years preceding the pandemic, but economic activity is still expected to remain below the prepandemic trend.¹³

A measure of spending, the seasonally adjusted monthly card spend, shows spending has been negatively impacted by lockdowns throughout the course of the pandemic, falling 22% in August compared to July. It should however also be noted that consumer spending after each lockdown period recovered to the levels observed before-hand. A similar increase is expected to occur over the final quarter of 2021, given the enactment of the COVID Protection Framework (CPF) which should allow for greater mobility of people, goods and services. RBNZ forecasts that private consumption in Q4 2021 will be 4.1% higher than Q4 2020. The RBNZ has indicated that the likely spread of COVID-19 may dampen some household spending and business investment in the short term.¹⁴

Similar trends of recovery post lockdown have been observed in other parts of the world. Retail sales in the United Kingdom surged in May 2021, with a 10% increase compared to May 2019, as non-essential retail and hospitality venues opened up after the second wave. ¹⁵ Across the Eurozone retail spending recovered sharply after the first wave, increasing 17.8% in May 2020 compared to the previous month, with spending in Germany and France close to pre-pandemic levels. ¹⁶ Countries in Europe have again begun imposing lockdowns in November and December including Germany, where unvaccinated people are barred from entering all but essential services. It is likely this will have a further economic impact in these countries however it remains too early to quantify this impact. ¹⁷ In the United States, consumer spending in the second quarter of 2021 increased by of 11.8% compared to the same period the year earlier. ¹⁸

Business and Wage Support During the Pandemic

The New Zealand government has used a number of initiatives to help support both employers and employees during the COVID-19 pandemic, including the Business Finance Guarantee Scheme (BFGS), the Resurgence Support Scheme, tax deductions, and the Wage Subsidy scheme. 19 20

The Wage Subsidy Scheme has been one of the most significant programmes used to support the economy during the pandemic, both in terms of its scale and effect. The Wage Subsidy Scheme began in March 2020 during the first wave of the pandemic and was restarted in August 2021 at the start of the current outbreak. The August 2021 scheme is currently on its eighth round. The March 2020 wage subsidy scheme paid out a total of \$10.85 billion, whilst the combined amount paid out during the August 2021 scheme has so far been \$4.66 billion (to 6 December 2021). The amount of wage subsidy paid out during each stage of the August scheme has fallen sharply as restrictions have loosened. During the initial round of the August Wage Subsidy Scheme between 20 August and 2 September, 1.81 million jobs were being supported. During the latest round which covers from 26 November to 9 December 134,725 jobs have been supported, although this number is likely to increase slightly over the final days of the round. ²¹

The United Kingdom and a number of Eurozone countries adopted similar economic support schemes as New Zealand, including wage subsidies, offering cheap credit to disrupted businesses, and tax relief and a credit facility for large business. ²² The United Kingdom set up a scheme to pay 80% of furloughed workers' wages, whilst Germany and France relied on extending similar schemes that predate the pandemic entirely. ²³ ²⁴ Unemployment in the United Kingdom in November 2021 was 4.3%, just 0.3% higher than before the pandemic, whilst unemployment in the Eurozone in October was measured at 7.3%, 0.2% lower than it was in January 2020. ²⁵

The United States took a different approach to New Zealand and countries in Europe in that there was no overarching wage subsidy scheme put in place. ²⁶ ²⁷ The United States Treasury instead focused on direct payments and benefits as a means of ensuring a financial safety net for workers who lost their jobs during the pandemic. ²⁸ Unlike the other examples mentioned above, unemployment in the United States increased sharply during the first wave of the pandemic to 14.8% in April 2020, compared to 3.5% in February. The United States strong economic recovery after reopening has, however, brought unemployment back down to 4.2% as of November 2021. ²⁹

Thank you to the following teams that assisted with this report: the Reserve Bank of New Zealand, the Treasury, the Ministry of Business, Innovation, and Employment, and the Ministry of Foreign Affairs and Trade.

2.2 Insight of Note Written by the Ministry of Health

2.2.1 COVID-19 International Perspectives: 8 December 2021

After a sustained decline in global new COVID-19 cases since late August 2021, daily cases and deaths have continued to rise globally since mid-October.³⁰ To date, 265 million cases have been reported in the pandemic.³¹ In the last week, over 3.45 million cases and 55,000 deaths have been reported worldwide. Limited testing, the expanding use of rapid antigen testing, and the challenges in attributing the cause of death means that the true number is likely to be far higher.³² While the Delta variant and its sub-lineages continue to dominate in all countries with sufficient whole genome sequencing, the Omicron variant is now dominating in South Africa, and is being detected in an increasing number of countries globally.³³

While many cases outside of southern Africa have been reported in those who have recently returned from southern African countries, there are an increasing number of cases being reported in individuals where a link to overseas travel is unclear. For example, to-date 28 cases have been reported in Australia across three states. Of these cases, one has emerged with no link to international travel and 16 further cases are linked to this event. Although the Omicron variant was first reported in South Africa on 24 November 2021, cases have been reported in the Netherlands from samples collected up to a week prior to that date indicating that Omicron has been circulating widely for many weeks. Australia and South Africa have been included in the following country case studies.

New Zealand's imported COVID-19 o	ases in the last two weeks				
Point of departure	Acute	Historical	Total	Arrivals	Acute cases per 1000 arrivals
United States of America	4	1	_5	444	9.0
Iraq	3	0	3	7	
Ireland	2	0	2	41	48.8
Romania	2	0	2	9	222.2
Unknown	2	0	2		
Fiji	1	0	1	60	16.7
Switzerland	1	0	1	17	58.8
United Kingdom	1	1	2	989	1.0
India	0	1	1	249	0.0
Russia	0	2	2	32	0.0
Sudan	0	2	2	1	
Total	16	7	23	5,377	

Source: Ministry of Health.

Australia

- Daily new COVID-19 cases in Australia have declined since their peak in mid-October from a 7-day average of just over 2,300 to a current 7-day average of just over 1,400 daily cases.³⁶
- Current major outbreaks are primarily confined to New South Wales (NSW), Victoria and the Australian Capital Territory (ACT), with smaller outbreaks in Northern Territory (NT), South Australia (SA) and most recently, Queensland. In 2021, 78,393 cases have been reported in NSW, 108,474 in Victoria and 2,046 in ACT.³⁷
- Australia has reported 28 confirmed cases of the Omicron variant: 25 in NSW, 1 in NT and 2 in ACT. Seven of the cases were in quarantine, while the remaining were active in the community. Of these cases, one case was a student in Sydney who had no recent history of overseas travel or links to travellers, raising concern of community transmission of Omicron. 16 cases are linked to this school, including the 2 cases in ACT.³⁸
- States have varying rules for interstate travel depending on COVID-19 risk. Interstate travel is dependent on vaccination status, whether an individual has been to a COVID-19 hotspot or exposure venue, and their reason for travel.³⁹
- Testing remains high for most Australian states; 40 6.3 tests are currently being conducted per 1,000 people nationwide, and test positivity is below 2% in all states.
- Nationally, 88% of those over 16 and 68% of 12- to 15-year-olds are fully vaccinated.⁴¹

NSW

- After NSW emerged from a 106-day lockdown on 11 October 2021, daily cases declined considerably.
 Since a peak of 1,600 daily cases in mid-September, cases have stabilised since late October, and around 200-300 cases are being reported per day in the state of 8 million.⁴²
- Relatively low case rates are being attributed in part to very high levels of vaccination. At the beginning of the lockdown in June, just 9% of adults were fully vaccinated.⁴³ Now, 93% of those over 16 years and 77% of 12–15-year-olds are fully vaccinated.⁴⁴ ⁴⁵
- The state mandates mask wearing in all indoor public venues. Fully vaccinated individuals are permitted
 to host gatherings at home with no restrictions, can attend large outdoor gatherings and can enter all
 public venues. For the unvaccinated, individuals are largely prohibited from entering other people's
 homes, can only enter essential public spaces, must work from home if practical, and cannot leave their
 area for recreation.⁴⁶

Victoria

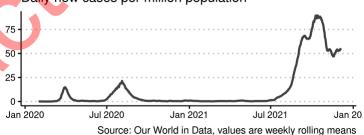
- In Victoria, a 111-day lockdown in Melbourne ended in late-October. New COVID-19 cases have declined since a peak in mid-October of over 2,000 daily cases, which have plateaued in the past fortnight to around 1,000-1,200 daily cases in the population of 6.7 million.⁴⁷
- Victoria has introduced vaccine mandates for many workers; 91% of those over 16 years old and 80% of those 12-15 years old are fully vaccinated.⁴⁸
- Public health restrictions are less strict in Victoria. For fully vaccinated individuals, most restrictions have been lifted. The unvaccinated can only enter essential public spaces, though there are no limits on home gatherings and unvaccinated individuals can attend work if they are not mandated to be vaccinated.
 Masks remain mandatory in most indoor public spaces.

ACT

- The outbreak in ACT continues to decline, reporting an average of 6 cases daily down from a peak of 40 in early October. 51
- ACT has very high vaccination rates, with 99% of those over 16 years and 96% of 12- to 13-year-olds fully vaccinated. ACT has introduced vaccine mandates for some employment sectors. In addition, face masks remain mandatory in high-risk settings (such as hospitals and aged care facilities), on public transport, and for indoor spaces at schools. Restrictions on gatherings in some venues remain, however, as proof of COVID-19 vaccination status is not a requirement for entering businesses in the ACT. ACT.

COVID-19 cases in Australia

Daily new cases per million population



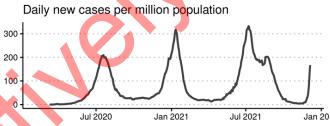
South Africa

- COVID-19 cases in South Africa have been increasing exponentially since mid-November, when the 7-day rolling average was under 300 daily cases. By the beginning of December, the 7-day rolling average had reached nearly 9,000 cases in a population of 60 million.⁵⁵
- Of the prioritised sequences analysed in the past two weeks, 84% have been Omicron.⁵⁶
- The Gauteng province, which includes the city of Johannesburg, is considered the epicentre of the outbreak⁵⁷ and has the highest number of active cases at 55,492. This represents an increase from 691 active cases in mid-November.⁵⁸

- While cases are surging, COVID-19 deaths remain stable, with a current average of 24 deaths per day. 59 However, no Omicron-related deaths have been reported in South Africa. 60
- The 7-day average number of hospital admissions have roughly doubled from mid-November from just over 500 to 1,027 weekly admissions. However, health officials have noted that fewer are being treated for severe disease than in previous waves, and infections are generally mild.⁶¹
- Testing rates in South Africa have risen since the Omicron variant was detected but remain relatively low at 0.62 tests per 1,000 people. Prior to the latest surge in cases, test positivity was low at around 1%, but has since surged to 13.6%. This indicates that the true number of cases are likely to be underestimated.⁶²
- South Africa has a relatively low vaccination coverage, with less than 30% of the population fully vaccinated.⁶³ Thus far, booster shots of the Johnson & Johnson (J&J) COVID-19 vaccine have only been offered to healthcare workers only, with less than 10,000 workers receiving a booster.
- South Africa has a five-level COVID-19 alert system. Since 1 October 2021, South Africa has been at Level

 which indicates a low COVID-19 spread with a high health system readiness.⁶⁴
- Masks are currently mandatory in public places and a curfew is in place from midnight until 4.00 am, while leisure facilities must close by 11.00 pm. Since the emergence of Omicron, President Cyril Ramaphosa has noted that South Africa will remain at Level 1, and has emphasised the importance of increasing vaccination rates. ⁶⁵ Booster shots for elderly as well as mandatory vaccination may be implemented if infections continue to rise. ⁶⁶
- As a result of the new Omicron variant of concern detected in South Africa, many countries globally, including Singapore, Australia, and the UK, have closed their borders to the country and others in southern Africa. However, no other nations or jurisdictions reporting the variant have done so.⁶⁷
- Nine southern African countries, including South Africa, have been added to New Zealand's very high-risk countries. From 11.59 pm on 28 November, New Zealand citizens who arrive from these countries will be required to stay in managed isolation for a full 14-day period.
- President Cyril Ramaphosa requested that countries urgently reverse the "scientifically unjustified" travel bans linked to the detection of Omicron. 68

COVID-19 cases in South Africa



3. Ministry of Health

3.1 Policy/Programme Updates



3.1.1 Health system preparedness: Auckland DHBs share latest COVID-19 experiences

This update follows up on the item that was in last week's Weekly Report, which provided information on two webinars held recently to share Auckland staff experiences of preparing for, and managing, COVID-19 in hospitals.

Given the level of engagement in the two sessions, summary sheets from the session have been prepared and a resource centre to share practical resources has been established. We have run, and are planning, several more panel sessions.

A team of nurses from Waitematā have run small group sessions for other ward nurses around the country to share practical ways of setting up and running a ward with COVID-19 patients. These sessions were well attended, with one session having more than 120 participants. There has been excellent engagement and desire by nurses to learn from their Auckland colleagues. The Waitematā team is also sharing resources that teams can make relevant to their own context.

On 2 December 2021, a session was held that focussed on clinical insights from emergency departments, inpatient and clinical teams. There was excellent participation in a panel session on 6 December 2021 on screening, infection prevention control, moving around the hospital and safe discharges.

Further sessions are planned on:

- hospital preparedness for supporting Māori well in a COVID-19 environment.
- practicalities of patient and visitor screening, infection prevention control measures, moving around the hospital and safe patient discharges.
- the importance and experiences of staff training, working as a team and taking care of staff wellbeing.
- · mental health and wellbeing.
- managing long-term recovery issues.

There has been a lot of positive feedback from the sessions that have been held to date.

Next Steps

We will keep you updated as further sessions are planned and run.

3.1.2 Health System Preparedness Programme: Update

This item provides information on the major pieces of work being carried out by the health system preparedness programme (the programme). The programme had its first meeting with the interim Health New Zealand board on 2 December 2021.

Models of Care

The Managing COVID-19 Care in the Community Operational Guidelines have been converted into a framework. The revised framework reflects significant updates and evolution in thinking about the purpose of the document, equity, partnerships, and roles/responsibilities.

The framework was consulted on extensively and was published on 3 December 2021. The framework will be updated regularly to reflect the programme's growth and development. We are working with the Ministry of Social Development (MSD) and other social sector agencies to ensure alignment of all agencies involved.

A Cabinet paper on COVID-19 care in the community-system readiness and preparedness was provided on 1 December 2021 for review and Ministerial consultation. The paper is intended to be considered by the Cabinet Social Wellbeing Committee on 15 December 2021.

The Cabinet paper includes metrics that have been developed to measure the health system's performance as we shift to a new way of working, providing health care and welfare support for individuals and whānau with COVID-19 in the community. We are working alongside MSD to align metrics across the COVID-19 care in the community framework.

DHB Resurgence Plans and Regional Plans

Desktop reviews of resurgence plans were conducted for six DHBs: Lakes, Hauora Tairawhiti, Southern, Bay of Plenty, MidCentral, and Northland. The aim of these reviews are to identify areas of concern for DHBs, understand their plan strengths and innovative practices to share with other DHBs, and to highlight any additional areas for their focus or attention. A draft report of the review findings will be provided to all 20 DHBs on 10 December 2021.

These six DHBs have done extensive planning and with evidence of each enhancing their respective plans to manage COVID-19. All DHBs raised challenges with workforce; Bay of Plenty DHB indicated very significant challenges with workforce vacancies and recent staff resignations.

Other common themes across the plans include:

- worries about travel by New Zealanders across regional borders who test positive.
- securing community self-isolation facilities (even when agreements were in place).
- completion of facilities' upgrades.
- integration and prioritisation of calls co-ordinating welfare, public health and clinical needs.
- the importance of relationships with agencies such as MSD, non-governmental organisations and iwi.
- connectivity with hard to reach and vulnerable populations in areas of poor or zero cellular or internet coverage.

Next Steps

As part of the COVID-19 care in the community framework, the DHBs have set up care co-ordination hubs, having operationalised them earlier in the Delta outbreak. The programme is working with the DHB Senior Responsible Officers to gain a better understanding of the current state of their hubs, and how the Ministry of Health can best support them.

3.1.3 COVID-19 Vaccine and Immunisation Programme

As at 11.59 pm on 7 December 2021, 7,787,966 vaccinations have been delivered, including 3,935,885 first doses and 3,710,234 second doses. 1,909 of the doses administered are AstraZeneca vaccines.

18,368 immunocompromised people have received their third primary dose.

123,479 booster doses have been administered.

94 percent of the eligible population has now received at least one dose, and 88 percent of the eligible population are fully vaccinated. Of those fully vaccinated, 11 percent are Māori and 6.5 percent are Pasifika.

485,265 Māori have received their first dose of the COVID-19 vaccine, which represents 12 percent of the total population who have received their first dose as at 7 December 2021.

816 sites were active on 7 December 2021.

Driving Vaccine Uptake

17 DHBs have hit or passed 90 percent first doses. The remaining three DHBs, Northland, Whanganui, and Tairāwhiti are at 87, 89, and 89 percent respectively. Five DHBs (Waitematā, Auckland, Capital & Coast, Canterbury, and Southern) have reached 90 percent second doses.

To achieve a 90 percent vaccination rate across all populations, MOH has been working closely with the DHBs with the lowest first dose rates. These efforts have proven effective, with all DHBs now having achieved at least 85 percent first doses, and both West Coast and Lakes reaching the 90 percent target.

All DHBs continue to operate vaccination drives throughout the regions supported by promotional campaigns, radio and social media promotions, as well as social and community initiatives.

Sharing Personal Information About Unvaccinated Individuals

On 6 December 2021, the High Court released its decision regarding the sharing of individual data on Māori in Te Ika-ā-Maui. The Court directed MOH to both complete its decision-making processes for the provision of datasets in areas where it has not yet agreed to share data with the Whānau Ora Commissioning Agency (WOCA) and to review its decision to provide data in relation to those Māori in Te Ika-a-Māui who have only had a first dose.

MOH has previously reached agreement with Whanau Ora to share individual Māori health data for nine North Island DHB regions - Waikato, Tāmaki Makaurau (Auckland, Waitematā, Counties Manukau DHBs), Taranaki, Tairawhiti, Midcentral, Capital & Coast and Hutt Valley DHB regions, with data-sharing agreements in place.

We are now working through the process for data relating to the remaining regions of the North Island (Northland, Lakes, Hawkes Bay, Bay of Plenty, Whanganui and Wairarapa DHB areas) and will complete our process within three working days as requested by the Court.

MOH is committed to continuing to work constructively with WOCA and iwi to support the uptake of vaccinations by Māori as a priority and remain committed to finding resolutions that work for as many groups as possible.

Five to 11-Year-Olds

Medsafe is currently evaluating the information about the vaccine to assess its approval for use in New Zealand.

The COVID-19 Vaccine Technical Advisory Group is engaged in reviewing preliminary advice, subject to approval from Medsafe, in anticipation of Cabinet considering a "decision to use". The Ministry of Health is working with Pfizer to confirm the delivery schedule for supply of the Pfizer Paediatric product. The Ministry of Health is working to define an implementation plan for the paediatric rollout, including planning with DHBs and Hauora providers. Pending regulatory approval, the roll-out is expected to begin in January 2022, as announced by Minister Hipkins on 1 December 2021. As part of the roll-out we will look to ensure equitable outcomes, focus on areas with low vaccination rates, and look to provide a broad amount of outreach sites and settings.

Equity

All DHBs are focused on vaccinating hesitant and under-vaccinated populations, and engagement with Māori health providers, iwi, and primary care providers is ongoing.

First dose rates for Māori and Pacific peoples continue to increase, with Māori now over 85 percent first doses and Pasifika over 93 percent. DHBs with lower vaccination rates are finding effective ways to reach their remaining unvaccinated populations. For example, Lakes DHB is targeting vaccine-hesitant under 35s, using Māori social media influencers, creatives, celebrities, and community leaders to reach their audiences.

MOH is working with the Minister for Disability Issues and the Office for Disability Issues on two different Facebook Live webinars. One will be tailored to those who have concerns and fears about COVID-19 vaccination relating to their various medications and conditions. The second event will be about disability matters more broadly and the COVID-19 Protection Framework.

DHBs continue to focus on outreach to people who live in transitional housing or homeless communities, and people who are supported by mental health and intellectual disability services. Where possible, trusted health providers for these communities have been onboarded as vaccination clinics. DHBs have also engaged with local New Zealand Police and Department of Corrections officers to facilitate vaccinations for community-based sentence clients and people who are in remand facilities.

The MOH is working with the Ministry of Social Development to identify ways to leverage current outreach activities to better reach its clients and support vaccination uptake for this group. There will be a particular focus on Māori, Pasifika, and mental health and addiction services clients.

General Practice and Pharmacy Rollout

As at 5 December 2021, more than 1,166 primary care sites are now onboarded as vaccination sites, providing approximately 68 percent of all vaccine doses administered last week.

The focus remains on supporting the increase of primary care sites in districts with low vaccine uptake and high priority populations.

Technology

As at 11.59pm on 7 December 2021, 3,929,222 My COVID Passes have been issued. The assisted service channels continue to see very high volumes of calls and changes have been made to the call lines to increase capacity both technologically and in the call centres. Additional resources from the Ministry of Justice (approximately 80 people) and Statistics New Zealand (approximately 60 people) have been brought on to help meet demand, and we have engaged with the Ministry of Business, Innovation and Employment and Inland Revenue for additional support.

The high demand has created a backlog of requests from people needing individual assistance to obtain their vaccine pass, which were unable to be completed prior to 3 December 2021. MOH has provided a temporary exemption to these people as an interim solution while the backlog is cleared. This includes people who need to add their international vaccinations to their New Zealand record, people who need their name changed, and people whose records have errors which need to be corrected.

In-person My Vaccine Pass support is now available at all vaccination centres, including Māori health providers, DHBs, general practice and pharmacies. This will help to remove barriers for people who may not have access to a My Health Account or may require support to do so.

3.1.4 Technical Advisory Group: Update

COVID-19 TAG

The next COVID-19 Technical Advisory Group (COVID-19 TAG) meeting is scheduled for 10 December 2021 and an update will be provided in a future Weekly Report.

CVTAG

The COVID-19 Vaccine Technical Advisory Group (CVTAG) met on 30 November 2021 and discussed the following items:

- Pfizer vaccination in five to-11-year-olds.
- modelling data and assumptions.
- vaccination after previous SARS-CoV-2 infection (primary and booster schedules).
- update of fully vaccinated definition to include boosters.
- myalgic encephalomyelitis (ME) / chronic fatigue syndrome (CFS and COVID-19 vaccination).

myocarditis research sub-TAG.

The next CVTAG meeting is scheduled for 7 December 2021 and an update will be provided in a future Weekly Report.

Therapeutics TAG

The next COVID-19 Therapeutics Technical Advisory Group (Therapeutics TAG) meeting is scheduled for 10 December 2021 and an update will be provided in a future Weekly Report.

CTTAG

The next COVID-19 Testing Technical Advisory Group (CTTAG) meeting is scheduled for 9 December 2021 and an update will be provided in a future Weekly Report.

3.1.5 Communications Issues and Activities

As at 7 December 2021

Date	Activity	Lead agency	Comms material	Ministerial Involvement
07 Dec 21 ongoing	Delta Auckland outbreak: daily communications and support for the health sector and public, ncluding cases throughout regions in North sland, Nelson and Canterbury. Locations of interest and updated health advice.	МоН	Communications, key messages, website, stakeholder engagement	Optional
8 Dec 21	Announcement of new MIQ arrangements, based on updated Office of the Director of Public Health advice.	МоН	Prime Minister announcement, website materials	Yes, with Prime Minister
8 Dec 21	Announcement on testing requirements for leaving Auckland.	МоН/ДРМС	Talking points, key messages, communications, website, stakeholder communications	Yes
ТВС	Announcement of new COVID-19 infringement regime (fines).	МоН	Ministerial announcement TBC. Web materials already published, as came into force on 4 December 2021.	Yes (TBC)

3.2 Upcoming Publications

Title	Date	Context	ELT contact
Publication: Ethical Principles for a Pandemic	December 2021	The National Ethics Advisory Committee's publication considers the ethical issues that may arise during any pandemic. The emphasis is on using shared ethical principles so people can care for themselves, their whānau and their neighbours, and make decisions. This is updated from the 2007 version.	Clare Perry, Deputy Director-General, Health System Improvement and Innovation, \$9(2)(a)
Publication: COVID-19 Māori Protection Plan	20 December 2021	This plan provides an updated framework that is informed by Te Tiriti o Waitangi to protect, prevent, and mitigate the impacts of COVID-19 on whānau, hapū, iwi and hapori Māori. The plan sets out strategic actions to guide health and disability system action for Māori through the next three to 12 months of the COVID-19 response in the context of new variants, the shift to the COVID-19 Protection Framework, and the long tail of the impact of COVID-19 on the health and wellbeing of Māori. The plan has been informed by insights and feedback from a broad range of stakeholders since the start of the COVID-19 response in March 2020.	John Whaanga, Deputy Director-General, Māori Health, s9(2)(a)

4. Managed Isolation and Quarantine Weekly Report



4.1 Top Items to Note

4.1.1 MIQ's Response to the Delta Outbreak

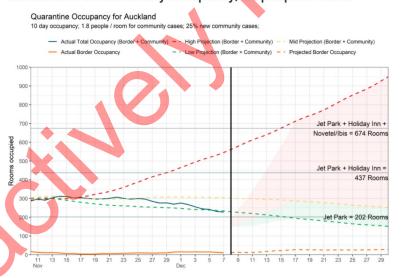
The number of community cases coming into Auckland's quarantine facilities continues to reduce due to a decrease in referrals from Auckland Regional Public Health Services (ARPHS); this has resulted in over 300 quarantine rooms being available over the last two weeks with most cases self-isolating and supported by care in the community.

In Hamilton, the Amohia continues to accommodate a small number of community cases, while a number of cases continue to self-isolate at home in the region. Positive cases have continued to appear across the North Island, Christchurch and in Nelson and these cases are supported by care in the community where quarantine facilities are unavailable.

With the number of positive cases appearing across the North Island, Christchurch and Nelson this week and the referrals from AHRPS, MIQ continues to investigate options across the regions (where we have facilities) for additional quarantine capacity to support community cases if required. All options will need to consider the impact of policy decisions regarding the Omicron Variant of Concern (Omicron VOC) as well as the impact on availability for border returnees.

MBIE has not observed a significant impact on capacity with the addition of the nine very high-risk countries (in response to the Omicron VOC) and the increase in their stay at an isolation facilitation from seven days to 14. From 21 November to-date, we have planned for 118 arrivals, with 58 of having arrived in New Zealand.

1.1 Baseline model: 10 day occupancy; 1.8 people / room



4.1.2 Changes to MIQ Leadership

Brigadier Rose King's appointment as Joint Head of MIQ ends 15 December. She is being replaced by Commodore Melissa Ross who will join us in the New Year.

4.1.3 Update on Rapid Assessment 2.0 – MIQ Governance

An interim draft report was provided to MIQ in late November for review. The reviewers, Murray Jack and Katherine Corich are meeting with on 7 December after which they will finalise the report.

4.1.4 Weekly Snapshot Has Gone Live

The New 'Weekly Snapshot' of data went live on the MIQ website on Wednesday 8 December.

4.2 Policy Update

4.2.1 Implementation timing for MIAS booking travel document verification

It was agreed that MIAS bookings should be restricted to those with the legal right to enter New Zealand.

This is being implemented in two stages:

- First, the MIAS passenger registration process will allow people to verify their travel document details and
 their right to enter New Zealand. This will give some time for people to address any issues with their
 details. At the time of writing, this was planned to be introduced on Thursday 9 December. MBIE will
 provide a notification if there were any delays or notable issues.
- MBIE will subsequently introduce a requirement during the room release that passengers are successfully
 verified upfront in order to book a room via MIAS. This requirement is expected to be introduced on
 Thursday 16 December.

4.2.2 10 day stay for Afghanistan refugees and evacuees

Since 23 August 2021, a total of 825 Afghanistan evacuees have entered New Zealand and at least another 579 are due to arrive in early 2022. Where possible, evacuees undergo managed isolation in the Naumi Auckland, which is exempt from cohorting. Extensive wraparound support is required to meet this group's complex needs, including translation, medical and psychosocial support. Following their MIQ stay, evacuees are placed in temporary accommodation managed by Immigration New Zealand. The temporary accommodation evacuees enter is currently near full capacity and is not set up to allow self-isolation.

On 10 November 2021, it was agreed to continue to support vulnerable complex groups (such as, Afghanistan evacuees and quota refugees) with 10-day MIQ stays on a transitional basis until 5 December 2021 [briefing 2122-1773 refers]. We advised that we may be required to extend this period in early January 2022 if suitable arrangements had not been finalised.

MBIE considers that there is strong public health rationale for keeping this group in MIQ for 10 days as the temporary accommodation is not yet able to facilitate self-isolation. MBIE has determined that the impacted Afghan refugees and quota refugees should continue to stay for 10 days while we work with immigration resettlement services to determine a long-term solution. This will be reviewed on January 2022, and options will be reported back.

4.3 Operational Update

4.3.1 Capacity and Room Release Update – As at 7 December

A total of 66,961 rooms since early March have been released for the period of June through to the end of March 2022.

From early March to present, 168,501 returnees have secured a date to return home during the period of March 2021 through to the end of March 2022.

The next lobby room release is planned for 16 December.

43.2 Self-Isolation Pilot (For Approved Applicants Arriving in NZ Between 30 October – 8 December 2021)

All pilot participants have now successfully arrived, 79 in total. There are currently 24 participants self-isolating; 17 in Auckland, 7 in Christchurch.

Last week 19 participants successfully exited; 9 in Auckland, 10 in Christchurch. There have been no significant incidents in the past week.

The second report back on the Pilot evaluation was sent to your office on Tuesday 7 December. It provides insights into the implications for managing self-isolating passengers at the border, including consideration of the impact of Rapid Antigen Testing, and the early participant experience.

4.3.3 MIAS Lobby Release: 7 December

The room release on 7 December had smaller participation compared with last week, continuing with the trend seen in the last two weeks. 2,506 rooms were made available across December, January, February and March.

The lobby was opened for five minutes before 9.00 am, with 4,023 people in the queue when the room release started at 10.00 am. Overall, 4,710 users joined the queue in total, representing 7,092 passengers intending to travel. In the week prior it was 5,315 users representing 8,037 passengers.

Of the 4,710 users who got a turn to enter MIAS, only 2,470 users made a booking, representing 3,852 passengers. 2,240 users did not make a booking.

January dates were booked out first at 10.30 am, but also had the lowest number of rooms (329). December with 699 rooms was booked out at 10.55 am. We cycled through a very large number of users in order to have all the rooms picked up for the mid-March dates.

India was the most popular departure country (751 passengers), followed by Australia (610 passengers). Other countries in the top five countries of departure were United States, United Kingdom and China.

High Risk Countries - There were 70 passengers who had indicated South Africa as their country of departure, 34 passengers indicated Papua New Guinea and six passengers from Zimbabwe.

Room Release dates over the Christmas/Summer period:

Please note that these dates may change due to changing circumstances.

Date	Time		
16 December	11AM		
21 December	12PM		
December (Christ	the week starting 27 mas break)		
12 January	11AM		
TE Juliudi y			
18 January	2PM		

4.3.4 MIQ's Role in Afghanistan Evacuation

A total of 903 evacuees from Afghanistan have arrived in New Zealand. The table below shows the MIQ status of the Afghanistan evacuation programme as at 10am Wednesday 8 December:

TOTAL Returnees in MI currently	142
TOTAL Departed Returnees	761 (excludes births after arrival)
TOTAL Further Expected Arrivals (prior to Christmas)	41 (estimated)

In conjunction with MFAT, it is not intended to receive any group arrivals from 12 December until 10 January, to manage resource capacity stress on the MIQ and RMS systems. Nonetheless, arrangements have been made for any emergency cases over this period to be managed through the emergency allocation system. s6(a)

INZ reports that 764 Critical Purpose Visitor visa holders remain offshore as of today.

The Nesuto post-MIF transition accommodation is very close to capacity, but the impending departure of some people to community housing and the transition of other families to the YMCA means that capacity will increase by approximately 100 people by Christmas. The provision of cultural and health support for both MIQ and RMS patrons remains stretched, with some staff being stood down over Christmas.

The recent judicial finding regarding unprocessed visas for Afghan nationals means that there is potential for a further 1,000 applicants (representing some 5,000 people) to seek travel to New Zealand. It is possible advocates may push for some of the litigant applicants (18 family groups comprising of approximately 70 people) to be allowed entry to New Zealand before the end of the year. However, advice from the INZ policy

team is that none of these applicants meet the Afghan emergency response Cabinet criteria and are therefore not technically eligible for emergency MIQ access. It is likely, however, that some holders of humanitarian visas will seek emergency MIQ allocations.

4.3.5 Ventilation

Remediation work completed (total number of facilities = 33)	Facilities yet to complete remediation	% of rooms complete within the portfolio of facilities fully signed off
28 completed (17 of which are fully signed off)	5	49% (3096 rooms)

The re-test results for Novotel Christchurch Airport have been analysed by our HVAC engineer and eight rooms of 200 are not at MIQ preferred conditions. The VRAG will now meet to review the results and decide if the eight rooms should be removed from use. The fire damper work required for code of compliance continues and remains on-track to be completed around 16 December as planned.

Completion of the remediation work for Jet Park Hamilton was signed off by the Programme Sponsor this week.

MBIE are tracking to complete remediation work for all but two facilities this year and expect to have a further three facilities fully signed off (bringing the total to 20). Remediation work at the final two facilities is expected to be completed by the end of January 2022.

4.3.6 Air Filtration Units (AFU)

There are around 944 AFUs in stock (to be shared between MBIE and MOH) and the lead-time to get MIQ's units to the facilities is around 2-4 days (depending on location)

Currently on standby to arrange installation of AFUs to additional designated quarantine rooms in advance of them being occupied. Expect an initial 10 units to be sent to Sudima Rotorua within the next one to two weeks.

4.3.7 Vaccination of Frontline Staff

For workers on site for the week 29 November – 5 December, BWTR shows that 96.5% had two doses of the vaccine, 0.2% had one dose and the remaining 3.2% (160 workers) had vaccine status 'unknown'.

Of the 160 workers with an 'unknown' vaccination status, 59 still require an NHI match. The Workforce Testing Team is investigating the remaining 101 workers, to confirm vaccination status.

Vaccination assurance follow-ups for those with an 'unknown' status in BWTR did not identify any breaches of the Vaccination Order. However, two incidents were identified in the last week that relate to our entry procedures.

- 1) The first incident was a security guard who did not sign into Who's-On-Location at Jet Park Hotel Hamilton on 6 December. The security guard has been reminded to sign into WOL in the future.
- 2) The other was a member of public who entered the Novotel Airport Christchurch by presenting as a Police Officer. The person followed the correct entry procedures, however, while Security were doing checks on the person's supposed Police Officer status, he entered the facility. This person is well known to Police. The Police have released a copy of the person's passport to all facilities to avoid a recurrence.

Of the 44 workers who were NHI-matched but showing vaccination status 'unknown' in the 22-28 November 2021 weekly report:

- 36 have been confirmed as being compliant with the Vaccination Order;
- 3 appear to be vaccinated and have been passed to the Ministry of Health as potential NHI issues;
- 3 have been vaccinated overseas (just waiting for BWTR to be updated);
- 1 have a Ministerial exemption (vaccinated overseas); and
- 1 incorrect sign-in.

Vaccination boosters were available from 29 November for anyone who had their primary course of the vaccination at least 6 months ago. MBIE are encouraging workers through our regular communications

channels to get their booster shot if eligible. As of today, there are 1,210 MIQF border workers who have had a booster dose.

4.3.8 Staff Testing

Reporting from BWTR shows that 4,934 people undertook work in our facilities last week, and the table below shows how many of those workers were compliant with the Testing Order, were overdue for a test or still needed to be NHI-matched.

Compliance increased by 1% to 90%.

Workers on site 29 Nov - 5 Dec 2021	Workers on nasal testing regime	Workers on saliva testing regime	Total	Percentage of total NHI- matched workers on site
Compliant NHI- matched workers	2072	2297	4369	90%
Overdue NHI- matched workers	281	223	504	10%
Need NHI-match	61	0	61	
Workers on site	2,414	2,520	4,934	

Of the 504 tests that are overdue, 349 of those are less than 4 days overdue, 125 are 4-10 days overdue and 30 are 11-plus days overdue. The Workforce Testing and Vaccination team will be following up with these workers to make sure they get tested as required.

MBIE will continue to follow up with workers overdue for tests to make sure they understand the new requirements.

Of the 61 that still need a NHI-match, 49 were created in BWTR in the last seven days.

In the report for the week 22-28 November, 35 workers were previously reported as '11-plus days overdue'. Follow up revealed: 19 of those workers have a swab confirmed; two have been instructed to be swabbed; 12 have been contacted and we are awaiting a response; and two are no longer employed.

4.3.9 Saliva Testing

As at 6 December, 3,979 MIQ workers are opted-in to saliva testing across all active MIQF sites (an increase of 209 from last week).

4.4 Current Judicial Review, Ombudsman and OPCAT cases

4.4.1 Current Judicial Reviews

The final pregnancy related judicial review was vacated yesterday as the applicants now have a voucher from the lobby release (costs to be determined).

s9(2)(a)

Work continues to produce our evidence for the Grounded Kiwis and Osbourne cases. \$9(2)(h)

4.4.2 OPCAT

MBIE's response to The Crowne Plaza Christchurch final report is due Friday 10 December. Follow up information has been provided for both the Hotel Chateau on the Park and the Distinction Christchurch. Requests for information regarding contact details for permanent MIF managers and Ministry of Health staff have been received. A request for information regarding how facilities communicate with deaf and hearing-

impaired returnees has also been received. MBIE has observed a significant increase in information requests by OPCAT both following up from inspections and more broad information requests at a national level.

4.5 Invoicing

The table below shows the number of invoices issued up to 5 December 2021.

Invoices have various repayment terms depending on whether they are a sports group (10 days), critical worker (30 days) or standard returnee/maritime crew/aircrew (90 days).

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	6,584	3,725	1,340	1,519	\$62,723,446	\$46,018,996	\$7,666,374	\$9,038,076	67	\$395,621
Maritime	566	439	63	64	\$2,900,622	\$2,372,156	\$197,770	\$330,695	17	\$44,386
Aircrew	230	217	5	8	\$2,182,956	\$1,838,601	\$242,918	\$101,437	8	\$101,437
Other	29,475	17781	4119	7575	\$100,674,730	\$63,319,458	\$12,578,058	\$24,777,214	2962	\$9,443,656
Total	36,855	22,162	5,527	9,166	\$168,481,753	\$113,549,211	\$20,685,120	\$34,247,422	3,054	\$9,985,099

*Groups has only previously included sports groups, critical workers and critical health workers. Going forward, this will now include temporary visa holders as this aligns more to the categorisation of critical workers, as both share the same fee charging structure.

Note: the '90+ days Overdue' column represents the number of invoices from the 'Issued overdue' column that have been outstanding for 90-plus days.

4.5.1 Debtor Statement Issue

On Tuesday 8 December a number of MIQ statements were emailed to returnees in error (no *invoices* were issued in error). This should not have occurred as MIQ debts do not receive statements because of the complexity associated with waiver applications and instalment plans.

Investigation is underway to address the issue and implement a system control so that it cannot occur again. An apology email has been sent to all potentially impacted people.

4.5.2 Fees collection

Invoicing is now up to those returnees leaving MIQ on 5 November. A solution has been implemented this week for the automated invoice process for returnees staying seven days. Invoicing of self-isolation pilot returnees is also beginning this week. We are awaiting an approval on the treatment of Afghanistan returnees, due 14 December. The process to email returnees from August 2020 has begun with emails sent to returnees up to 14 December 2020. This has led to 1,175 invoices sent so far valued at \$3.9m.

4.5.3 Debt Recovery

Of the now 1,610 invoices worth \$5.178m sent to a debt collection agency:

- \$920k (up \$117k, 18%) has been paid (or will be paid through instalment).
- \$599k is currently awaiting information from customers or has been credited due to an error.
- a further \$1,588k (this includes the gone no address/overseas category) requires more detailed tracing.
- \$357k currently have waiver applications under assessment.
- the remaining \$1,714k debt continues to be a work in progress.

To assist with collections and in turn improve the debt recovery percentage, MBIE provides debt at 30-plus days outstanding to our partner firm:

- 2,805 invoices worth \$10.104m have been passed to our partner, and to the week ending 3 December 2021 \$1,581k has now been paid (up \$484k from the week prior).
- An additional \$676k of debt is under instalment and is expected to convert to payments received over the coming weeks.

Of the invoices sent, 626 customers worth \$2.168m have now submitted wavier applications and while applications are processed, they stay as outstanding debt.

4.5.4 Weekly Average Invoicing and Debt Recovery at 77%

The table below reflects the weekly average of invoicing from 11 August 2020.

The debt recovery percentage, factoring in all repayments to date against just overdue invoices is tracking just under the FY22 target at 77%. Against all invoices raised, the debt recovery percentage sits at 67% due with just over \$20.5m of outstanding invoices which have not fallen due yet. There has been a movement in overdue invoices due to the new invoicing process going live over 90 days ago and the increase in invoicing from then onwards increases the outstanding amount as invoicing is brought up to date.

Recent Weeks	Average invoicing per week (\$)
Past week	\$2,142,096
2-4 weeks	\$4,477,724
5-8 weeks	\$3,495,427
9+ weeks	\$2,095,848

4.5.5 Waivers

The table below breaks down the waiver application information between 11 August 2020 and 5 December 2021. The numbers below relate to all waiver applications; waivers can be applied for before, during and after an individual has stayed in managed isolation.

Waiver	In	Total	Completed Financial	Completed Special	Approved W	aiver Applications	Declined Wa	iver Applications
Applications	Progress	Completed	Hardship Applications	Circumstances Applications	Financial Hardship	Special Circumstances	Financial Hardship	Special Circumstances
11984	5169	6815	872	5943	88	5070	784	873

4.6 Upcoming Communications and Activities

4.6.1 As at 8 December 2021:

Date	Activity	Lead agency	Comms material	Ministerial Involvement Y/N
Wednesday 15 December TBC	Future of MIQ	MIQ	Min Hipkins PR	Y
Thursday 16 December	Lobby #10 at 11AM	MIQ	Proactive MIQ	N

4.7 Large Group Arrivals Update

Summary of approved group arrivals as of 8 December 2021 (to March 2022).

Group	Date of Arrival	Allocation Approved	Final number of rooms allocated	Comments
Construction Sector Accord	Dec 2021	60	20 (22 pax)	Arrivals are spread across the month.
	2 Dec	32	17 (32 pax)	
	6 Dec	13	8 (13 pax)	4
	10 Dec	4	2 (4 pax)	
	Dec tbc	38	19 (38 pax) tbc	Numbers per arrival window will increase in 2022 with an aim
	31 Jan – 13 Feb	130	70 tbc	to reach the quota for the FY 21/22.
Refugee Quota	14 – 27 Mar	120	60 tbc	Control Properties and the Control Control of the Control Control Control of Control C
	25 Apr – 8 May	130	70 tbc	
	1 Dec	2	1 (2 pax)	The first standard and of survey for 2022 will be 1.1/2 17
	2 Dec	38	26 (38 pax)	The final planned arrival of evacuees for 2022 will be w/b 17 December. Arrivals will then resume from 10 January 2022. Th
	4 Dec	45	16 (45 pax)	stand down period is required due to scarce resources require
	6 Dec	33	12 (33 pax)	to provide the necessary wrap around support during their
	8 Dec	1	1 (1 pax)	managed isolation stay, as well as due to resettlement capacity
Afghanistan Evacuees	9 Dec	3	3 (3 pax)	managed isolation stally as went as due to resettlement supulse
	11 Dec	22	8 (22 pax)	Expected numbers from January 2022 include 120 pencilled in
	12 Dec	2	2 (2 pax)	arrive from the w/b 10 January, 362 who will make movement
	17-19 Dec	50	40 (50 pax) tbc	s6(a), a further 300-400 undocumented travellers,
	From Jan 2022	962	684 (962 pax) tbc	and 70-80 as a result of the INZ judicial review.
Mariners	7 Dec 2021	11	11 (11 pax)	
	27 Jan	16	16 tbc	
	29 Jan	44	44 tbc	
	3 Feb	45	45 tbc	
XPO	5 Feb	75	75 tbc	
	26 Feb*	44	44 tbc	1
	12 March*	25	25 tbc	
	Dec	25	21(24pax)	
	Jan	30	30 tbc	
Exporters Fe	Feb*	90	90 tbc	Arrivals are spread across the month.
	March*	150	150 tbc	
Cricket: BlackCaps	9 Dec 2021	35	29 (31 pax)	An exemption to train has been granted for this team. The BlackCaps will depart on day 7 to undertake self-isolation in the home in line with the new short stay model.
	3 Dec	55	55	•
	8 Dec	10	10	December arrivals for NZDF are scattered over several days as
N7DF	Dec (tbc)	11	11	the aircraft had broken down.
NZDF	20 Jan	60	60 tbc	An additional 4 vouchers have been issued for those who had
	23 Feb*	80	80 tbc	gone for the aircraft's repair.
Cricket: Bangladesh	10 Dec	35	31	An exemption to train has been granted for this team. Operational plans are being finalised for operating the exemption to train during the teams stay in MIQ and during th self-isolation phase. NZC have provided a self-isolation plan to MoH and have confirmed they will assume all responsibility fo the team during this period. MBIE will only be responsible for the transfers and training period at the off-site facility.
	20 Dec	65	65 tbc	53 2
	10 Jan	170	170 tbc	These arrivals are for the combined US Antarctic Programme
Antarctic	19 Jan	36	36 tbc	(USAP) as well as the Italian, French, German and Korean
Programme	Feb (date tbc)	25	25 tbc	programme.
	7 Feb	25	7 tbc	
Cricket: South Africa	4 Feb	35	35 tbc	Engagement with NZC has begun. The team are seeking an exemption to train. Working through the implications of South Africa being added to the very high-risk countries list — as the team are not NZ citizens, they will be unable to travel direct to NZ from South Africa unless an exemption is granted permittin this. Given the extended period of isolation (either two weeks before entering NZ or 14 days in MIQ) discussions with NZC are underway around dates and scheduling.

DECEDICATED

Netball: Silver Ferns	21 Jan	24	24 (TBC)	
	Dec	20	0 (0 pax)	
Ministerial Travel	Jan	20	tbc	<u> </u>
	Feb	20	tbc	7
County and Culture	Dec	40	8	
Sports and Culture	Jan	40	2(4 Pax)+	
	1 – 14 Dec	150	37 (51 pax)	Arrivals are spread across the month.
	15 – 31 Dec	150	42 (53p pax)	
e ::: 11 bit 1	1 – 14 Jan 22	150	46 (71 pax)+	
ritical health workers ricket: Women's Crick	15 – 31 Jan	150	33 (57 pax)+	
	1 – 14 Feb	150	6 (12 pax)	
	15-28 Feb*	150	2 (3 pax)	
Cricket: Women's Cric	ket World Cup			
Officials	Jan/Feb	405	tbc	Working through implications of South Africa becoming a very high-risk country for officials. Border Ministers agreed an increase to the group allocation to accommodate the other critical CWC attendees in MIQ (approx. 405 pax).
India	25 Jan	31	tbc	India is seeking a training exe <mark>m</mark> ption.
South Africa	Feb	31	tbc	For the remaining teams, Border Ministers have agreed teams can enter MIQ even if they meet the medium-risk pathway, and
Pakistan	Feb	31	tbc	to increase to the group allocation to accommodate the
Bangladesh	Feb	31	tbc	Australian and English teams
West Indies	Feb	31	tbc	CWC are considering whether the majority of teams enter MIQ from the 14th February. Due to operational complexities of
England	Feb	31	tbc	having this many teams in at once, CWC are aware that if they took this approach, these teams would not be able to apply for a
Australia	Feb	31	tbc	training exemption. This is pending confirmation from the ICC this week.
Cricket: Netherlands Men	7 Mar*	35	tbc	Engagement with NZC has begun. The team are seeking an exemption to train.

^{*} These arrivals will fall under the new medium risk pathway.

Time Sensitive Travel (TST)

The Time Sensitive Travel window for arrivals in January/February 2022 closed on 14 November 2021.

Applications Received	Applications Approved (plus family)	Applications Declined (plus family)	Referred to MOH	Applications Withdrawn (plus family)	Rooms Required
431	276 (32)	2 (1)	34	67 (7)	279

Note:

Due to a technical error, last week's report did not have the most up to date group and TST arrival numbers. This has been rectified and the data included in this report is correct.

4.7.1 South African Men's Cricket team

The South African men's cricket team have been granted a group allocation for February 2022. At the time the allocation was granted, MIQ was not certain whether it would be possible to facilitate off-site training for this team due to the number of other sports teams training in MIQ over this period. We are now able to confirm training will be possible for this team, subject to a training exemption being granted by the Ministry of Health. Sport New Zealand will engage with the Ministry of Health to request a Ministerial exemption from the Very High-Risk travel restrictions and an exemption to allow off-site training.

4.8 Emergency Allocation Applications

7,957 applications have been processed since 30 October 2020. 217 applications were received in the week ending 5 December 2021 and 145 applications were processed. Of the 145 applications processed in the week ending 5 December 2021, 81% were approved.

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Emergency Allocation Applications	Weekly Totals 29 November to 5 December 2021	Year to Date Totals 30 October 2020 to 5 December 2021
Approved	117	4685
Declined	28	3272
Applications processed	145	7957

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

Total Rooms Approved Under Emergency Allocation from 8 November to 14 November	127
Rooms allocated in MIAS	106
Awaiting flight details or MIAS registrations from the applicants to complete the room allocation process	21

5. Border Executive Board Report



5.1 Key Issues Being Considered

5.1.1 Border Executive Board

The Border Executive Board met on 8 December 2021.

The Board checked in on progress of the Border Implementation project to reopen the border under Step One on 17 January 2021. The focus is on implementation and end-to-end passenger journey including working with Health on day 0/1 PCR testing. The BEB will continue to oversee progress, as the time frames are tight and there is much to be done. Several agencies are operating under considerable pressure, and all are working together to support one another.

The Board formally agreed to the delivery of the 'partial technology solution' for the Traveller Health Declaration System Programme Tranche One by 31 March 2022. While the partial digital solution is implicit in the Cabinet papers, the decision was formally noted and accepted by the BEB as the governance board.

The Board accepted the draft COVID-19 Maritime Order Review (Tranche Two) completed by Venter Consulting Ltd as final. The Review did not identify any unknown matters, stating that the processes and controls to implement the core Maritime Border Order requirements have matured and, for the most part, work reasonably well. Some of the key findings were identified and are being responded to in the Review of Maritime COVID-19 Border Incidents July-September 2021, which was considered by the Board at its 10 November 2021 meeting.

The Board received an update on the Health at the Border Systems Improvements initiative on three priority deliverables. An update on the overall programme will come to the Board in the first quarter of 2022.

- The Ministry of Health document; Responding to Public Health Threats at New Zealand Air and Sea Ports: Guidelines for the public health and border sectors, has been reviewed and updated. The aim is to publish this by February 2022.
- Recruitment for three initial health staff located in the Integrated and Targeting Operations Centre has progressed with appointments expected to be made before Christmas.
- A description of border health functions has been completed.

The final meeting of the year will be on 15 December 2021.

6. New Zealand Customs Service Weekly Report



6.1 Items to Note/Updates

6.1.1 Maritime

The vessel *Valentine*, a roll on/roll ferry, is currently en-route to New Zealand and is scheduled to arrive at Wellington on 14 December 2021. It has been leased by KiwiRail to assist with freight capacity while the Interislander ferry *Kaiarahi* undergoes major repairs through to March 2022 after sudden gearbox failure.

The vessel departed from the United Kingdom on 11 November 2021 and its last contact was pilotage in the Panama Canal on 26 November 2021. It has 32 crew on board with 20 of those signing off after arrival.

The vessel has advised that one crew member is unwell. The Ministry of Health has been contacted with the Ministry of Transport and DPMC also being advised.

6.1.2 Vaccination Requirements for Non-New Zealand Citizens Arriving by Air

For the period 29 November 2021 to 5 December 2021, two infringements were issued as follows:

 On 2 December 2021, the vaccination documentation for two passengers arriving from France via Singapore showed that their second vaccinations were administered less than 14 day before their departure to New Zealand. \$300 infringements were issued to both passengers.

	Date	29 Nov	30 Nov	1 Dec	2 Dec	3 Dec	4 Dec	5 Dec	Week Total	%
	Non-NZ citizens	122	332	119	202	128	224	107	1234	
Primary Actions (Passport Control)	Vaccination status verified	105	310	99	111	113	147	94	979	79.3%
	Exceptions	15	18	19	86	12	74	13	237	19.2%
	Exemptions	1	3	1	1	3	1	0	10	0.8%
	Referred to Secondary Area	1	1	0	4	0	2	0	8	0.7%
Secondary Area Actions	Compliant	1	1	0	2	0	2	0	6	75.0%
	Non-compliant	0	0	0	2	0	0	0	2	25.0%

6.1.3 Pre-Departure Testing

For the period 29 November 2021 to 5 December 2021, there were three warnings issued as follows:

- On 2 December 2021 a child arrived from the UK via Dubai with no PDT documentation. The accompanying
 parent had been told by the airline that PDT was not required for a two-year-old child. A warning was
 issued.
- On 4 December 2021, two children arrived from Turkey via Dubai without PDT documentation. The parents
 of each child believed that PDT was not required for children. Warnings were issued.

	Date	29 Nov	30 Nov	1 Dec	2 Dec	3 Dec	4 Dec	5 Dec	Week Total	%
	Passengers subject to PDT	374	433	376	446	395	468	416	2908	
Primary Actions (Passport Control)	Test Certificate Verified	355	398	367	428	384	440	398	2770	95.2%
	Exemption	19	35	9	9	10	26	18	126	4.3%
	Referred to Secondary Area	0	0	0	9	1	2	0	12	0.5%
Secondary Area Actions	Compliant	0	0	0	8	1	0	0	9	75.0%
	Warned	0	0	0	1	0	2	0	3	25.0%
	Infringement	0	0	0	0	0	0	0	0	0
	Prosecution	0	0	0	0	0	0	0	0	0

8. COVID-19 Chief Executives Board

8.1 Items to Note/Updates

The COVID-19 Chief Executives' Board (CCB) held its most recent meeting on Tuesday 7 December. Discussions covered the key concerns and priorities raised by Chief Executives, questions of workforce capacity, the outlook for Reconnecting New Zealanders (RNZ), readiness for the CPF, and the compliance and enforcement arrangements underpinning the COVID-19 response. The next meeting will occur on Tuesday 14 December, in a shortened verbal format.

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

9.1 Items to Note/Updates

The COVID-19 Independent Continuous Review, Improvement and Advice Group did not meet this week. Their final meeting for the year is scheduled for next Tuesday 14 December. This week the Group provided feedback to the Ministry of Health on the Care in the Community Framework. The Chair, Sir Brian Roche also appeared at the Health Select Committee's 'Briefing on the Government's response to COVID-19' session on Wednesday 8 December.

10. Strategic COVID-19 Public Health Advisory Group

10.1 Items to Note/Updates

The Strategic Public Health Advisory Group (SPHAG) did not meet this week. The Group is currently developing a forward-looking paper, charting key scenarios to be faced in the COVID-19 response during the half of 2022. This will be discussed at the next meeting on Wednesday, 15 December, with a view to facilitating its submission to Ministers before the holiday period.

11. Business Leaders Forum

11.1 Items to Note/Updates

The Business Leaders' Forum did not meet this week. The next meeting for the Forum is yet to be confirmed.

12. Community Panel

12.1 Items to Note/Updates

The Community Panel did not meet this week. It will not meet again this year with the date of the first meeting for 2022 yet to be confirmed. This week the members have been invited to provide feedback on the current iteration of the Care in the Community Framework outside of their cycle of meeting.

13. Government Modelling Group

13.1 Items to Note/Updates

Work continues with TPM on scenario modelling for 2022 and comparing the different results being produced by their two modelling teams. Work is being undertaken to validate model results against recent observations in New Zealand and overseas.

Regarding projections for the current outbreak, cases are declining faster than recent projections. This suggests that changes to the level of restrictions have not led to any increase in transmission, and may indicate that vaccine effectiveness in the population is currently better than the central model assumptions, or that TTIQ measures are having a greater impact than the model assumes as caseloads reduce.

Recent estimates for the effective reproduction number now suggest Reff is very likely to be below 1.





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