











COVID-19 Response Weekly Report

20 May 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			
Zealanders W H	•	•	On 10 May 2022, Ministers agreed to remove requirements for all travellers entering New Zealand by air to provide a pre-departure test. This will occur no later than 31 July 2022, but likely sooner once the Ministry's variant plan is finalised. On 11 May 2022, the Prime Minister announced the full reopening of the international border from 11.59pm 31 July 2022, two months earlier than initially planned, for all visa holders and tourists. The reopening of the international border also includes the entry of cruise ships from 31 July. On the basis of decisions made by Ministers, post arrival testing and vaccination requirements will be clarified for maritime crew and travellers. The Ministry, alongside Border agencies, continues to develop operational practice for the MBO changes which came into effect on 2 May 2022. The Ministry has provided advice recommending the COVID-19 Public Health Response (Required Testing) Order 2020 (the RTO) be revoked as it is no longer considered necessary. The RTO mandates that specified groups of border workers take part in regular surveillance testing and medical examination for COVID-19. If agreed, the RTO will be revoked, potentially as soon as 25 May 2022.			
Reconnecting New	•	•	Generally processing continues to go well with operational teams managing as "business as usual" albeit with increased volumes and continuing to build staff familiarity. There are still some rejections at e-Gates. To resolve this, work is continuing with the New Zealand Traveller Declaration. Operational agencies have confirmed readiness for the flow arising from the reopening of visa applications for Pacific Forum countries. MFAT is supporting Immigration New Zealand's rollout and is providing information on Pacific partners' reopening plans.			
BEB	•	•	Maritime border programme Advice on the legal mechanism and compliance approach for health requirements at the maritime border are under development with a decision paper due 30 May 2022. Operational readiness work for the border reopening is also underway with a report to be submitted mid-June 2022.			
- Pacific Islands	•		 \$9(2)(a)(i) reopening plans and expected level of interest so that INZ can plan accordingly. \$6(b)(i)			

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Isolation and Quarantine

Agency	Last Week	This Week	Agency Comment	
МВІЕ	 MIQ Readiness Programme A cross agency advisory group has been established for this work to provide a cross agency view over the next steps on the Readiness Plan; the first meeting was held this week. MBIE have also participated in a cross-agency workshop to discuss the new variant plan to ensure that the Readiness work is aligned and incorporated. A briefing will be provided to your office on 30 May which will provide further details on the Readiness Plan, including a copy of the plan, and proposed retention/surge and partnership agreements to support implementation of the plan if required. 			
MOH No Update				

Community Protection

	Agency	Last Week	This Week	
Technology Surveillance and Updates Contact Tracing Testing	МОН	•	•	 On 11 May 2022, Minister Verrall signed off a health report agreeing that supervised rapid antigen testing (RAT) by community pharmacies to unvaccinated, asymptomatic and domestic travellers under the current settings will continue only until 11.59pm 10 June 2022, rather than 30 June 2022. Communications were issued on 16 May 2022, after stakeholder groups consultation, which included agreement on remaining stock use. Further Q&As are being developed to support community pharmacies with this change. This funding decision also followed Air New Zealand's decision to discontinue the airline's vaccine pass/negative test regime for domestic travel.
	мон	•	•	• Version 1.0 of the Risk Score for Call Prioritisation Tool (Risk Score) was implemented in March 2022 as a part of the COVID-19 digital systems to ensure that people who were at highest risk of hospitalisation were prioritised for call backs if they did not respond to initial outreach from that National Contact Tracing System. Soon thereafter, the Risk Score team initiated an evaluation to determine if the tool was better than calling people at random, reviewing data from 23 January 2022 to 14 February 2022. The evaluation showed that when the risk score tool was used, the probability of calling people who would be hospitalised was better than random calling. The tool automatically assigns higher risk of hospitalisation to Māori and Pacific people than other ethnicities. The evaluation showed that the tool was very good at identifying higher risk people over 60, and just below average for people who were unvaccinated. The Risk Score team is using these findings, along with additional new data sources, to inform Version 2.0 of the tool, which we estimate will be ready for evaluation from June 2022.
	МОН	•	•	No update.

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Community Protection (Contd)

Agency	Last Week	This Week	
Care in the Community O H	•	•	 The team have been continuing travel across the motu this week, engaging with the Hubs and hearing about their work within communities. Hubs across the Te Manawa Taki region – Waikato, Rotorua, Tauranga, Whakatāne and Taupō have been visited to date. Three key findings into the way the Hubs are operating, and how they would like to operate into the future are: building relationships and engagement within their communities and leveraging off these relationships is crucial to their work there is a need for access to data/reporting held by the Ministry and supporting agencies to support the Hubs' work assurance of funding continuity to enable them to carry out their services, including being able to ensure contracts for employees. A key focus as we transition into the new Public Health Agency will be on how Care in the Community operates as a model of care into the future. Sessions with Hubs are continuing across the country over the coming weeks. A contact line covering all things COVID-19 has been set up, specifically tailored to support disabled people if their carer or support worker tests positive for COVID-19 or has to isolate as a precaution. The service went live on 16 May 2022.

Vaccination

Agency	Last Week	This Week	
мон	•	•	 As at 11:59 pm on 17 May 2022, 11,068,857 vaccinations have been delivered. 4,100,138 people have received two doses of vaccine. As at 11:59 pm on 17 May 2022, 2,647,144 booster doses have been administered. 73 percent of people eligible for a booster have received a booster. 96 percent of the eligible 12 years and over population has now received at least one dose, and 95 percent have received two doses. As at 11:59 pm on 17 May April 2022, 26,2331 Pfizer Paediatric first doses have been administered, with 54 percent of children aged five-to-11-years having received their first dose of vaccine. 121,234 Paediatric second doses, 25 percent of this population, have been administered. Nineteen district health boards (DHBs) have reached 90 percent fully vaccinated. Nine DHBs (Waitemata, Auckland, MidCentral, Wairarapa, Capital & Coast, Hutt Valley, Canterbury, South Canterbury, and Southern) have also achieved 90 percent fully vaccinated for Māori. Widespread sprint events are planned for areas and demographics with lower booster uptake rates. DHBs across the motu are working closely with schools and kura to schedule on site vaccination clinics. Work is underway on legislation and implementation planning for rollout of a second booster dose. Implementation is on track to update COVID-19 Vaccination Certificates for release of the first phase of updated CVCs on 24 May 2022. Rollout of influenza vaccinations continues at pace. As at 11:59pm on 15 May 2022, 736,666 doses of influenza vaccine have been administered. 436,844 doses have been administered to people aged 65 and older (53.7 percent of the total eligible group). The Ministry has extended its partnership with Whakarongorau to provide direct consumer outreon for both flu and MMR vaccinations. Data is being shared with service providers for COVID-19 and flu vaccinations down to suburb level. Booster uptake and achieving equity<!--</td-->
			In collaboration with Te Puni Kökiri, Mäori providers, and Iwi, Northland DHB is finalising a collective mobile outreach approach to run across Te Tai Tokerau, shifting resources from static sites with low or no recent vaccination activity. The Ministry of Health's data team is in discussions to provide reports on remainder data to support planning of the outreach clinics in Northland. This initiative will then be rolled out in Tāmaki Makaurau, and the Waikato/Midlands region. Five-to-11-year-olds Where uptake by kura has been slow, DHBs are developing tailored communications to drive interest and engagement. For example, Northland DHB is running a sprint in partnership with Maori health providers with a month of events and activities celebrating Matariki, intended to prioritise vaccinations for five-to-11-year-old tamariki. Taranaki DHB is prioritising Māori five-to-11-year-olds, extending the 'Around the Maunga' campaign that was run in school Term One. A new television commercial highlighting the benefits of immunisations for tamariki has launched. COVID Vaccination Certificates On 13 May 2022 Minister Hipkins announced that an updated COVID-19 Vaccination Certificate (CVC) can be downloaded from 24 May 2022 for people aged 12 and over. The current application of COVID-19 Vaccination Certificates (CVCs) was put in place to support the implementation of the COVID-19 Protection Framework. These passes will all expire by 1 June 2022. Technical delivery for phase one of the updated CVCs is progressing well for release on 24 May 2022. Preparation for implementation for the operation model of assisted channels for scaling the assisted channels is underway.

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System Readiness & Planning

ſ	Agency	Last Week		Agency Comment on Status of Focus Area					
Health Supply Chain	мон	•	•	 Overall supply and distribution of rapid antigen tests (RATS) is very steady, with good volumes of RATs in stock and being distributed. Cancelling a current order of 13 million RATs will be considered this week based on modelling numbers. Existing stock volumes are surge-ready if there is suddenly a demand for more RATs. In the week ending 11 May 2022, there were 32,000 orders placed in the RAT Requestor system (representing 116,000 people). These numbers exclude people accessing RATs via workplaces, and community providers. As of 13 May 2022, Healthpoint showed over 500 RAT collection points – including 365 collection sites, 99 CTCs, and 99 providers supporting priority populations nationwide. In addition to pharmacies (524 sites on Healthpoint), GP practices (279 sites on Healthpoint), and other community providers, there are well over 1,000 access points for RATs. The Targeted Rural Service is supplementing the nuanced approaches DHBs are already taking to ensure access for rural/remote populations – with 23 orders received over the past 7 days. Other delivery service orders include aged population group 18 orders, disability sector 5 orders, and immunocompromised population group 20 orders (week ending 11 May 2022). On 12 May 2022, the Ministry had 44.1 million RATs stock on hand. Approximately 1.7 million RATs had been dispatched from the warehouse in the last seven days. The Ministry continues to build its RATs stocks. As of 12 May 2022, there were 42.2 million RATs on order to 30 June 2022, with 26.1 million confirmed for delivery. Demand for RATs under the CCES is minimal. We continue to see a higher proportion of these requests originating in the South Island. Currently 17 RAT devices are approved for sale, supply and use in New Zealand. As of 11 May 2022, 13 RAT devices are undergoing technical review (stage 2), with five of these awaiting further information for assessment from applicants. 					
System Readiness	DPMC	•	•	 DPMC continue to work with response agencies to build a comprehensive repository of active and latent COVID-19 system tools. Individual follow up meetings are in progress with a final deliverable due 27 May. The deliverable will identify a full list of system tools, impacts and considerations to be considered in system planning and response to future outbreaks. Fortnightly NRG meetings are in place to maintain oversight and integration across the AoG system. Work is ongoing between agencies to confirm the final outstanding question in relation to the supply of and funding for alternative accommodation for tourists who are unable to secure safe accommodation. This is now sitting with the C4C DCE Ops group. DPMC no longer has a responsibility in progressing this matter forward. 					
	МОН	•		Winter planning preparedness continues across the Ministry. Modelling is expected to be completed by the end of May 2022.					
Phase	DPMC	•	•	 The draft National Management Approach update is with agencies for review before going to the DPMC COVID-19 Group Leadership Team for finalisation by the end of May. As part of lesson capture a survey and workshop on 25 May is planned. 					
Planning for Next	мон	•	•	 The Ministry continues to monitor the current Omicron outbreak to ensure the COVID-19 Protection Framework (CPF) settings remain appropriate. The COVID-19 Assessment Committee met on 16 May 2022 to review the CPF settings for New Zealand. The Ministry has provided advice recommending the COVID-19 Public Health Response (Required Testing) Order 2020 (the RTO) be revoked as it is no longer considered necessary. The RTO mandates that specified groups of border workers take part in regular surveillance testing and medical examination for COVID-19. The COVID-19 Assessment Committee will next review the settings on 15 June 2022. 					

2. COVID-19 Insights

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

2.1.1 Updated Look at The Impact of Long COVID Overseas

Introduction

The Insights and Reporting Team in the DPMC's COVID-19 Group have analysed the impact overseas of post COVID-19 health related conditions, known collectively as Long COVID, and how this impacts the workforce and wider society. This report includes a definition of Long COVID, how the Omicron variants have affected its prevalence, its impact on workforces and social welfare implications, government responses to it internationally, and its economic impact overseas. Countries analysed include the United Kingdom, France, Sweden, Germany, and the United States. This report builds on the DPMC insights report from mid-January titled *The Impact of Long COVID Overseas*.

Following this insights report, the Ministry of Health Science and Insights team are planning to release a long form report on Long COVID. The release date is yet to be confirmed. It will cover, among other things, further information on Long COVID's prevalence, causes, risk factors, the impact of vaccination, and the treatment of, and care for, Long COVID.

Long COVID Definition

SARS-CoV-2 (COVID-19) is still a relatively new virus and there is still a lot to learn about the long-term health impacts. The long-term physiological and psychological effects of COVID-19 are not yet fully known. New evidence on Long COVID continues to emerge from around the world.

So far there is no specific definition of long COVID that has been agreed upon internationally. The term Long COVID is commonly used to describe signs and symptoms that develop during or after an infection consistent with COVID-19, continue for more than 12 weeks and are not explained by an alternative diagnosis. It usually presents with clusters of symptoms, often overlapping, which can fluctuate and change over time and can affect any system of the body.¹

Long COVID Prevalence Overseas

Processes for collecting information on the proportion of people infected with COVID-19 that have experienced or are experiencing Long COVID varies between countries, as does the criteria for an extended illness to be defined as Long COVID. Accordingly, any data should be considered as an initial approximation only. Of the countries analysed, initial data suggests that Long COVID may be affecting between approximately 2.7% and 6.8% of the populations. For New Zealand it is too soon to know the full number of people who may be suffering from Long COVID.² Outlined below are the reported or estimated numbers of those affected by Long COVID in the analysed jurisdictions.

- United Kingdom the Office for National Statistics (ONS) estimated that there are 1.8 million people experiencing Long COVID In the United Kingdom (approximately 2.7% of the population).³ This is impacting approximately 1.2 million people's ability to undertake day to day activities. Of the 1.8 million individuals afflicted, 791,000 have been dealing with the condition for more than a year, and 235,000 for at least two years.⁴
- United States An estimated 23 to 30 percent of individuals in the United States who have contracted COVID-19 have also developed Long-COVID.⁵ With data indicating over 80 million COVID-19 cases in the US,⁶ this equates to between 18.4 to 24 million individuals (approximately 6.4% of the population) having suffered or currently suffering from Long-COVID.
- France As of 30 October 2021, approximately 25% of those infected with COVID-19 have experienced, or are currently experiencing, persistent symptoms for longer than a month. Approximately 10% have experienced symptoms for longer than three months. As of May 13 2022, France has officially recorded over 28 million cases of COVID-19. The actual number of people

suffering with Long COVID is unknown, but based on official prevalence estimate rates, the number of people who have or are suffering from Long COVID could be between 2.5 and 7 million people (approximately 6.8% of the population).

- Germany An official prevalence rate for Long COVID for Germany is not available, but the most common estimate remains 10% of confirmed COVID cases, or around 500,000 by December 2021. Since then, however, the number of confirmed cases has grown from 5 to 25 million.⁸ Based on previous prevalence estimates, around 2.5 million Germans may have or are experiencing some form of Long COVID (approximately 2.9% of the population).
- **Sweden** The proportion of adults who have Long COVID is estimated at between 2 and 21 percent of all who had COVID-19.9 With 2.5 million total cases reported, 10 the number of people who may have or are suffering from Long COVID would be between 50,000 and 500,000, (approximately 2.8% of the population) however the total number of those affected by Long COVID is not reported on.

Omicron's Impact on Long COVID Prevalence

As of January 2022, almost two years into the global pandemic, 289 million confirmed cases of COVID-19 had been reported. However, from 1 January 2022 to 1 May 2022, with the emergence of the Omicron variant, a further 224 million cases were reported. With the total number of reported COVID-19 cases almost doubling in the space of four months following the emergence of the Omicron variant, the impact on the number of people suffering from Long COVID is yet to be fully understood.

The UK's ONS conducted a study of COVID-19 positive patients in order to ascertain the initial impact of Omicron on Long COVID. The survey was based on self-reported data, and as there are many factors which influence self-reporting of prevalence, the numbers should be taken as an initial indication only. The preliminary data showed for triple-vaccinated adults:

- There was no statistical evidence of a difference in the adjusted prevalence of self-reported Long COVID between first infections with the Delta variant and with either Omicron BA.1 or Omicron BA.2; and
- The odds of reporting Long COVID symptoms after a first COVID-19 infection were 21.8% higher after Omicron BA.2 than Omicron BA.1.¹⁴ ¹⁵

Overseas Countries Response to Long COVID

The full magnitude of the Long COVID burden globally is still yet to be known, with countries all at varying stages of their response to COVID-19. Some countries have only experienced significant outbreaks following the emergence of the Omicron variant, resulting in a lack of first-hand experience in addressing Long COVID and undeveloped systems to respond to and report on Long COVID. Outlined below are the details in the response to Long COVID in the analysed jurisdictions.

- United Kingdom: The UK government has set up over 80 specialist clinics¹⁶ to provide support to those suffering from Long COVID, which provide psychological and physiological support services. Further research funding is being provided through grants to NGOs and healthcare providers through the National institute of health. To date around 50 million pounds of funding has been provided for research in to Long COVID.¹⁷ The UK government has made Statutory Sick Payments, Universal Credit, or Employment and Support Allowance (ESA) available to people if Long COVID affects how much they can work. Affected individuals can also apply for a Personal Independence Payment if they have difficulty with everyday tasks and getting around.¹⁸
- **United States:** As of July 2021, Long COVID, also known as post-COVID conditions, can be considered a disability under the Americans with Disabilities Act. ¹⁹ President Biden has directed federal agencies to support patients and doctors by providing science-based best practices for treating Long COVID, maintaining access to insurance coverage, and protecting the rights of workers as they try to return to jobs while coping with the uncertainties of the malaise. ²⁰
- **France:** Since the French government identified Long COVID at the end of the first wave of the virus in spring 2020, it has been watching the issue closely in order to care for those affected and to better

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understand the disease. On 17 March 2022, the Health Minister published a statement recognising Long COVID as a health concern in France and acknowledging the necessity for ongoing research into its prevalence, diagnosis, and treatment.²¹

- Germany: The German Government has committed to the establishment of a Germany-wide network
 of 2,580 competence centres and interdisciplinary outpatient clinics to further research and ensure
 needs-based care around the long-term effects of COVID-19. German physicians dealing with Long
 COVID have established a dedicated national association, with thirteen specialised working groups,
 to promote research, share information and improve the treatment of patients suffering from Long
 COVID.²²
- Sweden: The Swedish government has implemented a number of responses to Long COVID. It has supported research on COVID-19 through funding to the Swedish Research Council and tasked the Swedish Agency for Health and Care Services Analysis with mapping Long COVID care across the country. The National Board of Health and Welfare has produced guidelines and statistical reports to support the health and welfare system in meeting the needs of Long COVID sufferers. However, the general lack of information about the condition, and awareness of it, as well as the immense pressure on the healthcare system during the pandemic, means that a system for testing and assessment, treatment, and support available to sufferers is not yet fully functioning.²³

Financial Implications of Long COVID

While the fiscal impacts of the COVID-19 pandemic in general is reasonably well known and reported on across jurisdictions, the fiscal impacts of Long COVID specifically are less well known and scarcely reported on, as the impacts are hard to quantify given the wide variety of variables involved.

The impact of Long COVID can be looked at from multiple angles, from decreased productivity from a reduction in workforce, to the costs incurred by an individual, including healthcare costs, lost wages, lost savings, and accrued debt.

The Solve Long COVID initiative, a non-profit research and advocacy group in the United States has estimated that the disability caused by Long COVID has cost \$386 billion dollars in the United States alone, when considering only the personal financial impact on affected individuals, like lost wages, lost savings, and healthcare costs, from the beginning of the pandemic through to January 31 2022.²⁴

Further work to measure the financial impact of Long COVID is still required in order to fully understand its scale. Countries across the globe have committed varying levels of financial resources to diagnose, understand and treat the condition, but research and reporting regarding the overall financial impact and the second and third order financial effects of Long COVID is currently scarce.

Thank you to the following teams that assisted with this report: the Ministry of Health.

3. Ministry of Health

MINISTRY OF HEALTH

3.1 Policy/Programme Updates

3.1.1 Health system preparedness programme: update

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

COVID-19 Care in the Community

Therapeutics update

The Therapeutics Implementation Group is preparing for the planned arrival of Tixagevimab with Cilgavimab (supplied under the brand name Evusheld™). This is a pre-exposure preventative intramuscular injection targeted towards a subset of immunocompromised individuals ie, those who qualified for a third primary dose of the COVID-19 vaccine. Evusheld is expected to be rolled out by the beginning of July 2022.

Prescribing and dispensing rates according to ethnicity

The Ministry of Health has completed a preliminary analysis of Paxlovid™ dispensing rates against age and ethnicity, based on COVID-19 case data. This includes COVID-19 cases that were classed as active on or since the first Paxlovid™ dose was dispensed on 4 April 2022, up until 5 May 2022. The results are in the following table:

Paxlovid™ dispensing rates for COVID-19 cases from 4 April 2022 - 5 May 2022

Age Group	Māori	Pacific Peoples	Asian	European or other
0 to 9	1854	74		5 5
10 to 19	0.03%	0.07%	27.5	0.02%
20 to 29	0.06%	0.13%	0.04%	0.06%
30 to 39	0.17%	0.22%	0.02%	0.14%
40 to 49	0.47%	0.39%	0.12%	0.25%
50 to 59	0.78%	1.49%	0.18%	0.36%
60 to 69	2.39%	1.99%	0.86%	0.78%
70+	3.94%	3.36%	1.69%	1.92%

This is a small sample size of approximately 1,300 courses over a one-month period.

This data suggests that Paxlovid™ dispensing rates are higher for Māori and Pacific than non-Māori and non-Pacific, with a noticeable difference in the elderly population.

Pharmac's expanded access criteria for oral COVID-19 therapeutics came into effect from 5 May 2022. The Ministry of Health is meeting twice weekly with Pharmac and continues to review the access criteria to make sure that those that will benefit from the medication can do so. To support this, we are working with Pinnacle Primary Health Organisation to audit the number of people who meet the access criteria and test positive for COVID-19 who are offered the medication. In addition, the Royal New Zealand College of General Practitioners will be distributing a survey on our behalf to understand at clinician and practice levels what barriers there are to prescribing Paxlovid™ and Molnupiravir. The Ministry of Health is also looking at options to develop a practice-level audit tool for Paxlovid™ prescribing.

Reconnecting New Zealanders

The Ministry of Health is working with the Department of Prime Minister and Cabinet (DPMC) to develop a common understanding across government of what happens if an international traveller gets COVID-19, and whether they can access funded health services for COVID-19 whilst in New Zealand.

Further investigation has determined that eligibility for funded services is stated under the New Zealand Public Health and Disability Act 2000 (Health and Disability Services Eligibility Direction 2011), and that there is no longer a strong public health imperative to provide funded treatment to short-term visitors. The Ministry of Health expects travellers will have appropriate insurance to cover the cost of any COVID-19 related treatment

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and care. Further work is being done on who will cover the costs of international travellers directed to isolate who are unable to pay for healthcare or alternative accommodation.

Updated Alternative Accommodation Guidance

Updated alternative accommodation guidance prepared in conjunction with the Ministry of Business, Innovation and Employment (MBIE) is being distributed to the Care in the Community sector, including:

- DHBs
- · community hubs
- · self-Isolation and quarantine coordinators.

This guidance outlines processes for administering alternative isolation accommodation, managed isolation and quarantine facilities, and the National Mobile Isolation Reserve, as well as processes for emergency situations where after-hours self-isolation and quarantine might be needed, such as Police safety orders, prisoner releases, and evictions from emergency or temporary housing.

3.1.2 National Immunisation Programme (Week: 9 - 15 May 2022)

3.1.2.1 Table 1: Vaccinations delivered

	Vaccines Administered 3- 9 May 2022	Vaccines Administered 10-17 May 2022	Change	Cumulative Total
COVID-19 Vaccinations				
First Dose 12+	166	190	14.46%	4,027,069
Second Dose 12+	371	392	5.66%	3,978,904
Third Primary	136	206	51.47%	32,175
Booster	7,210	6,774	-6.04%	2,645,189
16–17-year-old Booster	959	861	-10.22%	9,554
Paediatric First Dose	311	328	5.47%	262,331
Paediatric Second Dose	2,218	1903	-14.20%	121,234
Total	11,371	10,654	-6.30%	11,068,857
Flu Vaccinations	Vaccines Administered 30 April- 6 May 2022	Vaccines Administered 7- 13 May 2022	Change	Cumulative Total
Total 65 +	94,369	32,930	-65.10%	436,844
55-64 Māori/Pacific	4,681	5,398	15.32%	110,475
MMR Vaccinations	Vaccines Administered 30 April- 6 May 2022	Vaccines Administered 7- 13 May 2022	Change	
Total	3178	2939	-7.52%	

Flu vaccinations are recorded in the National Immunisation Register (NIR) and Covid Immunisation Register (CIR). The figures quoted above is based on CIR data as at 11:59pm on 15 May 22 and NIR data as at 11.59pm on 13 May 22.

*Note due to a technical issue, the flu and MMR numbers provided may be lower than the actual numbers for the current period. The team are working to resolve this issue, with a clarification on the numbers provided for the current period provided in the next report.

3.1.2.2 COVID-19 vaccinations

5-to-11-year-olds

To date, 35 percent of eligible tamariki Māori aged 5-to-11-years have been partially vaccinated. 48 percent of Pacific children aged 5-to-11-years have been partially vaccinated, equal to last week. Of the 2,272 paediatric vaccinations administered in the last week, 342 were to tamariki Māori and 217 were to Pacific children.

Schools and kura update

The National Immunisation Programme (NIP) continues to develop solutions to increase COVID-19 vaccine uptake, particularly for tamariki, with Te Matakahuki, and are intensifying work on the implementation of the Mā te Kōrero ka Eke strategy in Kaupapa Māori and Kohanga Reo education settings. This initiative will commence in Waikato and Tāmaki as a pilot, to ensure the relationships are meaningful and sustainable with a whānau ora or holistic approach to health and wellbeing for tamariki and whānau.

Fourth dose

An expedited legislative process is now underway to amend the Medicines Act 1981 to enable delegations to the Director-General of Health for an off-label use of Pfizer COVID-19 vaccines. The current high-level timeframe for this is estimated to be:

- Cabinet paper submitted 2 June 2022
- First reading of amendment **7 June 2022**
- Legislation enacted (expedited) 14 June 2022
- Legislation enacted (conservative) 5 July 2022.

Plans for implementation are proceeding concurrently, and the implementation will be a national roll-out preceded by targeted 'off-label' administration to at-risk population groups through primary care.

Equity

Māori

As at 15 May 2022, 91 percent of Māori aged 12 years and over have received dose one and 88 percent have received dose two of the COVID-19 vaccine. Fifty-six percent of Māori aged 18 years and over have received their booster. Thirty-five percent of tamariki Māori have received dose one and 12 percent have received dose two of the paediatric COVID-19 vaccine. There has been no significant movement in vaccination rates over the past week aside from the one percent increase in Māori paediatric dose two uptake.

Pacific People

Pasefika Family Health delivered the highest number of vaccinations of those Pacific providers vaccinating in the Tāmaki region over the weekend, with 214 vaccinations administered. This was followed by South Seas Health Clinic in Counties Manukau who delivered 201, Langimalie Health Centre in East Auckland who delivered 105 and The Fono in West Auckland who delivered 91 vaccinations.

Disability and mental health

As at 15 May 2022 the vaccination rate for individuals aged 12 years and over supported by the Ministry's Disability Support Services (DSS) funding remains at 90 percent. A further two percent of this cohort are partially vaccinated. Booster uptake for those eligible in this cohort is at 79 percent.

As at 15 May 2022 25 percent of children aged 5-to-11 supported by DSS funding are fully vaccinated. A further 27 percent are partially vaccinated.

Vaccination uptake among those aged 12 years and over who use mental health and Alcohol and Other Drug (AOD) services is at 86 percent as at 15 May 2022. Booster uptake for this cohort is at 58 percent.

Last week, 14 of the 41 applicants for the COVID-19 Vaccine and Immunisation Peer Support Fund were notified that their application for funding had been successful. Contract negotiations between each organisation and the Ministry have now commenced. Unsuccessful applicants will be notified of the outcome

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of their application this week, with letters being issued from 20 May 2022. Unsuccessful applicants will have the opportunity to debrief with the panel Chair regarding the panel's decision-making process.

Outreach

Population groups with lower uptake rates and at greater risk of serious infection are being prioritised, and work with select DHBs is progressing to increase vaccination rates. Examples of the operational approach are outlined below:

- Northland DHB is running a sprint run in partnership with Māori health providers with a month of events and activities celebrating Matariki, intended to prioritise vaccinations for 5-to-11-year-old tamariki and Māori and Pacific people that are 50 years and over.
- Hawke's Bay DHB is focusing on boosters in conjunction with influenza vaccination for Māori and Pacific
 people that are 50 years and over. Planning is underway for outreach, events and promotions, including
 activating the Game-On campaign in the region.
- Taranaki DHB is prioritising Māori 5-to-11-year-olds, extending the 'Around the Maunga' campaign that was run during term one of the school year.
- Southern DHB is targeting immunocompromised booster doses as currently only ~47 percent of those who have received a third primary dose have received a booster, using this as an opportunity to reconnect with their most vulnerable whānau before the winter months. Planning is also underway with local Māori and Pacific providers to see how they can link in with this winter immunisation push.
- Also, in collaboration with Te Puni Kökiri, Māori providers and Iwi, Northland DHB is finalising a collective
 mobile outreach approach to run across Te Tai Tokerau, shifting resources from static sites with low or no
 recent vaccination activity. Discussions are taking place with the Ministry's data team to receive reports on
 remainder data to support planning of outreach clinics. This initiative will then be rolled out in Tāmaki
 Makaurau, and the Waikato/Midlands region.

'Game On' Sports Strategy Continuing

As part of the 'Game On' strategy, Manurewa Marae, Manukau hosted a concert and offered both COVID-19 and influenza vaccinations. Over 40 influenza vaccines were delivered, and zero COVID-19 vaccinations were administered. Providers participating in the Tāmaki Makaurau 'Game On' campaign began including netball tickets as part of the supports designed to encourage Pacific women in the family/aiga to get their vaccinations.

It is anticipated the 'Game On' campaign will be extended to regions outside of Tāmaki Makaurau in the coming weeks, with a particular focus on piloting the strategy in smaller regions with low vaccination uptake for Māori and Pacific people.

Church Health Expo

A community-initiated Health Expo coordinated by ProCare in collaboration with various health agencies and church communities in Auckland was held over the weekend in Central Auckland. Over ten churches from all around the Auckland area participated, with over 700 members of the public attending the event. Pasefika Family Health administered vaccinations at the pop-up clinic with 214 vaccinations (including both COVID-19 and influenza vaccinations) administered on the day.

Incidents

Incidents

For the week 9 May to 15 May 2022, NIP was informed of the following new incidents:

•	s9(2)(a)
s9	0(2)(g)(i)

Update on previously reported incidents:

NIP was notified of the following incidents and is providing support to the providers and DHBs to support the incident response:

- On 3 March 2022, there was a Southern DHB incident that affected one dose for 1,546 consumers and two doses for 28 consumers. Since the last combined report (9 May 2022) an additional three consumers have been revaccinated. This means that 1,006 (64 percent) consumers have completed a replacement dose. The DHB continues its outreach plan to engage with those who have not taken up the offer of a replacement dose, however uptake remains low for this group.
- On 8 April 2022, an incident at Taranaki DHB was reported affecting 60 consumers aged 5 to 11 years. The
 DHB has contacted 58 consumers and the outreach plan hasn't been able to contact the remaining two
 whānau.

Adverse events following immunisation (AEFI)

s9(2)(k)

Medsafe is publishing a COVID-19 vaccine safety report that summarises the number and type of AEFI reported with the COVID-19 vaccines. This report was updated weekly for most of 2021 and transitioned to monthly updates in January 22. The latest report was published on 11 May 2022 (data cut-off 30 April 2022) and future updates will be made every two months. The reduced frequency is due to a decrease in the number of reports being received and aligns with similar reports from other regulators.

Data sharing

Data is being shared with service providers for COVID and flu vaccinations down to suburb level (with some at individual level), as well as aggregated information being released on the Ministry of Health's website. This data supports local community activities to lift vaccine uptake rates. From 9 May 2022, data sharing with iwi to support 55 years and over Māori and Pacific influenza vaccination commenced. The Ministry of Health has 18 data-sharing agreements in place with iwi and Māori organisations to support COVID-19 vaccination outreach activities. This includes agreements with the Whānau Ora Commissioning Agency, Data Iwi Leaders Group and National Hauora Coalition. Additional agreements are being put in place to support the extension of the data sharing arrangements to include influenza vaccinations.

Statistical Area 2 level maps providing information down to suburb level have also been provided to the DHBs to support them in their outreach activities for flu vaccinations.

COVID Vaccination Certificates

On 13 May 2022 Minister Hipkins announced that an updated pass can be downloaded from 24 May 2022 for people 12 and over. Website content was updated on the <u>Unite Against Covid website</u> and DPMC also shared social media content. MBIE updated its advice to business on <u>its website</u>. The Ministry of Health's social media channels will be utilised when there are more details to share.

Technical delivery for phase one is progressing well for release on 24 May 2022, with activity shifting to testing from the prior build work. Design and build activities are progressing for phase two, targeted for release 31 May 2022.

Implementation for the operational model of assisted channels has been endorsed by the Programme Leadership Group and preparation for scaling our assisted channels is underway, with a view to pivoting additional staff to outbound calls to support booster and flu vaccination uptake in the event the actual demand for COVID-19 vaccination certificates is low. Assisted channel partners were briefed last week.

COVID-19 Vaccine stock expiry

Table 2: COVID-19 Vaccines currently in stock across the country, and wastage to date.

COVID-19 Vaccine	Central Storage Stock	Site Stock	Expired to date
Paediatric Pfizer	410,600 doses with an expiry date of 31 October 2022. Three-month shelf-life extension application has been applied for.	99,890 doses	92,870 doses
12+ Pfizer	2,324,100 doses with 31 percent showing expiry date of 30 June, balance across 31 July 2022, 30 August 2022, 30 September 2022 threemonth shelf-life has been provided by Pfizer for consideration by Medsafe	79,446 doses	408,720 doses
AstraZeneca	13,700 doses with an expiry date of 22 July 2022	4,670 doses	81,340 doses
Novavax	244,500 doses with a current expiry date of 31 July 2022	5,670 doses	990,360 doses

3.1.2.3 Communications Update

A weekly update on influenza vaccinations was published online last week and will be updated every week on the Ministry's website along with being tweeted from the Ministry's twitter account.

A range of updated digital and online promotions commence this week to highlight free vaccinations for priority audiences, including a targeted video from the Director-General of Health to businesses encouraging them to make influenza shots available to their employees.

The key promotions underway this week include a new television commercial to highlight the benefit of immunisations for tamariki, digital promotions highlighting boosters for 16- and 17-year-olds and a radio campaign aimed at 16- to 30-year-olds using genuine stories from people who caught COVID-19 and had not received a booster.

An overarching identity, Stay Well for Winter, has been designed and will be used by the health sector on relevant promotional and informational material, and provided to the DHBs and other agencies (including Unite Against Covid) for their use. As part of the campaign, DHBs are actively engaged in developing a range of initiatives and opportunities that will be rolled out from 1 June 22. Immunisation remains an integral part of the programme which is being led by the Ministry.

3.1.3 Technical Advisory Group: update

COVID-19 TAG

The COVID-19 Technical Advisory Group (COVID-19 TAG) did not meet in the week commencing 9 May 2022. The next COVID-19 TAG meeting is scheduled for 20 May 2022.

CV TAG

The COVID-19 Vaccine Technical Advisory Group (CV TAG) met on 10 May 2022 and discussed the following items:

- Vaccine rollout
- Aging-in the third primary dose
- COVID-19 Vaccine Independent Safety Monitoring Board Interim Report (CV-ISMB) Interim Report: Response to questions raised last meeting
- Definitions of fully vaccinated
- Future Vaccine Strategy

The next CV TAG meeting is scheduled for 24 May 2022.

Therapeutics TAG

The COVID-19 Therapeutics Technical Advisory Group (Therapeutics TAG) did not meet in the week commencing 6 May 2022. The next Therapeutics TAG meeting is scheduled for 20 May 2022.

CT TAG

The COVID-19 Testing Technical Advisory Group (CT TAG) did not meet in the week commencing 6 May 2022. The next CT TAG meeting is scheduled for 17 May 2022.

3.1.4 Upcoming communications issues and activities

As at 17 May 2022

Date	Activity	Lead agency	Comms material	Ministerial Involvement
	s9(2)(g)(i)			
Ongoing	New variants: planning for new variants and looking at new XE variant/BA.4/BA.5	МоН	Full communications plan in the process of being developed	Minister Hipkins / Minister Verrall
Ongoing	Border Worker Testing	МоН	Changes to border worker testing requirements – details TBC	ТВС
Ongoing	Reports into the Delta outbreak and PCR testing capacity are being reviewed and once finalised will go over to the Minister's office with recommendations.	МоН	Full communications plan	Minister Hipkins
Ongoing	Omicron community outbreak: daily communications and support for the health sector and public, incl. cases in a number of regions across the country.	MoH DPMC	Talking points, key messages, communications, website, stakeholder communications	Optional
Ongoing	Testing – who to test / where to test/ record results on My Covid Record / Traveller requirements messaging	MoH DPMC MBIE	Key messages, website, stakeholder communications	No

4. Managed Isolation and Quarantine Weekly Report



4.1 Items to Note/Updates

4.1.1 OPCAT Annual Report 2020/2021

The Chief Ombudsman has released the OPCAT annual report which covers the period the between 1 July 2020 and 30 June 2021. The report is about monitoring places of detention and reporting on activities under the Optional Protocol to the Convention Against Torture (OPCAT).

The Ombudsman lists the facilities that they have visited and investigated, which were prisons, MIQ facilities, aged care facilities, court facilities, Intellectual disability facilities and mental health facilities.

The Ombudsman carried out 17 inspections and produced 10 facility reports on MIQ facilities that resulted in 49 recommendations to improve conditions and treatment of people in these facilities.

The Ombudsman also mentions engaging with MBIE in 2020/2021 on several issues, primarily related to the ability of people in MIQ facilities to access fresh air, and the conditions and treatment of those required to isolate on ships.

These issues were made public in the Ombudsman's thematic report, which was released in August 2021.

4.2 Transition and Readiness

4.2.1 Workforce

The formal change process for the remaining facilities, and our regional and national offices is on-going.

While most staff will be exiting MIQ, a consultation period started on 10 May which will allow effected staff to provide feedback on the proposed structure and other aspects of the change proposal around a small residual group, this will end 24 May and feedback will be considered between 24 and 31 May.

We expect that the decision for the new national office and regional operating model will be made in early June and implemented mid-July.

It is this small group of people that will likely transition to the new National Quarantine Capability, pending decision by Cabinet.

4.2.2 Decommissioning of Facilities

A total of 24 facilities have been decommissioned and handed back.

A further two facilities will be decommissioned on 1 June and the final two community facilities will be decommissioned on 30 June.

Decommissioning for the final four operational facilities is on track with the proposed date of 31 July for dedesignation and 31 August for decommissioning.

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Facility (by region)	Tranche	Current occupancy	Current phase	Staff on site within last 7 days	Hand-back date	Facility RAG status
Auckland				2	J.S	58
Crowne Plaza	One	Empty	Decommissioned		29/4/22	
Four Points	One	Empty	Decommissioned		14/4/22	
Grand Mercure	One	Empty	Decommissioning		29/4/22	
Grand Millenium	One	Empty	Decommissioned		14/4/22	
Novotel/Ibis Ellerslie	One	Empty	Decommissioned		29/4/22	
Sebel	One	Empty	Decommissioned		29/4/22	
so	One	Empty	Decommissioned		29/4/22	
Stamford	One	Empty	Decommissioned	IK	29/4/22	
Pullman	One	Empty	Decommissioned		29/4/22	
Sudima Airport	One	Empty	Decommissioned		29/4/22	
Rydges	One	Empty	Decommissioned		14/4/22	
Naumi (Afghan/refugees)	Two	Empty	De-designated		1/6/22	
M Social (aircrew)	Two	Empty	Decommissioned		29/4/22	
Novotel Airport (mariners)	Two	Empty	Decommissioned		13/5/22	
Ramada (deportees)	Two	Empty	Decommissioned		29/4/22	
Jet Park	Core facility	Occupied (10 pax)	N/A core facility	71	N/A	N/A
Holiday Inn	Core facility	Occupied (15 pax)	N/A core facility	59	N/A	N/A
Waipuna Auckland	Core facility	Occupied (10 pax)	N/A core facility	64	N/A	N/A
Hamilton						
Distinction	One	Empty	Decommissioned		29/4/22	
Ibis Tainui	One	Empty	Decommissioned		29/4/22	
Amohia (Jet Park)	Three	Empty	De-designated	,	30/6/22	
Rotorua						
Sudima	Three	Empty	De-designated		30/6/22	

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Facility (by region)	Tranche	Current occupancy	Current phase	Staff on site within last 7 days	Hand-back date	Facility RAG status
Rydges	One	Empty	Decommissioned		29/4/22	
Ibis	One	Empty	Decommissioned		29/4/22	
Wellington						
Grand Mercure	Three	Empty	De-designated		30/6/22	
Christchurch						
Chateau on the Park	One	Empty	Decommissioned		14/4/22	7
Crowne Plaza	One	Empty	Decommissioned		29/4/22	
Distinction	One	Empty	Decommissioned	. 0	29/4/22	
Sudima Airport	One	Empty	Decommissioned	IK	29/4/22	
Novotel Airport	One	Empty	Decommissioned		29/4/22	
The Elms	Two	Empty	Decommissioned		29/4/22	
Commodore	Core facility	Occupied (1 pax)	N/A core facility	42	N/A	N/A
Totals:		36 pax		236 staff		

4.2.3 Readiness Programme

A cross agency advisory group has been established for this work to provide a cross agency view over the next steps on the Readiness Plan; the first meeting was held this week.

MIQ also participated in a cross-agency workshop to discuss the new variant plan to ensure that the Readiness work is aligned and incorporated.

A briefing will be provided to your office on 30 May which will provide further details on the Readiness Plan, including a copy of the plan, and proposed retention/surge and partnership agreements to support implementation of the plan if required.

4.3 Operational Update

4.3.1 Omicron Outbreak – Ongoing Support

MIQ has four facilities across New Zealand designated as Managed Isolation and Quarantine facilities. These facilities provide support to community cases (including close contacts) who are unable to safely isolate at home, as well as refugees, evacuees, mariners, and some air crew.

4.3.2 Current Occupancy

As at 18 May 2022 there were 36 people in Managed Isolation and Quarantine.

Total PAX in MIQ:	Community cases:	Mariners/Air Crew:	Evacuees/ Refugees:
36	19	7	10

4.3.3 Group Arrivals Update

Summary of approved group arrivals as of 16 May 2022 (to end June 2022)

Group	Date of Arrival	Allocation Approved	Final number of rooms allocated	Comments
	16 May – 22 May	25	14 (25 pax)	The Refugee Centre is forecasting arrivals of 45 pax (30
Refugee Quota	23 May – 29 May	31	17 (31 pax)	rooms) per fortnight until end of June 2022. They are confident they will meet their target of 800 refugees for the fiscal year 21/22. We are currently discussing
	May tbc	83	38 (83 pax)	with the Refugee Centre their transition out of MIQ post-June.
	June	90	45 (90 pax)	
Afghanistan Arrivals	16 May – 22 May	10	4 (10 pax)	There are approximately 100 Afghanistan Evacuees to arrive before the end of July. They will arrive sporadically in small groups and not all of them will enter MIQ.

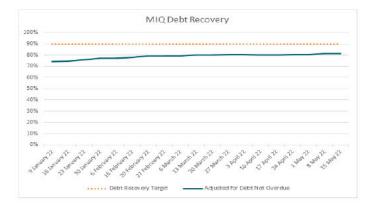
4.3.4 Invoicing

The table below shows the number of invoices issued up to 15 May 2022.

INVOICES ISSUED 57,850	37,165 (64% of invoices issued)	INVOICES ISSUED - NOT YET DUE 8243 (14% of invoices issued)	INVOICES OVERDUE 12,442 (21.5% of invoices issued)
TOTAL VALUE OF INVOICES ISSUED \$219 million	\$163.5M 74.6%	ISSUED - NOT YET DUE (BY VALUE) \$17.9M 8.2%	INVOICES OVERDUE (BY VALUE) \$37.5M 17.1%
March 2022. From mid-Marconly 19 records With invoicing r 'unmatched dat determine their	o the period for returnees leaving that to the end of April we see a dray (not including aircrew, maritime mow largely up to date, we are stay for the period 25 March 2021 reliability.	amatic drop in invoicing with and refugees). arting to investigate the to 28 February 2022 to	90+ days overdue 7195 invoices \$25.7M (by value) 11.7% (by value of all invoices issued)

4.3.5 4.2.7 Debt Recovery

A total of \$2.02m received in the week. The **debt recovery percentage is 81%** (against our nominal target recovery of 90%).



- As of 15 May 2022, 9,357 invoices worth \$32.6m have been passed to our debt partner.
 - \$11.8m has now been paid (an increase of \$409k).
 - A further \$548k of debt is under instalment and is expected to be converted to payments over coming weeks.
 - Of the invoices sent, 382 customers worth \$1.2m have now submitted waiver applications. While applications are processed, they stay as outstanding debt.

4.3.6 4.2.8 Fee Waivers

The table below breaks down the waiver application information between 11 August 2020 and 15 May 2022. The numbers below relate to all waiver applications; waivers can be applied for before, during and after an individual has stayed in managed isolation.

All Waiver Received and			Approved Waiver Applications			Declined Waiver Applications		
Applications Received	not progressed	Total Completed	Financial Hardship	Special Circumstances	вотн	Financial Hardship	Special Circumstances	вотн
17,963	3,105	14,187	96	9,181	87	1,853	2,533	437
		X	Approved 66.5% of completed waivers		of	Declined 33.5% completed waive	rs	

4.3.7 4.2.9 Reducing the Fee Waiver backlog

0			Last week (at 8 May)
TOTAL BACKLOG	AT 15 MAY 2022:	671	830
Made up of:	i) Processing or to be processed	381	534
	ii) Waiting for Customer	290	296

New applications received 8 May 2022 to 15 May 2022: 317

Net decrease (weekly) from 8 May to 15 May 2022: 159

Net reduction from 13 December 2021 to 15 May 2022: 4416

4.4 Ombudsman Complaints

MBIE are currently managing 85 cases, with 59 of those being preliminary enquiries.

There are 13 active cases:

- one is on policy advice;
- · five are on emergency allocations;
- · two are on exemptions from managed isolation;
- · two are regarding undue financial hardship fee waiver;
- · two are on MIQ facilities; and
- one is the Chief Ombudsman's self-initiated investigation, of which MIQ MBIE have been advised that a provisional opinion may be sent to MBIE around mid- May.

In the week 13 May MBIE closed 7 cases:

- · 4 were fee waiver decisions that were in MBIE's favour.
- Three were aged cases the Chief Ombudsman found against MBIE. In relation to remedies:
 - one case required no further action;
 - one case the Ombudsman recommended that MBIE grant a fee waiver which has been actioned by MBIE; and
 - one case the CE of MBIE apologised to a complainant.

4.5 Upcoming Communications Issues and Activities

4.5.1 As at 18 May 2022:

Date	Activity	Lead agency	Comms material	Ministerial Involvement Y/N
19 May	Proactive release of original glide path/future of MIQ documents	МΙΩ	Reactive comms	Y
30 May (TBC)	Proactive release of MIQ briefing papers	MIQ	Reactive comms	y
June (TBC)	Ombudsman Self-Initiated Investigation findings	MIQ	Reactive comms	Y
June (TBC)	Grounded Kiwis judicial review - final declaratory statement	MIQ/Crown Law	ТВС	ТВС

5. Border Executive Board Report



5.1 Items to Note / Update

5.1.1 Border Executive Board Meeting

The BEB met on 18 May 2022 with the key matters discussed noted below.

Future border settings for air and maritime

The Board noted the direction from 10 May 2022 by Reconnecting New Zealanders Ministers and the requested advice from the BEB. The operational challenges of requiring up to date vaccination were raised.

The Board were advised that the Ministry of Health is withdrawing its health presence at Wellington and Christchurch airports due to workforce capacity constraints but will retain a presence at Auckland airport during business hours at this stage.

Maritime pathway - operational readiness for reopening

The Board received an update from the Ministry of Transport and Maritime New Zealand who are leading operationalising the reopening of the maritime pathway. There were no issues to report. The Board acknowledged the thorough approach that was being taken. The initial focus is on readiness for 31 July 2022 and then readiness for cruise by mid-October 2022 (when the first vessel is expected). The approach involves multi-agencies, MBIE tourism and regional tourism, and iwi. Readiness reporting to the Board is expected to commence in the next couple of weeks.

s9(2)(g)(i)	

New Zealand Traveller Declaration

The Board received the regular monthly programme update on the New Zealand Traveller Declaration that focussed on the strategic assessment and an update on the policy work programme. The Board agreed the strategic assessment that outlines the direction for tranche two and three. There are no changes with the direction of the Programme.

ne Board was upda <mark>te</mark> d on t <mark>h</mark> e need to have an enduring legislative framework to enable the continuation of
ne New Zealand Traveller Declaration. s9(2)(g)(i)
Customs is engaging with agencies on options
nat include amending the Customs and Excise Act 2018 or utilising the COVID-19 omnibus legislation.

Managed Isolation and Quarantine

The Board received an update from the Ministry of Business, Innovation and Employment about the status of decommissioning managed isolation and quarantine facilities, approach for readiness should they be needed again, and progress with the national quarantine capability business case. No matters of concern were raised by the Board.

Spirit of Service Award

Customs has entered a nomination for the Spirit of Service Award – Excellence in Service for the New Zealand Traveller Declaration with Customs, Immigration New Zealand, and the Ministry of Health.

The next meeting is 25 May 2022.

5.1.2 Reconnecting New Zealanders – Air Border Implementation

Changes to the New Zealand Traveller Declaration were released on Thursday 12 May 2022 for unvaccinated New Zealand residents. These changes mean that travellers can now self-select as a New Zealand residence class visa holder. This selection will exempt travellers from vaccination checks and result in a conditional Travel Pass being issued that requires the airline and Customs officers to check evidence of residency at check-in and arrival.

Visa applications for the Pacific Forum are open. All agencies have confirmed operational readiness and key issues of visa processing, communication onshore and offshore as well as New Zealand Traveller Declaration compliance rates will be monitored closely.

The Director General of Health has signed off the withdrawal of health professionals from Wellington and Christchurch Airports (effective last week), and staff will not be provided for Queenstown airport. Arrangements are being finalised to retain some presence at Auckland airport.

Work continues with Statistics NZ and Customs to scope a solution for managing the scanning of the arrival card post 1 July 2022. Health took over the scanning function at the beginning of COVID-19 and have given notice that they will stop managing and paying for the scanning of the arrival card on 30 June 2022.

5.1.3 Maritime Border Programme

The Prime Minister announced on 11 May 2022 that the maritime border will reopen to cruise and recreational vessels on 31 July 2022. The Border Executive Board is co-ordinating communications with border agencies and agencies are communicating with stakeholders using agreed messaging on relevant website and media channels.

There are two follow-up reports underway by the Border Executive Board:

- with the Ministry of Health on the legal mechanism for implementing the vaccination requirements at the maritime border and the compliance approach (report due 30 May 2022)
- with the Ministry of Transport on the overall readiness of communities, industry, iwi and border agencies for the maritime border reopening (report due mid-June 2022).



6. New Zealand Customs Service Weekly Report



6.1 Items to Note/Updates

6.1.1 New Zealand Traveller Declaration

Privacy breach [SENSITIVE]

On 11 May 2022, a privacy breach was identified when a member of the public's personal digital COVID-19 Vaccine Record (Smart Health Card) was published on the New Zealand Traveller Declaration website. Customs advised your office on 12 May 2022.

The vaccine record showed the first and last name of the individual, their date of birth and vaccination doses. No other personal information was contained within the record. Customs have written to the affected individual to notify them of the breach. Customs are undertaking a full investigation and review of the situation. This includes investigating this incident further to establish a complete set of facts, and then reviewing processes on how information is shared to ensure this is not repeated.

Treasury Gateway Review

The Treasury Gateway review is underway this week for the New Zealand Traveller Declaration programme. The review will focus on Tranche 1 deliverables and a forward review of Tranches 2 and 3 of the programme. The Gateway review was a condition of the business case approval for the programme.

6.1.2 Compliance Checking at the Air Border

Compliance checking at the Air Border

As part of Reconnecting New Zealanders, the COVID-19 Public Health Response (Air Border) Order 2021 came into force on 28 February 2022. Customs staff undertake compliance checks for all passengers on arrival for evidence of pre-departure testing or exemption, vaccination verification or exemption or a travel pass.

Travellers who do not provide the required evidence may incur an infringement offence fee between \$500 and \$4,000 depending on the nature of the offence. Non-New Zealand citizens who do not provide the required evidence of vaccination status will be referred to the Ministry of Health officials for further intervention.

For the period 10 to 16 May 2022 (both dates inclusive), a total of 36,135 passengers travelled to New Zealand. Of this number, 83 were considered to not meet the requirements for air travel into New Zealand:

- six travellers were issued warning letters, and 75 travellers have been issued with an infringement offence fee for not meeting pre-departure testing requirements; and
- two travellers have been issued with an infringement offence fee for not meeting vaccination verification requirements, and no travellers have been referred to the Ministry of Health for further intervention.

7. COVID-19 Chief Executives Board

7.1 Items to Note/Updates

The COVID-19 Chief Executives Board met on Tuesday 17 May 2022. The meeting included updates on the variant planning and the surveillance strategy by the Director General of Health. The board also continued discussions on the transition plans across Health, MIQ, MSD and DPMC as COVID-19 moves towards a more sustainable mode of operation.

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 did not meet this week. You are meeting with the Group next Tuesday 24 May which will be their final meeting under their current terms of reference. The Group are delivering their rapid review of future-focussed lessons to you today and will discuss with you at the meeting on 24 May.

9. Strategic COVID-19 Public Health Advisory Group

9.1 Items to Note/Updates

The Strategic COVID-19 Public Health Advisory Group met on Wednesday 18 May, 2022. Officials from DPMC and the Ministry of Health attended to discuss the draft post-winter strategy and the draft COVID-19 Variants of Concern Scenario Planning document respectively.

10. Business Leaders Forum

10.1 Items to Note/Updates

The Business Leaders Forum does not currently have a date for its next meeting.

11. Community Panel

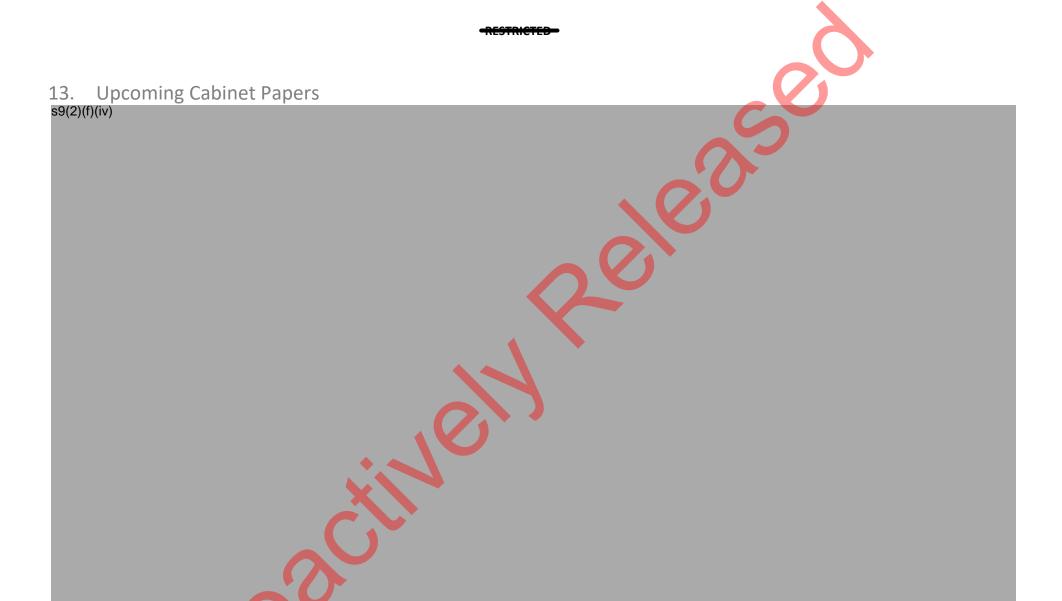
11.1 Items to Note/Updates

The Community Panel did not meet this week. We are continuing to work with your office to confirm a date and time for you and the Prime Minister to meet with the Panel during June, 2022.

12. Government Modelling Group

12.1 Items to Note/Updates

There are no updates from the Government Modelling Group this week. Future updates will be provided where significant.



COVID-19 Insights References

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https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/conditionsanddiseases/bulletins/prevalenceofongoingsymptomsfollowingcoronaviruscovid 19infectionintheuk/6may2022 - Accessed 09 May 2022

- ⁵ FORMAL MESSAGE: COVID-19: IMPACT OF COVID AND LONG COVID ON WORKPLACES AND BUSINESS: UNITED STATES Unclassified April 23 2022
- ⁶ Our World in Data United States: Coronavirus Pandemic Country Profile https://ourworldindata.org/coronavirus/country/united-states Accessed 17 May 2022
- ⁷ FORMAL MESSAGE: COVID-19: REQUEST FOR REPORTING LONG COVID- FRENCH RESPONSE Unclassified 03 May 2022
- ⁸ FORMAL MESSAGE: COVID-19: REQUEST FOR REPORTING LONG COVID GERMAN PERSPECTIVES Unclassified 09 May 2022
- ⁹ FORMAL MESSAGE: COVID-19: REQUEST FOR REPORTING LONG COVID: SWEDEN Unclassified 04 May 2022
- ¹⁰ https://www.worldometers.info/coronavirus/country/sweden/ Accessed 13 May 2022
- ¹¹ There are almost certainly more cases of COVID-19 that have not been reported.
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- ¹³ Our World in Data Cumulative COVID-19 cases https://ourworldindata.org/covid-cases Accessed 05 May 2022
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