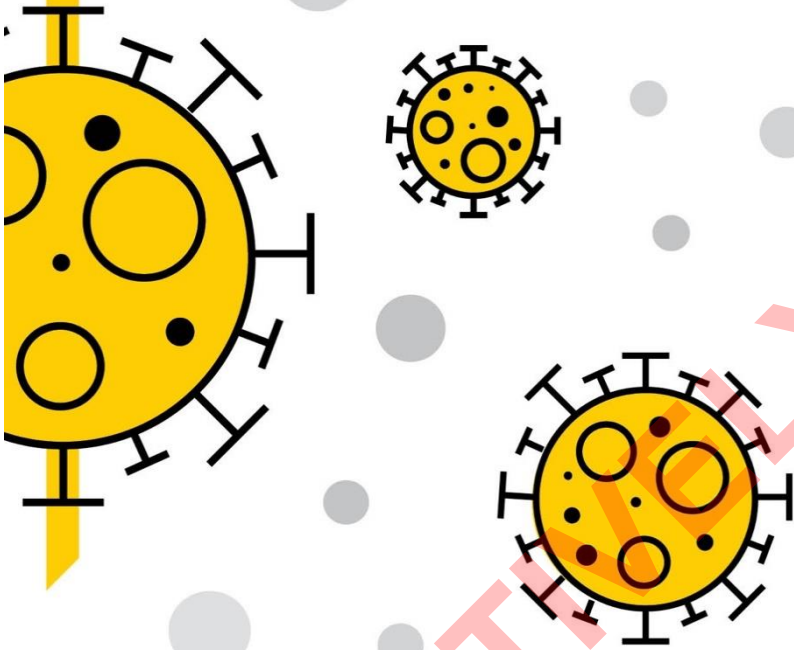


2021 Quarter 2 Update



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

Mā tātou
katoa e
ārai atu te
COVID-19



COVID-19

National Response Plan

Cover page - key information

The Government response to COVID-19 is driven by science and public health measures. The COVID-19 Group at the Department of Prime Minister and Cabinet (DPMC) leads system assurance and responsiveness for any COVID-19 outbreak and is responsible for the implementation of this document. DPMC maintains a business continuity plan to maintain critical functions in the event of a COVID-19 resurgence.

This document should be read in conjunction with the Ministry of Health's (MoH) Resurgence Plan as the two documents are closely linked and inform each other.

When is this plan activated?

This plan will only be activated if necessary, with potential triggers including;

- The MoH have grounds to believe community transmission is, or may be, occurring; and/or
- The MoH believes case/s or community clusters of COVID-19 are not contained, or may not be contained; and/or
- The MoH considering there are equity ramifications relating to known cases or clusters, and population groups or communities, that may be at particular risk or otherwise vulnerable
- a District Health Board (DHB) increases its alert level under the National Hospital Response Framework; and/or
- any other relevant information, including other risk factors, changes in characteristics of the virus, clinical presentation of cases etc.

Effective delivery of this plan is dependent on Public Health Response Orders (the Order) and the timely, appropriate and detailed exchange of required information between parties.

Key responsibilities

The National Response Leadership Team (NRLT) is responsible for leading the COVID-19 Response and ensuring the broader system of Government is prepared and able to execute a response to any risks posed by COVID-19. It provides clear strategic direction, coordination, assurance and support.

It is expected that responsible agencies will prioritise their efforts on the COVID-19 response, including readiness activities. The National Response Group (NRG) is responsible for operationalising taskings from NRLT and enabling broader system activation in the event of a resurgence.

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Ashley Bloomfield (DG, Ministry of Health)

Cheryl Barnes (DCE, COVID-19 Group)

Una Jagose (Solicitor General)

Andrew Coster (Commissioner of Police)

Caralee McLiesh (CE and Secretary to the Treasury)

Carolyn Schwalger (CE, National Emergency Management Agency)

Christine Stevenson (CE, Customs – Quarantine Free Travel) (QFT)

Carolyn Tremain (CE, Ministry of Business, Innovation and
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Graham MacLean (NRG Chair, DPMC)

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Roger Ball (NEMA)

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~~**This plan is not for Public Release or wider
distribution.**~~

Please contact

s9(2)(a) [REDACTED] for any
comments, suggestions or corrections.

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Document version control

This document was last updated on 16 April 2021. It is document version 2, Quarter 2 2021.

From April 2021, in addition to ad-hoc updates made in response to emerging developments, this document is on a *quarterly review cycle*. The next update can be expected in July 2021, for Q3 2021.

Version history

Version	Author	Date	Summary of Changes
2 (Q2, 2021)	Graham MacLean, DPMC	16 April 2021	Significant rewrite of documentation to simplify processes and structure.
1 (Q4, 2020)	Graham MacLean, DPMC	December 2020	Initial version of document created to support the management of potential cases during Summer 2020/21, titled the 'Summer Resurgence Plan'

What's changed in this version of the document?

Page	Section	Content changes or actions
N/A	N/A	<p>In March 2021, this document underwent a significant rewrite. This included the redrafting of large portions of the plan, a restructure of the plan, and the introduction of diagrams and visual aids to support readability.</p> <p>Alongside changes to support readability, other changes include:</p> <ul style="list-style-type: none"> Guidance regarding the activity to be undertaken under the key phases of this plan has been updated in accordance with lessons learnt from the latest resurgence. This includes standard operating procedures (SOPs). Addition of Quarantine-Free Travel (QFT) Zone Plan 'Workstreams' was renamed to the COVID-19 Senior Officials Group. <p>In future, any significant changes to Version 2.0 will be outlined in brief on this page, to allow readers to quickly identify any changes from previous versions.</p>
In consultation with:		<p>Ministry of Health (MoH)</p> <p>The following agencies have been consulted on the roles and responsibilities included in Annex 6: National Emergency Management Agency (NEMA), Ministry of Business, Innovation and Employment (MBIE), New Zealand Police (Police), Ministry of Transport (MoT), Te Arawhiti, New Zealand Customs Service (Customs), Ministry of Primary Industries (MPI), Ministry of Education (MoE), New Zealand Defence Force (Defence), Public Service Commission, Ministry of Social Development (MSD), Ministry of Foreign Affairs and Trade (MFAT), Fire and Emergency New Zealand (FENZ), Te Puni Kokiri, Department of Corrections (Corrections), and the Department of Internal Affairs (DIA).</p>

How will this plan evolve?

As the COVID-19 response continues to progress, this plan will be updated with additional information that underpins the wider COVID-19 response.

Future iterations are likely to include additional detail for agencies involved with implementing the plan, such as operational details. Content we are currently considering for inclusion in future versions includes:

- Wiring diagram to show the relationship between key groups and leadership structures.
- Additional detail in the phasing diagram, such as Cabinet paper drafting processes.
- Consideration of how the COVID-19 Vaccination & Immunisation Programme informs the NRP.
- Further discussion about QFT and how this affects the NRP, including references to National Focal Points for information sharing purposes.
- Consideration of the refreshed Elimination Strategy and how this will impact on New Zealand's overarching COVID-19 response mechanisms.
- Updated roles and responsibilities for Government Agencies considering changes to the COVID-19 context, particularly QFT and the vaccination programme.

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1. About this document

1.1. What is the National Response Plan?

The National Response Plan (NRP) is a framework to deliver a nationally led, regionally delivered, response to a resurgence of COVID-19 cases within the community. It supports New Zealand public sector agencies to respond to future outbreaks and provides assurance of the response framework.

The plan has been developed by the Department of Prime Minister and Cabinet's (DPMC's) COVID-19 Group, in consultation with MoH and other agencies involved in the response (listed on page 7). It has been developed in support of New Zealand's national COVID-19 strategy:

To eliminate COVID-19 from New Zealand until a vaccination programme is implemented, or the virus attenuates sufficiently to be managed in other ways.

All plans to respond to a resurgence of cases have been developed within the following scope:

- To align DPMC planning with the MoH COVID-19 Resurgence Plan;
- Within the remit of the roles and responsibilities of DPMC related COVID-19 response bodies (National Response Leadership Team, National Response Group and COVID-19 Senior Officials Group) in the response;
- To ensure agency plans support the wider system response; and
- The roles and responsibilities of the Regional Leadership Groups and Civil Defence Emergency Management Groups, to enable coordinators to respond to a resurgence, with Regional Leadership Groups providing a leadership role.

1.2. What objectives guide our response?

Six national objectives guide New Zealand's COVID-19 response:

1. **Enable effective decision-making and governance:** Provide representation to, and support the operation of, governance and decision-making structures, as appropriate.
2. **Enable effective and coordinated support to the COVID-19 health system response:** Support the MoH, District Health Boards (DHBs), Public Health Units (PHUs) and community providers to achieve the required COVID-19 related health outcomes.
3. **Coordinate efforts to contain COVID-19 by enabling effective national and regional mechanisms:** Establish effective coordination mechanisms, processes, and structures between agencies and stakeholders.
4. **Coordinate support for communities (including business) to minimise the social & cultural, and economic impacts:** Partner with support agencies to identify and meet community needs where there are no other means of support.
5. **Coordinate and align COVID-19 communications and engagement and local implementation of public information management requirements**

- a. Messaging and strategic communications will be nationally led by the COVID-19 Group.
 - b. Public health messaging is generated and led by MoH, in partnership with the COVID-19 Group.
 - c. Other messaging is generated by the appropriate agency.
6. **Support and contribute to intelligence processes:** Facilitate the flow of information through agreed AOG reporting processes; including, where necessary, supporting other agencies in the efficient sharing of information.

1.3. Who is this plan for?

This plan is a guide for decision makers involved with the Government's COVID-19 response. It acts as an assurance mechanism for Ministers and senior officials and contains guiding elements that can be drawn on by other government employees involved with the response.

1.4. How does it fit with other agencies' plans?

Agencies have their own COVID-19 plans in place. These have informed the NRP.

Agencies' plans have been developed based on the national objectives outlined above. The plans include advice on business-as-usual activity during the global pandemic, as well as additional activity required in the event of a resurgence. The plans include national and regional elements.

The NRP will be activated in parallel with the MoH COVID-19 Resurgence Plan once one or more triggers occur.

This document should be read in conjunction with the MoH COVID-19 Resurgence Plan at Annex 1. The two plans are complementary and should not be read in isolation from each other.

2. COVID-19 in New Zealand

COVID-19 first emerged in New Zealand on 28 February 2020 through a case imported via international travel. As part of the national response, a four-tiered Alert Level system was introduced by the Government on 21 March 2020 to restrict movement and control the spread of COVID-19.

With an increasing risk of widespread community transmission, the Government placed New Zealand into Alert Level 4 – the highest level of alert - which effected a nationwide lockdown on 25 March 2020. This remained in place for four weeks, and since this time the country has moved Alert Levels as guided by science and control methodologies.

2.1 Elimination strategy

New Zealand’s current national COVID-19 strategy is to eliminate COVID-19 from New Zealand until a vaccination programme is implemented, or the virus attenuates sufficiently to be managed in other ways.

The Government has adopted a sustained approach to “keep it out, prepare for it, and stamp it out and manage the impact”. This is achieved through several mechanisms such as controlling entry at the border, physical distancing and hygiene measures, and testing and tracing all potential cases, among other measures.

2.2 New Zealand’s Alert Level System

Alert Levels are a key mechanism for controlling the spread of COVID-19. There are four Alert Levels, each of which have a set of measures that are implemented to respond to the risk of COVID-19 in the community.

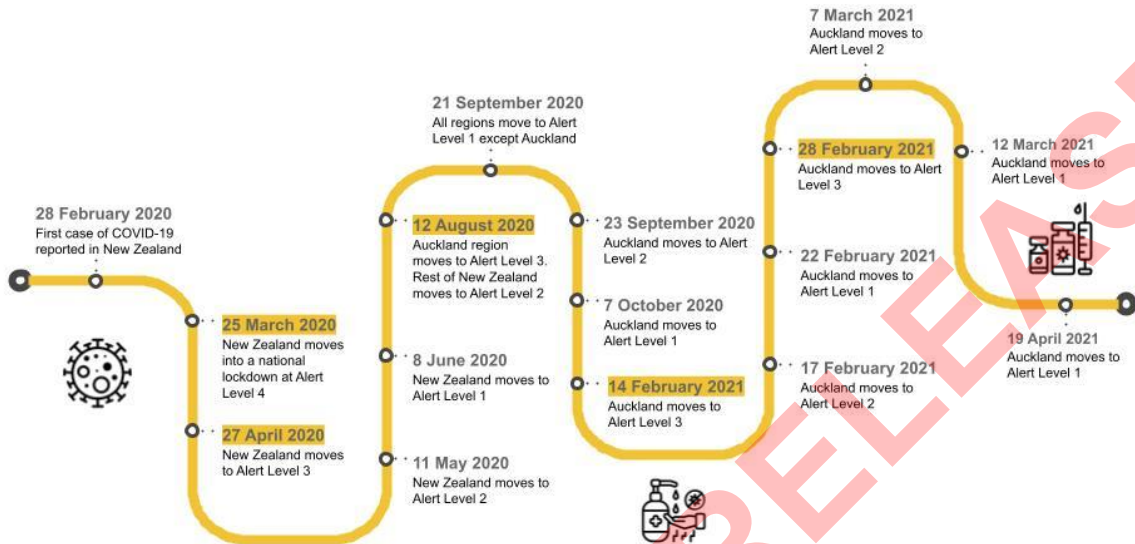
New Zealand COVID-19 Alert Levels	
Level	Description
Level 4 - Lockdown	Likely the disease is not contained.
Level 3 - Restrict	High risk the disease is not contained.
Level 2 - Reduce	The disease is contained, but the risk of community transmission remains.
Level 1 - Prepare	The disease is contained in New Zealand.

Transitioning through the Alert Levels is one of the most important tools that the Government has to manage the COVID-19 response. Cabinet will make decisions about which regions move up or down Alert Levels based on the advice provided by a number of Government agencies. This is facilitated through use of a checklist which is passed to National Response Leadership Team (NRLT), which is further informed by the National Response Group (NRG). This checklist is a key aspect of the plan and is included as Annex 3.

2.3 Timeline of previous outbreaks

Over the past 12 months Cabinet has transitioned through the Alert Levels at both national and regional levels. A view of outbreaks and Alert Level changes is outlined below.

Outbreak timeline



2.4 Lessons identified from previous outbreaks

Reflecting on the lessons learnt is important for continuous improvement in our COVID-19 response.

Several key learnings have been identified over the past 12 months, and with each outbreak there are further lessons learned. Key learnings from outbreaks over this period include:

- Public compliance has reduced over time, however evidence showed that overall, the broader population still comply with compliance measures.
- Concern that foreign nationals waiting for rescheduled flights were stranded overseas and there was confusion with the designation of this responsibility. A number of individuals required assistance with welfare services such as food or housing.
- Early engagement between agencies regarding policies or decisions that have an operational impact is critical.
- The importance of clear communications to the wider population, with a focus on providing people with as much notice as possible to allow for a smooth transition between Alert Levels, as well as for future safe travel zone partners.
- The importance of engaging equity focused mechanisms, and the positive results achieved when this is practiced.
- The importance of clear communications to non-English speaking public.
- That improvements are required to the search mechanism on the COVID-19 website, so the vast amount of information available through that portal is more coherent and easily accessible to the public.

- That designating agency points of contact allows efficient liaison and communications.
- There is public coherence with the COVID-19 transport messages, with transport agencies receiving fewer queries from the public during the recent resurgence.
- That traffic congestion was an issue faced by many around the Auckland boundary during the February 2021 lockdown which poses a potential health risk, and occasionally, the public misunderstood what was encountered at the boundary.
- The evaluation of border controls (inward and outward) to enable minimal impact on returnees.

Specific challenges relating to communications and engagement have been noted and arose during the national lockdown, and in relation to the regional outbreaks in Auckland. Challenges include:

- Working at pace;
- Clearly communicating while policy and response are still evolving (e.g. boundaries, exemptions, financial support, QFT etc);
- Being coordinated and integrated in our All-Of-Government (AOG) response so everyone in New Zealand gets the information and support they need;
- Sharing correct up-to-date information between government agencies;
- Appropriately countering misinformation and disinformation;
- Dealing with anxiety and uncertainty about the duration of COVID-19; and
- Identifying demographics of audiences in resurgence areas and providing for- purpose information to them (eg. information needs, translations, channels etc).

There is an evolving question about what the COVID-19 response will look like considering the COVID-19 vaccine rollout, and the impact this could have on compliance from the public once they receive their vaccine.

2.5 Equity considerations

The Equity focus across the COVID-19 Response is based on strong collaboration and clear objectives. Each function area has a specific Equity focus and measurable goals within functional consolidated plans that convert intent into positive actions to address inequity throughout the delivery of the COVID-19 Response.

3. Governance and decision-making

Governance and decision making occurs at both a national level and a regional level. The groups that inform the response at a national level are also supported by other mechanisms across the system.

3.1 National coordination

Cabinet has agreed to governance and decision-making structures to support the broader COVID-19 response. The role of these groups is outlined further in this section. Groups or individuals that play a key role within the COVID-19 response include:



Cabinet or Ministers with the Power to Act

As the ultimate decision makers within the system, Cabinet or a Ministers with the Power to Act are responsible for setting the direction for the system response. Cabinet may choose to delegate decision making authority to a Ministers with the Power to Act where it is not necessary for all of Cabinet to meet and make a decision, such as over a holiday period.



National Response Leadership Team (NRLT) - Domestic

Responsible for leading the COVID-19 Resurgence Response by providing clear strategic direction, coordination as required, assurance and support. NRLT will ensure that the system of government is prepared and able to execute a response commensurate with the nature of the resurgence.

NRLT will meet when a community transmission has been confirmed by MoH. There may be situations where the NRG meet prior to NRLT, particularly in relation to early notification.



NRLT – QFT

Although membership is largely the same as NRLT for domestic issues, the NRLT QFT group will meet where a response is required specifically for an event that relates to the QFT Zone. Roles and responsibilities for this group remain the same despite the added focus on the QFT.



National Response Group (NRG)

NRG will prioritise and triage taskings from NRLT. NRG will provide decision makers with advice, reporting where required and information flows to local and operational levels of the response. NRG will act as the coordinator of the operational and strategic systems.



COVID-19 Senior Officials Group (C-19 SOG)

This group brings senior representatives from across the system together on a regular basis to provide a single point for information about the response. This group includes specific workstreams, as well as agency representatives that support across a number of areas and

mobilise the response system when required. C-19 SOG is chaired by the Head of Readiness and Planning at DPMC.

Workstreams aim to:

- Better support coordination efforts;
- Facilitate the sharing of information;
- Enable a consistent approach in responding to a concurrent emergency; and
- Act as an assurance mechanism.

By bringing agencies into one room there is an enhanced readiness to respond to a resurgence of COVID-19 in a coordinated and efficient manner. This group is responsible for coordinating the response, tasking other agencies, commissioning specific pieces of work, and reporting back on progress and issues across the system.

During business-as-usual periods the COVID-19 Senior Officials Group will meet as and when required to ensure readiness to respond across the system is maintained, and risks to the system are identified and mitigated. Attendance at the C-19 SOG will vary depending upon the situation and associated context.

3.2 Regional coordination

Each region throughout New Zealand has a regional resurgence plan that is tailored to their community and locality. These plans outline governance structures and operational coordination mechanisms between the DPMC COVID-19 Group, Regional Leadership, agencies and key stakeholders. Where necessary, regional PHUs will provide support also.

The regional response will depend on the health orders that have been implemented at the time.



Regional Leadership Groups (RLG)

These groups provide executive oversight of a response in a region. These groups form part of the governance layer to provide assurance and as a result RLGs are not responsible for managing the response. Roles and responsibilities for different agencies will vary depending on the region.

The role of RLG is to:

- Communicate and influence the strategic direction to support the operational response at a regional or local level.
- Exercise oversight, assign resources, and may impose constraints (e.g. deadlines, cost and resource limits).
- May also act as a spokesperson.



Regional Group Coordination

The Civil Defence Emergency Management (CDEM) Group Controller is responsible for coordinating the response and is appointed by the CDEM Group. They undertake their legislative role to coordinate regional responses to emergencies. CDEM Group Controllers will establish coordination structures and facilities as required as part of regional group coordination.

CDEM Groups exist across New Zealand as committees of elected councillors from each council that has regional boundaries. In total, there are 16 CDEMs throughout the country.

Each CDEM group must establish and maintain a Coordinating Executive Group (CEG) comprising of chief executives of the local authority, members of the CDEM Group, chief executives of DHBs, and senior members of NZ Police, and Fire and Emergency New Zealand. CEGs may also co-opt in additional members such as senior ambulance services, Defence, and Iwi representatives.

The CDEM group delivers through executives, planners, and operational staff who are all involved in the CDEM. As a consortium of the local authorities in a region, CDEMs work with emergency services, lifeline utilities, and agencies to:

- identify and understand hazards and risks
- prepare CDEM Group plans and manage hazards and risks in accordance with the 4R's (reduction, readiness, response, and recovery).

CDEM Groups coordinate emergency responses in their region through Emergency Coordination Centres (ECC). ECC operate under a Coordinated Incident Management System (CIMS) structure and is led by a Group Controller who are appointed by CEG.

3.3 Other coordination mechanisms

Across the system there are several other mechanisms that support the broader system to respond:



Coordination across Government Agencies

A number of Government Agencies provide support as part of a coordinated response. The immediate response is led by DPMC and MoH, with other key agencies including MBIE, NZ Customs, Ministry of Transport, NZ Police and MFAT. All agencies are responsible for providing central coordination as part of New Zealand's government response to COVID-19. They are responsible functions of the science based, Public Health led response, including the following:

- Policy and strategy;
- Communications and engagement;
- Risk and assurance;
- Reporting and insights; and
- System readiness and planning



Broader System Governance

Other layers of Governance that play a role in the decision making and implementation processes of the NRP across the wider Government system includes:

- DPMC COVID-19 Group
- Ministry of Health COVID-19 Directorate
- Deputy Chief Executive Policy Group (primarily an information sharing function)

The response structures and key roles for the different groups within this response are outlined below. Further responsibilities for each agency are outlined in Annex 6.

Resurgence Response Structures and Responsibilities

Decision Makers	System Leadership	System Activation	Operationalise system activation	Provide regional leadership to regional response	Respond based on direction from leadership
	National Response Leadership team (NRLT) - Domestic & QFT	National Response Group (NRG)	COVID-19 Senior Officials Group (SOG)	Regional Leadership Groups (RLG)	Regional Group Coordination
Cabinet OR Ministers Board	<p>Agencies involved</p> <ul style="list-style-type: none"> CE DPMC Director General Health DCE COVID-19 Group, DPMC Solicitor General Commissioner of Police Secretary of Treasury CE National Emergency Management Agency CE Customs (QFT) CE MBIE (MIQ) NRG Chair <p>Additional QFT Group Members</p> <ul style="list-style-type: none"> CE Ministry of Transport CE Ministry of Foreign Affairs and Trade 	<ul style="list-style-type: none"> DPMC COVID-19 Group Planning and Operations Lead DDG COVID-19 Directorate, MoH NZ Police MIQ representatives NEMA DPMC Caring for Communities Lead DPMC Strategy and Policy Lead DPMC Communications lead Deputy Secretary, Treasury Deputy Chief Executive, DIA 	<p>Workstreams</p> <ul style="list-style-type: none"> Quarantine Free Travel Workstream Concurrent Events <p>Agencies</p> <ul style="list-style-type: none"> Caring for Communities (C4C) DPMC COVID-19 Groups Ministry of Health National Emergency Management Agency Ministry of Business, Innovation and Employment New Zealand Police Ministry of Transport Te Arawhiti New Zealand Customs Service Ministry of Primary Industries Ministry of Education New Zealand Defence Force Public Service Commission Ministry of Social Development Ministry of Foreign Affairs and Trade Fire and Emergency New Zealand Te Puni Kokiri Department of Corrections Department of Internal Affairs 	<ul style="list-style-type: none"> Established and set up differently in each of the 16 regions. RLGs reflect the nature, geography and character of their region RLGs usually involve Iwi, central government, Pasifika and other community leaders 	<ul style="list-style-type: none"> CDEM Group controller provides mechanisms and processes for regional coordination across agencies and stakeholders.
	<p>Primary roles and activities</p> <ul style="list-style-type: none"> Provide advice to Cabinet. Provide non-health advice to the Director General for Health. Provide decision making, reporting and information flow to the wider system. Engaging the National Response Group and commission tasks. Activating the relevant regional leadership groups. 	<ul style="list-style-type: none"> Prioritise/triage tasks given by the NRLT. Provide decision making, reporting and information flow. Establish response group and command structure. Allocate resources and coordinate efforts across the system. Report back to the NRLT. 	<ul style="list-style-type: none"> Integration of agency activities to respond to direction from decision-makers. Coordination of standard agency actions. Identification of wider issues that arise directly from COVID-19. Identification and resolution of specific issues for which no single agency is responsible. 	<ul style="list-style-type: none"> Guide regional resurgence plans with clear roles and responsibilities. Develop standard operating procedures. 	<ul style="list-style-type: none"> Develop regional resurgence plans. Develop standard operating procedures.

National

Regional

DPMC COVID-19 Group

Ministry of Health

(DHB/PHUs, Wider Health and Disability Sector)

4. Key phases of the NRP

4.1 Overview

There are four main phases of the NRP:

1. Notification, risk assessment, & readying the system;
2. Immediate response;
3. Sustained response; and
4. De-escalation.

The diagram over the page outlines the key steps under each of the phases. Commentary which follows provides further information on each of the response phases. SOPs under each of the phases are set out in Annex 4.

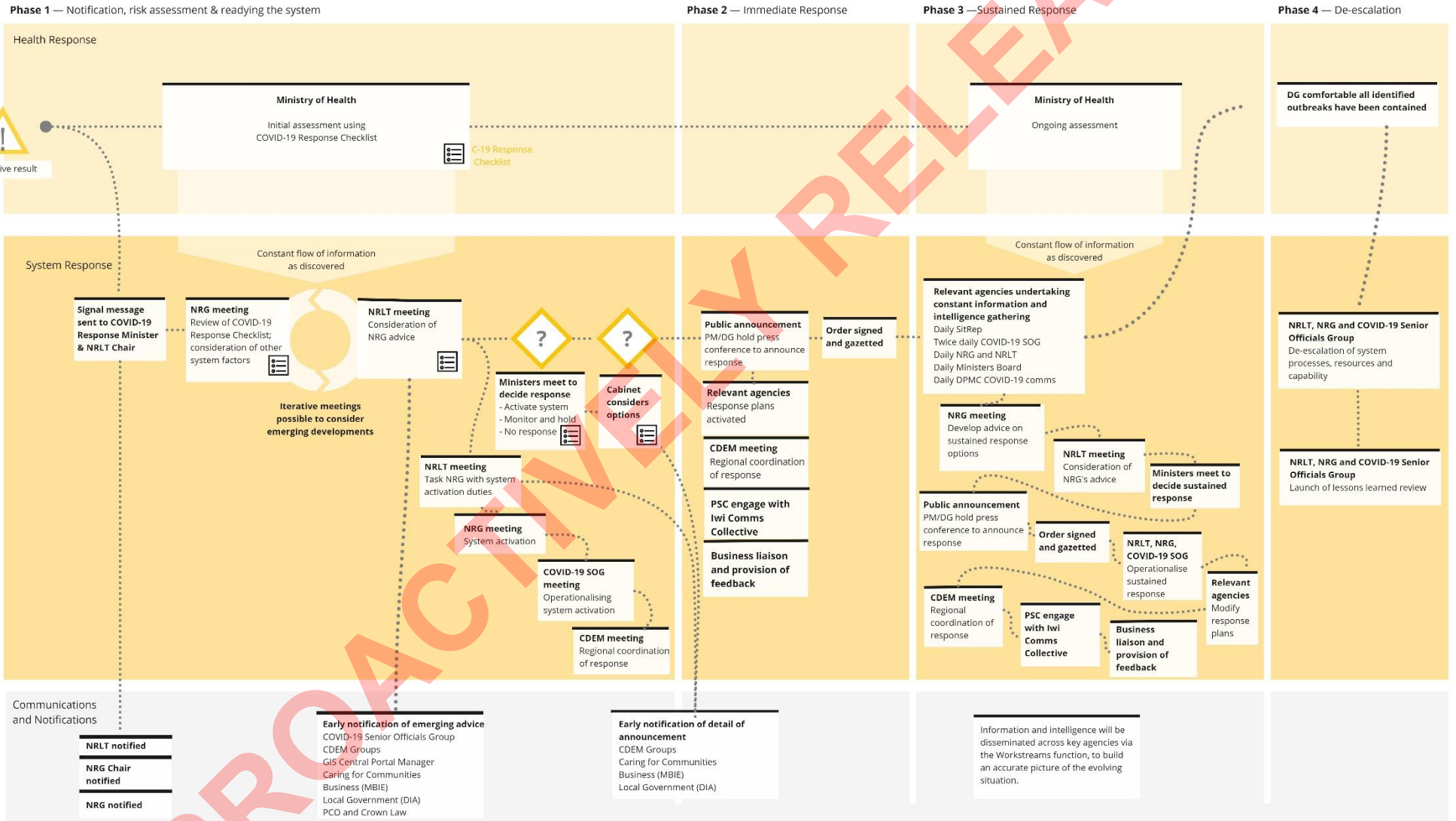
The steps represent current best practice based on lessons learnt from earlier responses. In practice, there may be reasons why the sequencing, or the steps themselves, differ (e.g. the risk presented necessitates alternative approaches).

When a response is underway, the key steps take place within a short timeframe. For example, many steps in Phase 1 occur less than 60 minutes from the action previous.

Outside of these phases, a range of activities are carried out to ensure the system is ready to respond to a resurgence, including:

- developing, testing, and refining the NRP and associated plans and processes (e.g. the notification process);
- ongoing tabletop exercising (simulations and scenario testing) with all agencies;
- ongoing inter-agency insights and information exchange, providing indications and warnings and a method to learn from domestic and overseas experience;
- continuous improvement, adapting to the latest technology, and emerging science to understand the virus behaviours;
- community support arrangements and funding;
- identification and readiness of personnel to contribute to surge demands;
- development of appropriate a public communications system with pre-agreed messaging; and
- business continuity planning (BCP), including BCP's developed to manage concurrent emergencies.

Phases of NRP – Health and System Response



4.2 Phase 1: Notification, risk assessment, & readying the system

Phase 1 begins with the identification of a positive result with risk of community transmission. At this point MoH begin undertaking an initial assessment, using the COVID-19 Response Checklist (Annex 3 refers). The assessment considers key risk assessment indicators for shifting Alert Levels (for example, whether there are community cases where we cannot identify a source). It also includes public health considerations (for example, source; movement and exposure events; vulnerable groups or communities at risk).

Upon hearing that there is a positive result with risk of community transmission, a ^{s9(2)(b)(ii)} message is sent by the Senior Responsible Officer (SRO) to the Director General of Health (DG). The DG then communicates this information to the COVID-19 Response Minister and the NRLT Chair. The NRLT Chair in turn notifies NRLT as well as the NRG Chair, who notifies NRG.

Soon after the ^{s9(2)(b)(ii)} message is received, NRG meet to consider the COVID-19 Response Checklist, including the factors considered by MoH (key risk assessment indicators for shifting alert levels and public health considerations) as well as additional system factors. These considerations help guide the appropriate actions for the response when new case(s) are found.

NRG's risk assessment and system recommendation – as set out in the Checklist – is formally reported in a meeting of NRLT.

Depending on the circumstances, NRG and NRLT may hold subsequent meetings to consider emerging developments, updating the Checklist as necessary.

Advice and recommendations arising from NRLT will be relayed to a number of parties to ensure they are ready to respond, including:

- COVID-19 Senior Officials Group
- CDEM Groups
- Geospatial Information Services (GIS) Central Portal Manager
- Caring for Communities
- Business (MBIE)
- Local Government (DIA)
- Parliamentary Counsel Office
- Crown Law

At the appropriate point, a Ministers with the Power to Act meeting will be convened to consider NRLT's advice and take decisions as to the appropriate way to proceed. They will consider whether to:

- Activate the Resurgence Response Plan; or
- Monitor; or
- Not activate the Resurgence Response Plan.

The Checklist which has been considered first by MoH, and then by NRG and NRLT once again is the formal reporting tool used with Ministers.

With the direction from the Ministers with the Power to Act meeting, NRLT and NRG will each meet again to consider what action is needed to operationalise decisions. In the event a decision has been taken to activate the Resurgence Response Plan the C-19 SOG will then meet to operationalise the response. Meetings of relevant CDEM Group Managers may also be held to keep them briefed on a rolling cycle.

Direction from the Ministers with the Power to Act meeting will be taken to Cabinet for consideration and ultimate decision making. The Checklist forms the foundation of the Cabinet paper.

4.3 Phase 2: Immediate response

A decision to activate the response plan will trigger the simultaneous activation of Phase 2, Immediate Response.

Under Phase 2, a public announcement regarding the case(s) and the details of the immediate response will be made and legal orders will be drafted.

Agency response plans will be activated, and broader liaison and engagement will commence. This includes PSC engagement with the Iwi Communications Collective, liaison with business and activation of regional support by CDEM groups.

4.4 Phase 3: Sustained response

The sustained response may include:

- widening or refining of containment measures; and/or
- managing the effects of disruptions and uncertainty caused by the response (for example, ongoing care for vulnerable persons and communities; provision of education services and support to business; and changes to international travel arrangements, such as a reduction in returnee numbers to increase domestic quarantine capacity).

Sustained response measures are dependent on the information and intelligence available.

Information and intelligence will be disseminated across key agencies via the C-19 SOG function, to build an accurate picture of the evolving situation.

Information and intelligence will be gathered and disseminated via:

- Daily MoH Situation Report (SitRep) updates
- Twice daily COVID-19 SOG meetings
- Daily NRG meetings
- Daily NRLT meetings
- Daily Ministers with the Power to Act meetings

On a daily basis DPMC COVID-19 Comms and the PMO will modify and implement communications. The PSC will consider workforce planning on an ongoing basis.

In order to develop the sustained response plan, NRG will develop advice for NRLT, who will then brief the Ministers with the Power to Act with support of the NRG Chair. The Ministers with the Power to Act decides on the sustained response plan, a public announcement is made, and legal orders are drafted.

Following Ministerial decisions, NRLT, NRG and COVID-19 are responsible for giving effect to the plan. Other agencies will be required to modify their response plans as appropriate.

Like Phase 2, broader liaison and engagement will commence including PSC engagement with the Iwi Communications Collective, liaison with business and activation of regional support by CDEM groups.

4.5 Phase 4: De-escalation of resurgence response

De-escalation of the resurgence response will commence 28 days after the last reported case of community transmission.

The SRO has oversight of the initiation of a move from response to deactivation and return to BAU. Working alongside NRLT, NRG and COVID-19 SOG, parties will commence de-escalation of system processes, resources and capability.

An important part of this Phase 4 is to plan and run a formal debrief, both within the Health response, and at the system level, spanning NRLT, NRG and COVID-19 SOG.

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5. Legal framework

There are several pieces of legislation that provide the legal framework for New Zealand’s response to COVID-19. This section provides an overview of the relevant legislation.

5.1 COVID-19 Act

Under the COVID-19 Public Health Response Act 2020 (the COVID-19 Act), the COVID-19 Response Minister and the DG have the power to make Public Health Response Orders (Orders) to achieve the purposes of the COVID-19 Act.

These are independent statutory decision-making roles, noting that the Minister is required to consult with the Prime Minister, the Minister of Health, and the Minister of Justice before making an Order. However, Orders are required to be approved by a resolution of the House and are revoked if not approved.

The COVID-19 Act provides the primary legal authority for imposing the restrictions or requirements that are necessary to give effect to an Alert Level decision.

This Act contains a repeal mechanism, requiring it to be regularly extended by a resolution of the House for it to remain in force. Since enactment, the COVID-19 Act has been extended every 90 days. If the COVID-19 Act continues to be extended by this mechanism, it will be repealed in May 2022, two years after its date of commencement.

5.2 Health Act

The Health Act 1956 (the Health Act) provides special powers to a medical officer of health in relation to an infectious disease, and measures that are necessary for the management of infectious disease.

COVID-19 is an infectious disease, as listed in Schedule 1 of the Health Act. This categorisation, together with authorisation by the Minister of Health, a declaration of a state of emergency, or where an epidemic notice is in force, permits a medical officer of health to exercise the special powers under section 70 in relation to COVID-19.

Contact tracing is also undertaken pursuant to the Health Act, establishing the scope of what this involves, the duty of individuals to provide information for that purpose and the confidentiality requirements.

5.3 Immigration legislation

Entry to New Zealand is managed under the Immigration Act 2009 (the Immigration Act). Under the Immigration Act, persons other than New Zealand citizens must hold a visa to travel to and be in New Zealand, and the Minister of Immigration may issue immigration instructions, controlling the circumstances in which visas may be granted. New Zealand citizens do not require a visa to enter New Zealand, and entry restrictions cannot be applied to New Zealand citizens under the Immigration Act.

s9(2)(h)

[Redacted text block]

To prevent, or limit the risk of, an outbreak or spread of COVID-19, those persons that are permitted to enter New Zealand are then subject to the requirements of either the:

- COVID-19 Public Health Response (Air Border) Order (No 2) 2020; or
- COVID-19 Public Health Response (Maritime Border) Order (No 2) 2020.

Where individuals are required to enter managed isolation or quarantine, whether from entry into New Zealand or as a result of community transmission, those persons are subject to the COVID-19 Public Health Response (Isolation and Quarantine) Order 2020. The recovery of charges relating to managed isolation or quarantine is prescribed by the COVID-19 Public Health Response (Managed Isolation and Quarantine Charges) Regulations 2020.

5.4 Enabling legislation

Under the COVID-19 Act, Orders may be made where one or more of the following prerequisites is in force:

- An epidemic notice under the Epidemic Preparedness Act 2006;
- A state of emergency or transition period under the Civil Defence Emergency Management Act 2002; and/or
- If the Prime Minister has authorised the use of COVID-19 orders by notice in the Gazette.

Epidemic notices

As well as being listed as an infectious disease under Schedule 1 of the Health Act, COVID-19 has also been classified as a quarantinable disease under that Act. The classification as a quarantinable disease permits the Prime Minister to declare, by way of an epidemic notice under the Epidemic Preparedness Act 2006, that COVID-19 is likely to disrupt or continue to disrupt essential governmental and business activity in New Zealand.

While an epidemic notice provides a prerequisite for the COVID-19 orders to be issued, it also provides special powers which allow for the amendment of primary legislation by the executive branch, to enable the effective management of serious outbreaks of disease. This bypasses the usual law-making process of Parliament to facilitate rapid legislative changes required in response to the risk, or outbreak, of COVID-19.

On Monday 23 March 2020, an Epidemic Notice under section 5 of the Epidemic Preparedness Act 2006 was issued. This was based on advice received from the DG in response to the increasingly complex and far-reaching introduction of COVID-19 to the New Zealand community.

The Epidemic Notice (Notice) issued on 23 March 2020, pursuant to section 7 of the Epidemic Preparedness Act 2006, has been continually renewed. Each Notice lasts for three months, unless the Government chooses to lift it earlier, and it can be further extended if required.

State of emergency

Complementary to the powers under health legislation, it is possible for the Minister of Civil Defence to declare a state of national emergency under the Civil Defence and Emergency Management Act 2002. On 25 March 2020, a State of National Emergency was issued, which ran until 13 May 2020. This unlocked a range of powers which enabled Police and other authorised persons to:

- Restrict access to roads and other public places;
- Remove or secure dangerous structures, materials, vehicles, or vessels;

COVID-19 NATIONAL RESPONSE PLAN

- Provide rescue, first aid, food, and shelter;
- Conserve essential supplies;
- Dispose of human or animal remains;
- Evacuate premises or places, or enter to rescue people or save lives; and/or
- Requisition equipment and materials.

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6. Communications and engagement

Trusted communication and engagement with the public and stakeholders are essential to an effective response. The DPMC COVID-19 Group leads transparent, consistent, prepared messaging and strategic communications at a national level, while regional agencies have a critical role in amplifying this messaging and targeting consistent messaging where required.

SOPs support the operationalisation of the framework at the national level. The following outlines the mechanisms through which communication and engagement activities are coordinated. The exact nature of the arrangements will vary depending on the situation.

6.1 Communications objectives and mechanisms

Communication Objectives

- Maintain and build public confidence in official sources of COVID-19 information;
- Ensure everyone in New Zealand knows what to do;
- Ensure everyone in New Zealand and businesses know where to get support;
- Motivate public to use key behaviours, counter misinformation and apathy, and other barriers to effective communication;
- Build integration and assist with resolving problems; and
- Build economic, psychosocial and social resilience.

Content channels

- Unite Against COVID-19 website, social media (Facebook, Instagram, LinkedIn, Twitter), radio, YouTube, billboards, newspapers, media etc; and
- Partner and stakeholder public-facing channels and networks.

Key Audiences

- General public;
- Māori;
- Pacific Peoples;
- Culturally & linguistically diverse communities (CALD);
- Returnees to New Zealand;
- Frontline Managed Isolation and Quarantine (MIQ) and border workers & their families;
- Port workers and seafarers;
- Businesses & business associations;
- Immuno-compromised people;
- Young people;
- People with disabilities;
- Older New Zealanders;
- Marginalised people;
- People financially impacted by COVID-19 or already unemployed;
- Public service including;
- Frontline teachers and workers;
- People susceptible to misinformation;
- People experiencing addiction and other mental health issues;
- Families with children & shared care;

- People running events (needing Quick Response (QR) codes); and
- Inbound travellers (QFT or otherwise).

6.2 Communications partners and stakeholders

DPMC COVID-19 Communications and Public Engagement (C&PE)

The DPMC COVID-19 Group C&PE coordinates and aligns COVID-19 communications and engagement via transparent, consistent, prepared messaging and strategic communications at a national level.

Coordination mechanisms include:

- hosting regular email, tele or video conferences/huis with key agencies/groups as appropriate.
- working with NEMA to activate the Emergency Mobile Alert or Emergency Memorandum Of Understanding as appropriate.
- working in partnership with the 'iwi comms network' and other iwi/ Māori organisations.
- working to develop tailored communications with agencies with expertise and reach across culturally and linguistically diverse communities such as the Ministry for Pacific Peoples, and the Office of Ethnic Communities.
- working at all levels to partner with iwi and Māori including engaging regularly with Te Puni Kōkiri, Te Arawhiti and Te Taura Whiri; working with the iwi communications network; and working through the Caring for Communities (C4C) workstream to engage regularly with iwi chairs.
- coordinating national level communications and engagement planning for emerging issues.
- providing key messages (including those for the Prime Minister, Ministers, Members of Parliament, DG, elected members and national spokespeople).
- providing Unite Against COVID-19 branded campaign, collateral and digital content (including content in non-English languages and alternative formats).
- inputting into national level strategic decision-making and policy formation.
- working with national level media, including supporting national level media stand-ups.

MOH

The MOH is the lead agency responsible for producing health messaging. It:

- provides health oversight and input of communications and engagement activities across the response.
- works with DPMC COVID-19 C&PE as the situation develops to align messages including national level media.
- engages with the health sector and stakeholders.

Iwi and Māori

Partner with the DPMC COVID-19 C&PE group to coordinate and align COVID-19 communications with Māori requirements. Coordination mechanisms include:

- hosting regular email, tele or video conferences/huis.
- working to develop tailored communications.
- engaging regularly with Te Puni Kōkiri, Te Arawhiti and Te Taura Whiri.

- working with and via the iwi communications network.
- working through the C4C workstream to engage regularly with iwi chairs.
- adapting Unite Against COVID-19 branded campaign, collateral, messaging and digital content for affected communities, as required.

National level and government agencies

Each agency is responsible for producing messaging for all the functions for which it is the lead. Each agency:

- works with DPMC COVID-19 C&PE to align messaging.
- engages with its own sectors and stakeholders.
- provides effective internal communication to staff.

Regional and local government

Each Territorial Authority (TA) is responsible for meeting communications and engagement needs at the regional/local level in a way that is aligned with and amplifies national level messaging. Each TA:

- relays insights about regional/local communications needs and issues to DPMC COVID-19 Group C&PE as needed through regular email, tele or video conference.
- seeks support from DPMC COVID-19 C&PE as needed to ensure their communities and stakeholders have access to appropriate 'Unite Against COVID-19' branded collateral.
- supports regional and local spokespeople with consistent aligned messages.
- engages with regional and local media using aligned and consistent messages.
- provides information to stakeholders and communities within their area that is aligned to national messages and include additional regional and local level information as appropriate
- provides effective internal communication to staff.

Non-Government Organisation (NGOs), community organisations, faith-based groups

These organisations play a vital role in ensuring messaging reaches key audiences, in the right format and languages and provide insight into communications and engagement needs at the local level.

Each organisation:

- relays insights about regional/local communications needs and issues to either their representative national bodies or directly to DPMC COVID-19 C&PE as appropriate.
- can seek support from DPMC COVID-19 C&PE as needed to ensure their communities and stakeholders have access to appropriate 'Unite Against COVID-19'-branded collateral.
- provides information to communities within their area that is aligned to national messages and includes additional information as appropriate.
- provides effective internal communication to staff.

International and Trans-Tasman organisations

These organisations play a vital role in ensuring messaging reaches key audiences, in the right format and languages and provide insight into communications and engagement needs at the local level.

Each organisation:

- relays insights about regional/local communications needs and issues to either their representative national bodies.
- can seek support from DPMC COVID-19 C&PE as needed to ensure their communities and stakeholders have access to appropriate 'Unite Against COVID-19'-branded collateral.

- provides information to communities within their area that is aligned to national messages and includes additional information as appropriate.
- provides effective internal communication to staff.

6.3 **DPMC COVID-19 Resurgence Communications and Engagement Framework**

An overarching communications and engagement framework has been developed by the DPMC COVID-19 C&PE group. This guides the All-of-Government resurgence communications and engagement response will be led and operationalised by the DPMC COVID-19 C&PE group in the event of a resurgence. This framework is available on request.

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7. Boundary information

7.1 What are Alert Level Boundaries?

Alert Level Boundaries are a useful mechanism for restricting movement for public health reasons in the event of an outbreak/resurgence. We have seen boundaries utilised for resurgences in the past and they are a key feature of our ongoing COVID-19 response.

7.2 Learnings from previous outbreaks

Rather than relying on existing regional boundaries, a more nuanced approach to Alert Level Boundaries was adopted following the resurgence in August 2020.

Cabinet noted the following principles to determine boundaries for future outbreaks:

- boundaries are appropriate and proportionate to support a public health response to COVID-19 that prevents and limits the spread of COVID-19 (primary consideration);
- boundaries minimise the need for people to travel between areas at different Alert Levels to go to work, a place of learning, or to receive medical treatment;
- boundaries are practical and safe to enforce;
- boundaries minimise economic disruption to business and supply chains – e.g. ensuring businesses can continue to operate if safe to do so; and
- boundaries minimise equity impacts – e.g. access to life critical services such as food.

7.3 Updated Alert Level Boundary Maps

Alert level boundary maps have been developed using geospatial information systems, considering things like commuter movements, health risk, and access to critical services to minimise the number of people needing to cross a boundary. The maps are included at Annex 5.

There is also an ability to develop bespoke boundaries that would be appropriate and proportionate to a specific outbreak based on transmission information.

Consultation is underway on the Alert Level boundary maps, and it is anticipated that pre-planned maps will be available for some of the higher risk locations such as Auckland, Wellington, Christchurch, Hamilton and Rotorua, however, their use is not guaranteed and will depend on the public health risk at the time of the outbreak. Consultation will also be undertaken with regional groups to determine how boundaries will work in practice.

Final Alert Level boundaries will be determined by Cabinet, and subsequently published online.

Objective of Alert Level boundaries: minimise the risk of transmission while causing the least social and economic disruption

Step 1

COMMUTER FLOWS

Analyse commuter flows into and out of areas based on 2018 Census data and more recent population counts in Alert Level 1 from Stats NZ.



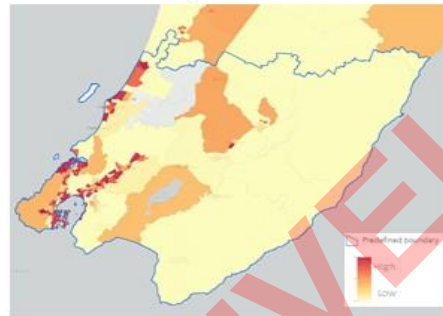
Example
This analysis of the commuter flow suggests the Wellington Region boundary could be extended to include the medium commuter area between Wellington and Levin. No further adjustments are suggested based on outward commuter data as there are only low or very low numbers of commuters out of Wellington region.

Step 2

COVID RISK FRAMEWORK

Overlay the Ministry of Health COVID Risk Framework. This includes four risk categories i) presence of undetected cases, ii) potential for exposure, iii) potential for transmission, and iv) poor health outcome.

The first risk category changes daily depending on community transmission. The later three are more static. They include things like MIQ location risk, demographics, socioeconomics, and healthcare. To create a set of predefined boundaries we use the latter three risk categories.

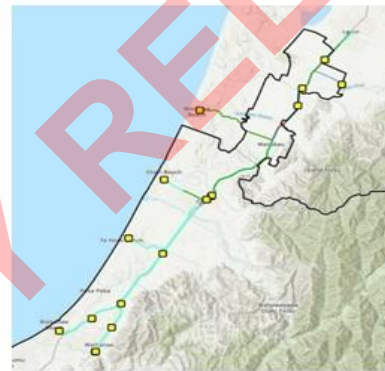


Example
Analysis of the three risk categories combined and individual risk categories suggested no further changes.

Step 3

ACCESS TO CRITICAL SERVICES

Assess the boundary's impact on access to critical services, along with economic and social impacts using data from MSD, NZDF, NZTA, MPI, Treasury and other agencies.



Example
Analysis of access to critical services suggests the Wellington Region boundary could be extended to include Waikawa because otherwise this community becomes isolated if the boundary is adjusted to account for commuter flow (step 1).

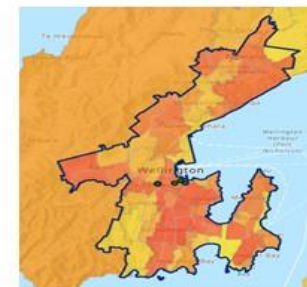
Step 4

ADJUSTMENTS

Make final adjustments to align with administrative boundaries, rivers, roads and so on enabling the boundary to be legally defined.

Boundaries can be adjusted for community transmission and the risk of undetected cases by adding in the first COVID Risk Framework category.

Localised boundary examples



Cabinet chooses the Alert Level boundary, and while we can suggest pre-defined Alert Level boundaries there is no guarantee these will be used.

Next steps: Further engage with key stakeholders. Refine as new data and information becomes available.

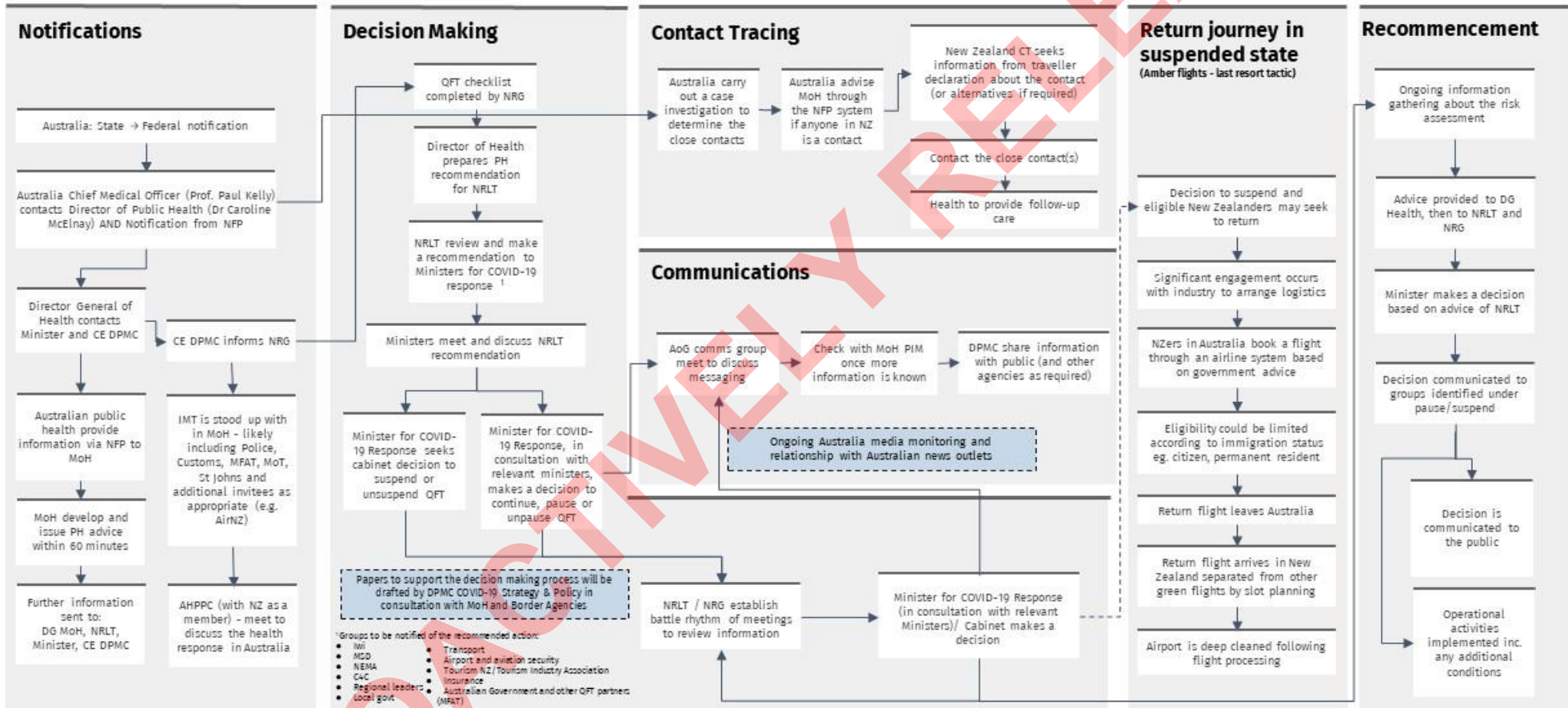
Annex 1: Ministry of Health Resurgence Plan

[Link to follow once plan is approved by MoH]

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Annex 2. Quarantine Free Travel (QFT) Processes and Information

System Process Map



Process for pausing, suspending and recommencing flights

QFT PAUSE: No QFT flights from affected state or states

At any stage where there is a COVID-19 outbreak, a pause might be put in place until more information is available to decide next steps.

What to expect:

- The Ministry of Transport will inform airlines of a pause decision as soon as information is available.
- Customs will inform airports of a pause decision as soon as information is available.
- QFT flights may continue from non-affected states.
- We expect air crew will be allowed to reposition.
- Following a pause, QFT flights might be allowed to recommence (potentially with additional measures) or there might be a longer-term suspension.

QFT RECOMMENCE: QFT flights operating

In a controlled COVID-19 outbreak, QFT might be allowed to continue.

What to expect:

- Ministers may put in place additional measures for a period, e.g. when travel recommences following a pause or suspension.
- The aim of additional measures is to be confident passengers are low risk before travel, to avoid spreading the risk. Measures might include pre-departure testing and additional screening questions (e.g. to determine passengers had not been in a higher-risk area).

QFT with additional requirements for a period

What does this mean in practice?

- The primary onus will be on the passenger to comply with requirements.
- Airlines will communicate information on additional requirements to passengers, linking to government communications (Unite against COVID-19 site).
- Airlines might be asked to update the pre-departure health and eligibility questions where possible (recognising constraints for updating electronic kiosks).
- Passengers may be subject to random compliance checks throughout the journey:
 - by New Zealand Customs officials on arrival. Passengers not complying may be subject to penalties.
 - by New Zealand airport liaison officers on departure. Passengers not complying would be unable to board.
 - Airlines might be asked to do "spot checks" on departure. Passengers not complying would be denied boarding.
- The baseline measures for QFT (enhanced cleaning, PPE) already account for heightened risk. These might be reviewed to check they are working as intended.

QFT SUSPEND: No QFT flights from affected state or states

If a COVID-19 outbreak is uncontrolled, QFT might be suspended for an extended period.

What to expect:

- QFT flights may continue from non-affected states.
- The default position is for people to shelter in place until QFT recommences. In most cases, we expect an outbreak will be brought under control within a reasonable period.
- Immigration requirements may change restricting entry to New Zealand.

Managed returns in exceptional circumstances

What we expect returns during a suspension would involve:

- Manual verification of passenger eligibility would likely be required at check-in.
- Passengers would likely need to be separated from green zone passengers (to avoid spreading the risk) and red zone passengers (to avoid exposing them to greater risk).
- Travel might be restricted to e.g. valid visa holders who left for Australia on a QFT flight.
- Passengers might be required to enter self-isolation (or managed isolation) on return.

What does this mean in practice?

- Managing returns in this scenario would involve identifying slots where passengers could be processed separately through the airport, with deep cleaning in between.
- Clear information on flight arrangements and additional eligibility requirements would be provided to travellers (Unite against Covid-19 website).
- The requirement for slot separation would limit the number of flights arriving per day.
- Lead time would be required to prepare.
- Officials would work closely with airlines and airports throughout the process.

Quarantine-Free Travel (QFT) How a COVID-19 case in Australia would be managed

When travelling to Australia, you'll need to keep track of the COVID-19 situation and play your part in stopping any spread back to New Zealand. We cannot predict when or how a new case might appear in any Australian state. But we do have a plan for how we'd handle a wide range of possible situations. While any response will depend on the circumstances, such as timing and location, it's useful to know what to expect. This is a guide to what might occur and what you could be asked to do in the event there are COVID-19 cases in Australia when you travel.

QFT CONTINUE	QFT PAUSE	QFT SUSPEND
<p>E.g. case linked to border – low risk of further transmission.</p>	<p>E.g. case of unknown source, but most likely linked to border. State enters short-term lockdown.</p>	<p>E.g. multiple cases of unknown source. State enters longer term lockdown.</p>
<p>What will happen?</p> <p><i>Flights to and from Australia likely to continue.</i></p>	<p>What will happen?</p> <p><i>Flights to and from affected state or states may be paused for up to 72 hours.</i></p>	<p>What will happen?</p> <p><i>Flights to and from affected state or states may be suspended for an extended period.</i></p>
<p>What do travellers do?</p> <p>Follow local health instructions. Keep a record of your movements. If unwell, stay home or in your accommodation. Get a COVID-19 test if you have any symptoms.</p>	<p>What do travellers do?</p> <p>Follow instructions from the state you are in. If unwell or have symptoms get a COVID-19 test. Watch for updates from your airline and check your travel insurance. When returning to NZ, travellers from affected state may be asked to:</p> <ul style="list-style-type: none"> • Get a pre-departure test before flying • Self-isolate and get a COVID-19 test • If you are returning from a state where travel has been paused you may go into managed isolation when you arrive in New Zealand. 	<p>What do travellers do?</p> <p>Follow instructions from the state you are in. If unwell or have symptoms get a COVID-19 test. Watch for updates from your airline and check your travel insurance. When returning to NZ, travellers may be asked to:</p> <ul style="list-style-type: none"> • Get a pre-departure test before flying • Self-isolate and get a COVID-19 test • If you are returning from a state where travel has been suspended you may go into managed isolation when you arrive in New Zealand.

Be prepared:

- This guidance may apply to one state or multiple states, depending on the cases.
- Register with SafeTravel before you leave.
- Check your travel insurance and ticket conditions.
- You may need to stay longer. Be aware additional costs and getting home is your responsibility.

What you should do

Follow official advice, download a COVID tracer app in the state you are in and keep an eye on Covid19.govt.nz

Annex 3. COVID-19 Response Checklist

Note: COVID-19 Response Checklist is currently under review and refinements will be made for Q3.

COVID-19 Response Checklist

1	2	3	4
NRG to complete upon notification of a High Risk Positive Case	Chair NRG to report this checklist to Chair NRLT	NRLT to assess and recommend course of action to Ministers Board meeting (pre-Cabinet)	The indicators and assessment questions covered in this checklist will form the basis of a shortened AL Cabinet Paper

Checklist A - Key Risk Assessment Indicators for Shifting Alert Levels

Questions	Assessment
1 Are there community cases where we cannot identify the source?	MoH Provide the assessment
2 Are there active clusters or outbreaks in multiple regions?	MoH Provide the assessment
3 Evidence of the effects of the measures on the economy and society?	TSY and MSD Provide the assessment
4 Evidence of the impacts of the measures for at risk populations in particular?	MSD Provide the assessment
5 Public attitudes towards the measures and the extent to which people and businesses understand, accept and abide by them?	MoH / DPMC* Provide the assessment
6 Our ability to operationalise the restrictions, including satisfactory implementation planning?	MoH / DPMC Provide the assessment
7 Is this case QFT related and if so what risk does this present to NZ Alert Level settings?	MoH Provide the assessment

Checklist B - Public Health Assessment

Consideration	Assessment
<p>8 Source: known/unknown/pending Rationale: Source can give us an indication of how many generations of transmission may have occurred before the identified case</p>	<p>Detail: Genome sequencing timelines Links to border/epidemiological link Likelihood of further information, veracity of source of information, potential for chains of transmission, etc</p>
<p>9 Movements and exposure events during infectious period including to super Rationale: Provides us with a view of potential for onward infection in the community</p>	<p>Detail: Consider high risk exposure events, mobility of exposed population, likelihood of health care seeking behaviours e.g testing if symptomatic, use of COVID Tracer App and Bluetooth, veracity of information provided by case, etc</p>
<p>10 High risk activities in infectious period Rationale: Supports risk assessment for onward transmission</p>	<p>Detail: Consider indoor public space use, singing, alcohol consumption, health care settings exposure risk, etc</p>
<p>11 Vulnerable groups or communities at risk Rationale: Provides an indication of risk and/or potential issues in communicating with communities at risk</p>	<p>Detail: Population at risk. Consider impacts on vulnerable populations, impact of messages (intended and unintended), ability to communicate, healthcare resident populations or hospital settings etc</p>
<p>12 Number of close contacts including household Rationale: Provides an indication of most likely onward transmission</p>	<p>Detail: Consider close contact risk of infection risk of onward transmission, risk of compliance with health measures, etc Are known cases and their close contacts isolating</p>
<p>13 Length of time since last close contact Rationale: Provides an indication of how far potential onward spread has got</p>	<p>Detail: Consider potential further onward transmission, incubation and infectious periods of contacts, etc</p>
<p>14 Travel history of case or contacts Rationale: Supports risk assessment of case onward transmission, and any contacts who may become cases onward transmission</p>	<p>Detail: Consider risk of transmission throughout the country, in smaller DHB areas, in places with vulnerable or highly mobile populations etc</p>
<p>15 Vaccination status Rationale: Provides an indication of how protected the community may be</p>	<p>Detail: Consider the % of close and casual contacts who are fully vaccinated, the vaccine uptake of the impacted population etc.</p>
<p>16 Contact Tracing and Testing Capacity and Readiness</p>	<p>Detail: Support arrangements for surge requirements particularly if the case is outside Auckland.</p>
<p>17 Any other considerations or factors deemed pertinent by the panel</p>	<p>Detail: Have the panel considered the use of wastewater testing, environmental swabbing, the number of CTCs, the timelines for additional testing, use of serology, the impacts on vaccine rollout etc</p>

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Overall Public Health Risk Assessment

Given Part A and B responses, what is your overall public health risk assessment?

Low
 Medium
 High

Alert Level recommendation

1
 2
 3
 4

Following the Health Situation Assessment, NRG will consider the following factors and report to the NRLT

NRG RAG status ● Ready ● Preparing ● Not Ready/ Issue

Situational awareness		
Considerations	Who is accountable for providing this information?	NRG RAG Status
1 Is the proposed response proportionate to the risk?	All	● ● ●
2 Are the legal order templates ready for response	COVID-19 Head of Readiness and Planning, Boundary Workstreams Lead	● ● ●
3 Have key stakeholders been notified? • Local Government • Transport Operators • Business Sectors • CDEM groups • Schools • Social Welfare • Caring for Communities • Are they ready and able to assist? • Do they have any local knowledge that would aid the response or communications?	COVID-19 Head of Readiness and Planning	● ● ●
4 Do we have assurance that the system is ready to respond to the needs of this situation to support the public health response?	COVID-19 Head of Readiness and Planning	● ● ●
5 What additional measures, if any, have been put in place to mitigate risk?		● ● ●

Following the Health Situation Assessment, NRG will consider the following factors and report to the NRLT

NRG RAG status ● Ready ● Preparing ● Not Ready/ Issue

Communications

In a response, this checklist needs to identify a clear Communications lead, timing for information, collateral

Considerations	Who is accountable for providing this information?	NRG RAG Status
6 What assurance can be given we are able to contact and communicate with cultural and linguistically diverse groups? (As a group).	Head of Communications and Public Engagement, COVID-19 Response Group	● ● ●
7 Which city/region is affected? <ul style="list-style-type: none"> What is the demographic make-up of the place How does the system best engage with the area? Are there specific issues/characteristics of this region we need to take account of? 	Head of Caring for Communities	● ● ●
8 Do we know the key points we need to communicate regarding any Alert Level change? <ul style="list-style-type: none"> Are any special communications required for specific groups? What risks are there in relation to miscommunication and how do we mitigate these? 	Head of Communications and Public Engagement, COVID-19 Response Group/Paul Giles	● ● ●

MIQ Assurance

Considerations	Who is accountable for providing this information?	NRG RAG Status
9 What assurance can you give that the settings within our facilities are appropriate in light of the most recent developments?	DCE MIQ	● ● ●
10 What changes have been made in the facilities recently to continue to ensure they remain fit-for-purpose?	DCE MIQ	● ● ●
11 Is there sufficient capacity in our quarantine facilities to manage the current situation?	DCE MIQ	● ● ●
12 Is it clear where the source of the infection has come from within the facility? (if applicable)	DCE MIQ	● ● ●
13 What assurance do we have that we have contained the spread within the MF? (if applicable)	DCE MIQ	● ● ●
14 Does this facility remain appropriate for accepting further returnees? (if source is from a MIF)	DCE MIQ	● ● ●
15 Do we have the right staff on the ground to manage this situation?	DCE MIQ	● ● ●
16 What assurance can be given that the virus is not getting through MIQ into our community? <ul style="list-style-type: none"> How many new people have been infected at MIQ? (staff and returnees) 	DCE MIQ	● ● ●

Annex 4. COVID-19 QFT Response Checklist

[COVID-19 QFT Response Checklist is currently under development and will be included in the Q3 version of this plan]

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Annex 5. Standard Operating Procedures (SOPs) during a response

Phase 1: Notification, risk assessment, & readying the system

Sequence	Responsibility	Actions
0	Laboratory	Suspicious positive case identified; PHU notified of case
	PHU	MoH notified
1	MoH	COVID-19 Response Minister and NRLT Chair notified of positive case via s9(2)(b)(ii) message
2	NRLT Chair	NRLT and NRG Chair notified of positive case via s9(2)(b)(ii) message
3	MoH	Initial assessment using the 'Public Health Assessment' questions in the COVID-19 Response Checklist
4	NRG Chair	NRG notified of positive case and impending meeting time via s9(2)(b)(ii) message
5	NRG	<p>NRG meeting to:</p> <ul style="list-style-type: none"> • Assess the emerging situation against the COVID-19 Response Checklist, building on MoH's initial assessment and including additional system factors 'Key Risk Assessment Indicators for Shifting Alert Levels', as well as other factors such as situational awareness, communications and MIQ assurance • Recommend course of action to NRLT ('activate system', 'monitor and hold'; or 'no response') • If 'activate system' recommended, NRG will provide advice on the strategic direction, including <ul style="list-style-type: none"> ○ Changes to local/national Alert Level settings, including changes to the predetermined detailed Alert Level settings (e.g. gathering sizes; education attendance; face coverings; physical distancing including on public transport; at-risk groups (aged care facilities etc.); assurance of relationship management with affected communities (Iwi, health and disability sector, local government, peak business bodies, communities & NGOs etc.) ○ Changes to locations of boundaries ○ Considerations to declare a state of local/national emergency under Civil Defence Emergency Management (CDEM) Act 2002 <p><i>Further NRG meetings may be appropriate or necessary, depending on risk and time available</i></p>
6	NRLT	<p>NRLT meeting to:</p> <ul style="list-style-type: none"> • Assess the emerging situation against the COVID-19 Response Checklist, building on NRG's assessment

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Sequence	Responsibility	Actions
		<ul style="list-style-type: none"> Recommend course of action to Ministers with the Power to Act ('activate system', 'monitor and hold'; or 'no response') - <i>see decision point below</i> If 'activate system' recommended, NRLT will provide advice on the strategic direction, including <ul style="list-style-type: none"> Changes to local/national Alert Level settings, including changes to the predetermined detailed Alert Level settings (e.g. gathering sizes; education attendance; face coverings; physical distancing including on public transport; at-risk groups (aged care facilities etc.); assurance of relationship management with affected communities (Iwi, health and disability sector, local government, peak business bodies, communities & NGOs etc.) Changes to locations of boundaries Considerations to declare a state of local/national emergency under CDEM Act 2002 <p><i>Further NRLT meetings may be appropriate or necessary, depending on risk and time available</i></p>
<p>Decision point: NRLT decide recommended course of action, for consideration by Ministers with the Power to Act</p>		
7	NRLT	<p>Early notification of emerging advice provided to:</p> <ul style="list-style-type: none"> GIS Central Portal Manager C4C MBIE, to coordinate with business DIA, to coordinate with local government and Iwi C-19 SOG PCO and Crown Law
8	NRLT	<p>NRLT meeting to prepare for decisions from meetings of Ministers with the Power to Act and Cabinet, specifically:</p> <ul style="list-style-type: none"> Task NRG with system activation duties
9	NRG	<p>NRG meeting to prepare for decisions from meetings of Ministers with the Power to Act and Cabinet, specifically:</p> <ul style="list-style-type: none"> Activate system
10	COVID-19 Senior Officials Group	<p>C-19 SOG meeting to prepare for decisions from meetings of Ministers with the Power to Act and Cabinet, specifically:</p> <ul style="list-style-type: none"> Operationalise system activation (including key comms messages, legalities, etc)
11	NRLT, NRG	<p>NRLT and NRG Chair brief Ministers with the Power to Act of recommendation; Ministers with the Power to Act take decision ('activate system',</p>

COVID-19 NATIONAL RESPONSE PLAN

Sequence	Responsibility	Actions
	Chair and Ministers with the Power to Act	'monitor and hold'; or 'no response' – see <i>decision point below</i>
Decision point: Ministers with the Power to Act decide course of action, for endorsement at Cabinet		
12	Cabinet	Cabinet considers Cabinet Paper, based on the indicators and assessment questions covered in the checklist Cabinet determines course of action ('activate system', 'monitor and hold'; or 'no response') – see <i>decision point below</i>
Decision point: Cabinet endorses recommended course of action		

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COVID-19 NATIONAL RESPONSE PLAN

Phase 2: Immediate response

Sequence	Responsibility	Actions
1	Prime Minister or Minister for COVID-19 Response	Public announcement regarding the case(s) and the details of the immediate response, aligned to DPMC COVID-19 Comms and Legal advice to ensure clarity and correctness
2	DPMC COVID-19 Strategy and Policy, MoH Policy, DPMC COVID-19 Legal and PCO	<p>Policy developed, drafting instructions provided to PCO and new COVID-19 Order drafted In accordance with section 9 of the COVID-19 Public Health Response Act 2020, —</p> <ul style="list-style-type: none"> • Bill of Rights Act and proportionality checks undertaken • Ministerial consultation undertaken • DG provides Health Report to the Minister
3	Ministry of Transport, Police, AOG Compliance, MBIE, MPI, C4C, MSD, MoE, other agencies as required	Agency response plans activated
4	PSC	Engage with the Iwi Communications Collective to ensure wider community support and activation of intelligence feedback
5	PM business liaison, MBIE, MPI	Business liaison and provision of feedback
6	NEMA/C4C	Engagement with regions

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COVID-19 NATIONAL RESPONSE PLAN

Phase 3: Sustained response

Sequence	Responsibility	Actions
Initial activity (prior to development and announcement of sustained response plan)		
Ongoing	DPMC, MoH MBIE, MPI, MoT, Police, Treasury, MSD, NEMA, MSD, MoE, NZDF, MFAT, Crown Law, PMO, DIA, TPK, other key agencies as required	Constant information and intelligence gathering to evaluate immediate response and impacts on health, social, legal and economic aspects. Information to be gathered includes: <ul style="list-style-type: none"> Health information from testing, contact tracing, genomic and serological information (location of cases, spread of disease) Non-health information on impacts on social and economic aspects of immediate response Integrated Recovery Team (IRT) to establish reporting requirements and timings for agencies to provide sitreps and produce insight and sentiment reports as tasked by the NRG.
Daily	MoH	1x Situation Report (SitRep) per day and an end-of-day update
Twice daily	COVID-19 Senior Officials Group	Briefing to share updates and coordinate sustained response
Daily	NRG and NRLT	NRG Chair briefs NRG and NRLT on progress of sustained response
Daily	NRLT	NRLT meet to provide further guidance to NRG on progress of sustained response and impacts of immediate response
Daily	NRLT Chair, MoH DG and Ministers with the Power to Act	NRLT Chair and MoH DG brief Ministers with the Power to Act on developing situation

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Sequence	Responsibility	Actions
Daily	DPMC COVID-19 comms w/ PMO, MoH	DPMC COVID-19 Comms continue to modify and implement communications plan to ensure maximum compliance and key messages continue to be appropriate
Ongoing	Public Service Commission (PSC)	Scaling of AOG response and workforce planning Assurance that the appropriate workforce is in place to affect a response
Actions to develop sustained response plan		
1	NRG	<p>NRG meeting to consider information and intelligence and develop advice for NRLT on the resurgence, the sustained response options, and community/business impacts from the immediate response</p> <p>The following information, inter alia, should be considered when developing the sustained response:</p> <p>Decision-making and governance:</p> <ul style="list-style-type: none"> • Authorising environment and availability of key decision makers • Alert levels <p>Health:</p> <ul style="list-style-type: none"> • Community testing and evaluation, case investigation, contact tracing, genomic information • Reporting and public health messaging • Equity considerations (Māori, Pacific, Disability, Psychosocial wellbeing, etc.) • Is this a science / evidence-based response? • MIQ quarantine of positive cases (and potentially scaling to meet demand) • Time of year (e.g. in middle of flu season) • Personal Protective Equipment (PPE) for Health sector <p>Social:</p> <ul style="list-style-type: none"> • Impact of the location of a boundary(ies) • Compliance with requirements (e.g. face coverings, physical distancing) • Requirements for income support, food security, and other social determinants • Provisions of emergency support, if required • Impact on educational facilities, students and teachers (dependent on time of year e.g. just before exams or during holidays) • Exemptions (personal)

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Sequence	Responsibility	Actions
		<ul style="list-style-type: none"> Gathering sizes Physical distancing in public and in businesses Face coverings/PPE availability, standards and distribution Impact of travel restrictions (regional/national/international) <p>Economic:</p> <ul style="list-style-type: none"> Consideration of impact of and on major events (e.g. elections, mass gatherings, Christmas) Exemptions (business) Boundaries, location and associated rules Boundaries, location and associated rules and resourcing Impact of travel restrictions (regional/national/international) <p>Political:</p> <ul style="list-style-type: none"> Impact on New Zealand's international reputation and connections to other countries (especially impact on and connections with the Pacific) Consider variations to MIQ/border requirements and any additional effects on international travel, including a reduction in returnee numbers to increase domestic quarantine capacity. <p>Communications Considerations for communications that are tailored to the outbreak and situation</p>
2	NRLT	<p>NRLT meeting to consider NRT's advice, including:</p> <ul style="list-style-type: none"> Assessing the community/business impacts from the immediate response Agreeing the sustained response options for Ministers with the Power to Act
3	NRLT, NRG Chair and Ministers with the Power to Act	NRLT and NRG Chair brief Ministers with the Power to Act of sustained response recommendation
Ministers with the Power to Act decides on sustained response plan		
4	NRLT, NRG and COVID-19 Senior Officials Group	Sustained response plan is put into effect legislatively, legally, and operationally

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Sequence	Responsibility	Actions
5	MoT, Police, AOG Compliance, MBIE, MPI, C4C, MSD, MoE, other agencies as required	Other agencies, as required, to modify resurgence plans.
6	Public Service Commission	Engage with the Iwi Communications Collective to ensure wider community support and activation of intelligence feedback
7	Prime Minister business liaison, MBIE, MPI	Business liaison and provision of feedback
8	NEMA/C4C	Engagement with regions
9	Prime Minister or Minister for COVID-19 Response	Public announcement, the confirmation of community transmission, and the details of the sustained response.
10	DPMC COVID-19 Strategy and Policy, MoH Policy, DPMC COVID-19 Legal and PCO	<p>Policy developed, drafting instructions provided to PCO and new COVID Order drafted In accordance with section 9 of the COVID-19 Public Health Response Act 2020, —</p> <ul style="list-style-type: none"> • Bill of Rights Act and proportionality checks undertaken • Ministerial consultation undertaken <p>DG provides Health Report to the Minister</p>
Ongoing activity (post announcement of sustained response plan)		

COVID-19 NATIONAL RESPONSE PLAN

Sequence	Responsibility	Actions
3x weekly	C-19 SOG	Briefing to share updates and monitor sustained response to ensure readiness to modify, if required

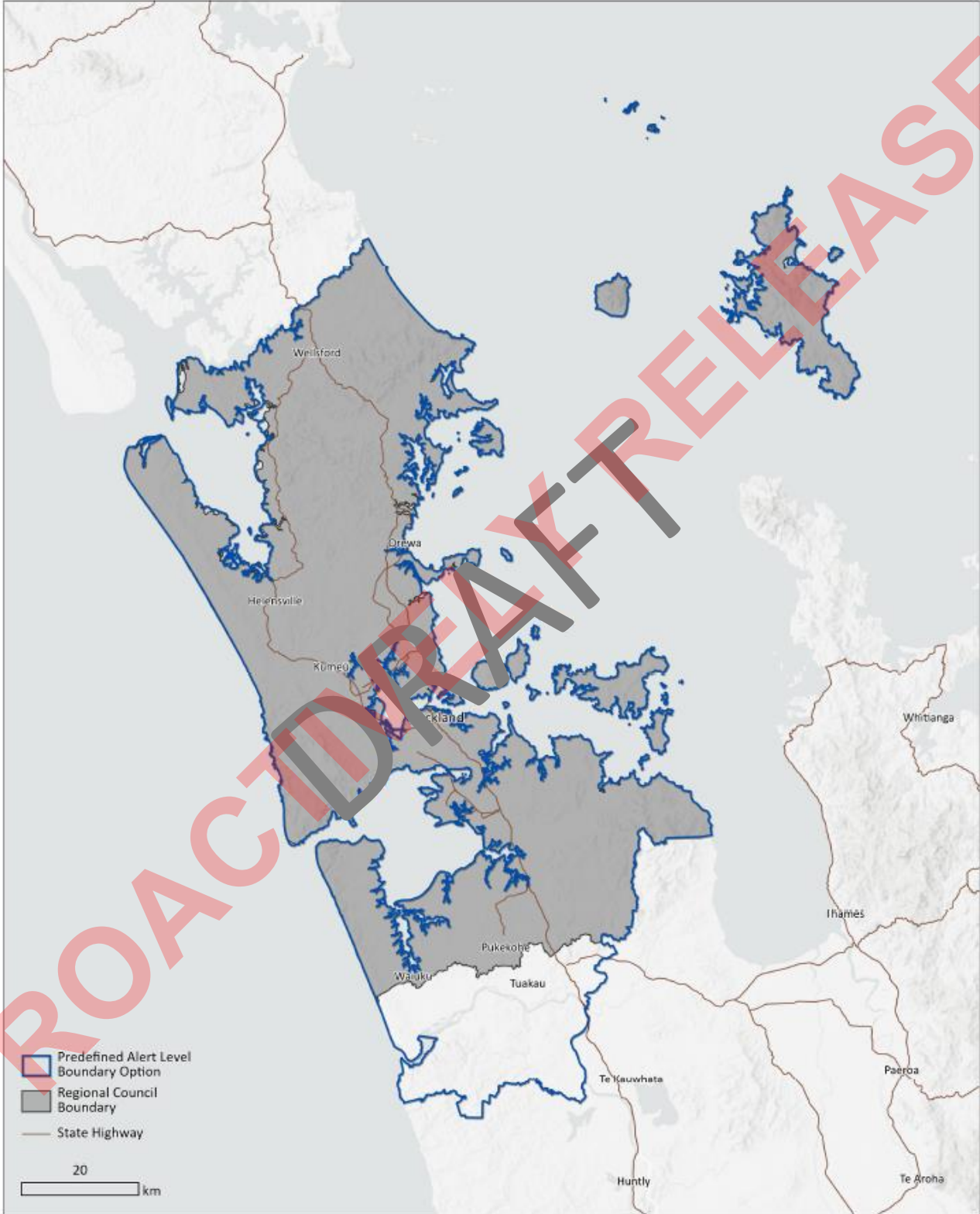
Phase 4: De-escalation of resurgence response

Sequence	Responsibility	Actions
1	MoH/SRO	When appropriate, initiate a move from response to deactivation and return to BAU.
2	NRLT, NRG and COVID-19 Senior Officials Group	De-escalation of system processes, resources and capability
3	NRLT, NRG and COVID-19 Senior Officials Group	Launch of lessons learned review

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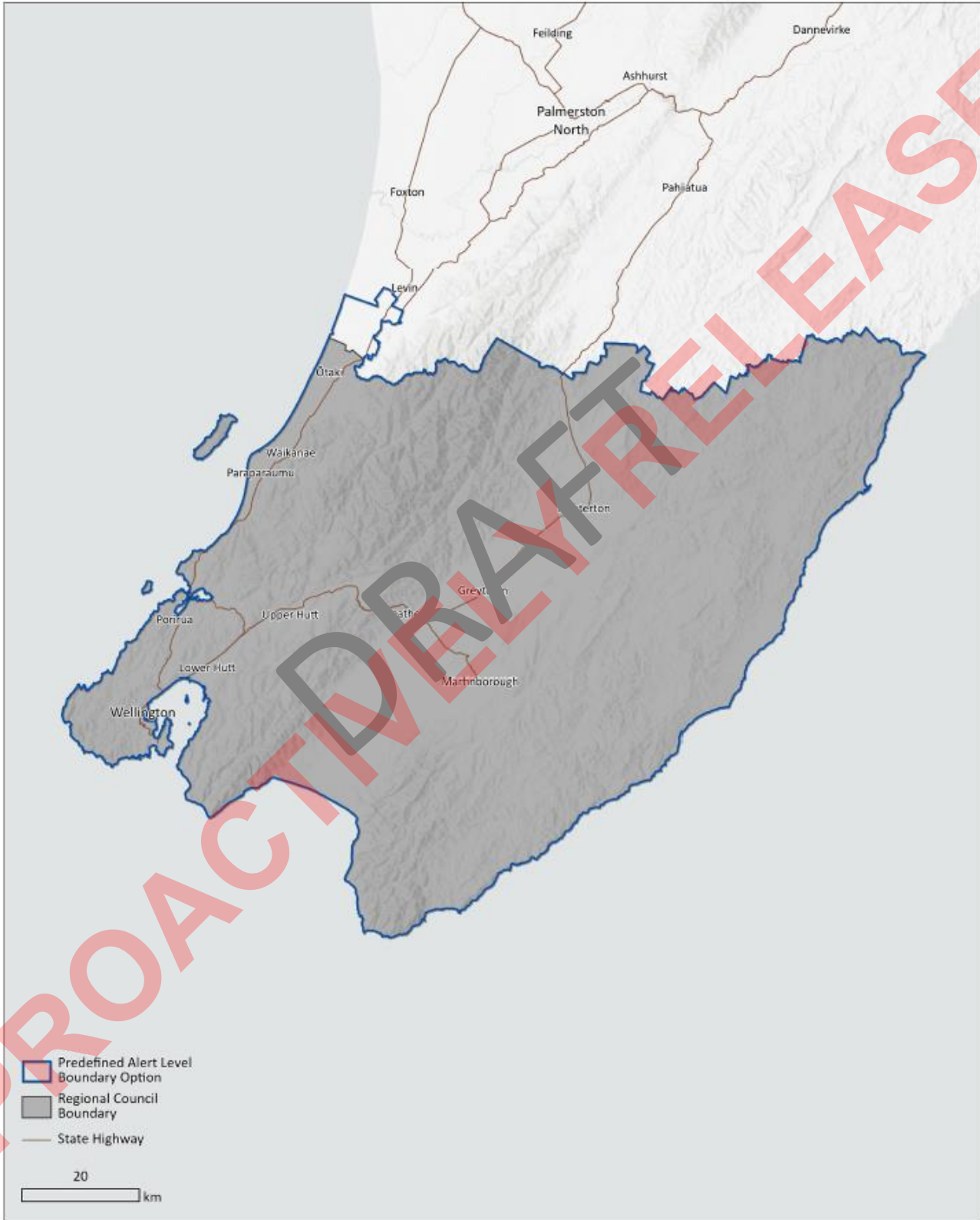
Annex 6. Draft Alert Level boundaries

Note: Subject to change
Draft Alert Level Boundary
Auckland Region



Note: Subject to change

Draft Alert Level Boundary Wellington Region



Annex 7. Agency responsibilities

Each agency involved in a resurgence response has a different role to play, and accordingly has their own plan for how they will support the response. This forms an important part of the process which is coordinated by DPMC.

All agencies will have responsibility to support objective one: 'Enable effective decision-making & governance'. Responsibilities include:

- Attend Workstream as required.
- Liaison with DPMC COVID-19 Group as required.
- Attend workshops as required.
- Attend Watch Groups/ ODESC as required.

The roles outlined in the following changes will be subject to the evolving COVID-19 response and are likely to change over time and as the NRP is refreshed each quarter.

Objectives guiding our COVID-19 response:

Six national objectives guide New Zealand's COVID-19 response:

1. **Enable effective decision-making and governance:** Provide representation to, and support the operation of, governance and decision-making structures, as appropriate.
2. **Enable effective and coordinated support to the COVID-19 health system response:** Support the MoH, District Health Boards (DHBs), Public Health Units (PHUs) and community providers to achieve the required COVID-19 related health outcomes.
3. **Coordinate efforts to contain COVID-19 by enabling effective national and regional mechanisms:** Establish effective coordination mechanisms, processes, and structures between agencies and stakeholders.
4. **Coordinate support for communities (including business) to minimise the social & cultural, and economic impacts:** Partner with support agencies to identify and meet community needs where there are no other means of support.
5. **Coordinate and align COVID-19 communications and engagement and local implementation of public information management requirements**
 - a. Messaging and strategic communications will be nationally led by the COVID-19 Group.
 - b. Public health messaging is generated and led by MoH, in partnership with the COVID-19 Group.
 - c. Other messaging is generated by the appropriate agency.
6. **Support and contribute to intelligence processes:** Facilitate the flow of information through agreed AOG reporting processes; including, where necessary, supporting other agencies in the efficient AOG reporting processes; including, where necessary, supporting other agencies in the efficient sharing of information.

COVID-19 NATIONAL RESPONSE PLAN

MoH		
Objective number	Lead	Support
<p>One</p> <p><i>Enable effective decision-making & governance</i></p>	<ul style="list-style-type: none"> Advise on public health settings Provide timely evidence to enable decision making around public health and DPMC COVID-19 Group response. 	<ul style="list-style-type: none"> Participate in the NRLT, NRG and other DPMC COVID-19 Group decision-making processes as required. DG Health attend COVID Chairs
<p>Two</p> <p><i>Enable effective and coordinated support to the COVID-19 Health System response</i></p>	<p>Lead the following:</p> <ul style="list-style-type: none"> Joint elimination Strategy MoH Covid-19 Resurgence Plan Covid-19 Health & Disability Sector Resurgence Planning Tool Surveillance Plan Testing Strategy National Hospital Response Framework and Community Response Framework. Contact tracing Personal exemptions Business continuity plans 	<ul style="list-style-type: none"> Support other plans as appropriate. Healthline / National Telehealth Service provides health and social wellbeing support for public and clinical advice to health professionals.
<p>Three</p> <p><i>Coordinate efforts to contain COVID-19 by enabling effective National and regional mechanisms</i></p>	<ul style="list-style-type: none"> Inform the development and implementation of national and regional responses to community cases and clusters Ministry, DHBs and PHUs to participate in national and regional response coordination mechanisms Implement the Covid-19 Cluster Investigation and Control Guidelines (contract tracing) 	
<p>Four</p> <p><i>Coordinate support for communities (including business) to minimise the social and economic impact</i></p>	<ul style="list-style-type: none"> Ministry and DHBs to monitor the effectiveness and other impacts of response measures The health and disability sector identify opportunities to work with community groups and NGOs 	
<p>Five</p> <p><i>Coordinate and align COVID-19 Communications & Engagement and</i></p>	<ul style="list-style-type: none"> Prepare, maintain and review Communications Plan, interfacing with the health and disability sector, the public and AoG / DPMC COVID-19 Group, and maintain communications coordination and consistency of messaging 	

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<p><i>local implementation of Public Information Management requirements</i></p>	<ul style="list-style-type: none">• Update the public and agencies/providers on the pandemic situation and key messages through regular media reports, website, print media, social media, Healthline / National Telehealth Service, Āwhina app, and other mechanisms as appropriate	
<p>Six <i>Support and contribute to Intelligence processes</i></p>	<ul style="list-style-type: none">• Closely monitor demographic / epidemiological trends in cases and clusters to ensure response measures prioritise affected groups / communities• Characterise the event(s), complete ongoing risk assessments, including likely impacts and event evolution• Ensure clear, accurate, and up-to-date intelligence is disseminated across the health system and to DPMC COVID-19 Group /AoG• Provide regular situation reports and maintain distribution lists	

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COVID-19 NATIONAL RESPONSE PLAN

DPMC		
Objective number	Lead	Support
<p>One</p> <p><i>Enable effective decision-making & governance</i></p>	<ul style="list-style-type: none"> • activate the resurgence response system and convene National Response Group to coordinate response to a resurgence • coordinate and lead Workstreams to respond to a resurgence • coordination through workstreams to inform policy advice to Ministers on the response and instructions to PCO for Orders • coordination of central communications • provide an assurance function through exercising of National Resurgence Plan as continuous tabletop exercising, and continuous development of lessons learned, which are in turn fed into the plan. • identification of agency resurgence plan interdependencies and gaps • development of New Zealand strategy • NRG chair to communicate with business community via Rob Fyfe (Prime Minister's Business Liaison adviser) • Support the local RLG structure 	<ul style="list-style-type: none"> • NEMA and C4C to ensure governance and leadership coordination with regional structures • NEMA for production of continuous improvement framework • agencies to develop resurgence plans • C4C and NEMA to engage with RLG and CDEM Group structures during readiness • PSC to maintain strategic workforce and aid in surge capacity where required.
<p>Two</p> <p><i>Enable effective and coordinated support to the COVID-19 Health System response</i></p>	<ul style="list-style-type: none"> • the coordinated response to Ministry of Health requests; • non-hospital or medical supplies of PPE such as face mask supply chains etc. 	<ul style="list-style-type: none"> • health policy, planning and operations, and communications, as required • requests and requirements, as needed
<p>Three</p> <p><i>Coordinate efforts to contain COVID-19 by enabling effective National and regional mechanisms</i></p>	<ul style="list-style-type: none"> • development of boundaries • legal and regulatory implementation of response • effective and aligned communications campaign to enhance public understanding and compliance • development of contingency plans to respond to a resurgence of COVID-19 	<ul style="list-style-type: none"> • boundary exemptions process • agency operationalisation of Alert Levels

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	<ul style="list-style-type: none"> • Tabletop exercise agency resurgence plans to ensure COVID-19 is contained • AOG compliance operations • Stand up AOG C4C in the delivery of assistance to vulnerable communities 	
<p>Four</p> <p><i>Coordinate support for communities (including business) to minimise the social and economic impacts</i></p>	<ul style="list-style-type: none"> • verification of agency resurgence plans to ensure COVID-19 effects are managed • AOG C4C in the delivery of assistance to vulnerable communities 	<ul style="list-style-type: none"> • C4C Agencies and CDEM Groups to deliver assistance to communities
<p>Five</p> <p><i>Coordinate and align COVID-19 Communications & Engagement and local implementation of Public Information Management requirements</i></p>	<ul style="list-style-type: none"> • Maintaining and building public confidence in official sources of COVID-19 information • Ensuring everyone in New Zealand knows what to do in the event of resurgence • Ensuring all QFT travellers to and from New Zealand know what to do in the event of resurgence • Ensuring all New Zealanders and businesses know where to get support in the event of resurgence • Producing public information messaging (TV, radio, print, out-of-home, web, social media etc) • Coordinating resurgence messaging across the DPMC COVID-19 Response Group and AOG agencies; with the Prime Minister's Office and Ministers' offices; and amongst other key stakeholders (eg. iwi, Pacific Peoples, ethnic communities, DHBs etc) • Ensuring strong inter-agency communication between and across AOG and iwi Māori - including partnering to ensure strong connection with local communities • Motivating public health behaviours and countering mis/disinformation and apathy and other barriers to effective communication • Messaging to support campaigns such as the vaccination rollout, QFT, QR codes, pre-departure testing and other COVID-19-related campaigns, as required. 	<ul style="list-style-type: none"> • Ministry of Health to generate timely and fit-for-purpose public health messaging • Other government agencies to generate fit-for-purpose messaging (eg. financial support, educational support, boundaries, travel etc) • Regional agencies in amplifying and targeting consistent messaging • QFT agencies in amplifying and targeting consistent messaging • The production of material for Māori, Pacific peoples, youth, QFT travellers, and CALD communities.

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	<ul style="list-style-type: none">• Measuring campaigns (reach, public sentiment and behaviours), sharing insights as part of a commitment to continuous improvement.	
Six <i>Support and contribute to Intelligence processes</i>	<ul style="list-style-type: none">• contribution to regular Workstreams meetings to inform across government• consolidate government intelligence streams and functions across government through the IRT to provide accurate and timely reporting• production of insights reports, both tactical and strategic, to understand emerging areas of importance and gauge impacts	<ul style="list-style-type: none">• agencies with intelligence and insights to enable achievement of their functions

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COVID-19 NATIONAL RESPONSE PLAN

NEMA		
Objective number	Lead	Support
<p>One</p> <p><i>Enable effective decision-making & governance</i></p>	<ul style="list-style-type: none"> ● Represent CDEM at NRG. ● Identify NEMA-specific readiness and activation requirements for integration in business as usual processes (e.g. Duty activation processes). ● Review and update the SOP for CDEM Group Coordination to reflect coordination arrangements as they are updated. ● Inform CDEM Groups of governance and decision-making arrangements. ● Ensure surge support mechanisms are in place for inter-group staffing support. ● Support the local RLG structure. 	<ul style="list-style-type: none"> ● Represent CDEM on the NRLT for resurgence readiness and activation. ● Understand and support CDEM Group initial engagement and regional planning with RLG. ● Support DPMC COVID-19 Group planning by identifying gaps that require early closure or coordination at the National level, including gaps informed by CDEM Groups at the local level through existing arrangements and relationships. ● Be prepared to engage in DPMC COVID-19 Group tabletop exercising with the NRG and test integration of CDEM Groups with the National response and Health system. ● Support regional development of CDEM regional resurgence plans, with emphasis on clear roles, responsibilities consistent with national arrangements. ● Provide representation at DPMC COVID-19 Group resurgence planning, communications or workstream meetings ● Be prepared to assist development of an DPMC COVID-19 Group de-escalation pathway. ● Sustain and, if required, strengthen relationships between NEMA / CDEM, C4C and DIA.
<p>Two</p> <p><i>Enable effective and coordinated support to the COVID-19 Health System response</i></p>	<ul style="list-style-type: none"> ● Review and ensure alignment of NEMA/CDEM planning to the Health Resurgence Action Plan (CDEM NCC Controller and supporting staff). ● Identify support and coordination opportunities between NEMA and CDEM Groups in supporting the implementation of the Health Resurgence Action Plan (CDEM NCC Controller and supporting staff). 	<ul style="list-style-type: none"> ● Local response

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<p>Three</p> <p><i>Coordinate efforts to contain COVID-19 by enabling effective National and regional mechanisms</i></p>	<p>Support CDEM Groups to engage within RLG and other governance structures during readiness. Provide support to the C4C and RLG to engage with RLGs and establish effective governance arrangements.</p>	
<p>Four</p> <p><i>Coordinate support for communities (including business) to minimise the social and economic impacts</i></p>	<ul style="list-style-type: none"> Engage through C4C and National Welfare Co-ordination Group (NWCG) to coordinate resurgence planning for emergency welfare services functions. Be prepared to implement, coordinate and deliver emergency welfare services, as required, in partnership with support agencies. Develop plans to identify and meet community needs where there are no other means of support. 	<ul style="list-style-type: none"> Emergency Accommodation needs and gap analysis in cooperation with MSD, MBIE, Ministry of Housing and Urban Development (HUD), MoH and NEMA and other social sector agencies on housing issues. Follow housing guidance clarifying roles and responsibilities in the housing environment, and participate in an escalation group, if activated, to quickly address any issues that emerge at regional levels. Additional Task - work with MSD and MoH to determine how processes and guidance applied in Auckland during the August AL3 lockdown can be applied through the rest of the country, for example the Complex Needs Escalation process. Additional measure - AOG oversight group planning for the transition of foreign national support away from Red Cross. NEMA to confirm who this is transitioning to and identify early if CDEM will be looked to fill any gaps.
<p>Five</p> <p><i>Coordinate and align COVID-19 Communications & Engagement and local implementation of Public Information Management requirements</i></p>	<ul style="list-style-type: none"> Develop CDEM-specific communications to support community readiness for a natural hazard event in the context of COVID-19. 	<ul style="list-style-type: none"> Support the DPMC COVID-19 Group development of resurgence response communications plan including objectives, key messages, audiences, channels, tactics and spokespeople. Support the DPMC COVID-19 Group development of resurgence response communications, information flows and sign-off processes. Support DPMC COVID-19 Group development of resurgence response templates. Support COVID-19 AOG Response Group development of resurgence readiness communications plan to support community readiness.

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COVID-19 NATIONAL RESPONSE PLAN

Six

Support and contribute to Intelligence processes

- Develop and advise CDEM Groups of critical information requirements (CCIRs), and NEMA NCC / CDEM Group reporting and decision-making processes and authorities.
- Contribute to the development of DPMC COVID-19 Group SOP's for real-time information flow.
- Contribute to the development of DPMC COVID-19 Group policies for information sharing.
- Be prepared to support the flow of information from CDEM Group(s) to support Ministry of Health initial reporting within 90mins of case identification.
- Support CDEM information flow into the DPMC COVID-19 Group Insights and Reporting Group.

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COVID-19 NATIONAL RESPONSE PLAN

MBIE		
Objective number	Lead	Support
<p>One</p> <p><i>Enable effective decision-making & governance</i></p>	<ul style="list-style-type: none"> • Various workstream leads 	<ul style="list-style-type: none"> • Attend COVID Chairs
<p>Two</p> <p><i>Enable effective and coordinated support to the COVID-19 Health System response</i></p>		<ul style="list-style-type: none"> • Support public health messaging at MIQ facilities
<p>Three</p> <p><i>Coordinate efforts to contain COVID-19 by enabling effective National and regional mechanisms</i></p>	<ul style="list-style-type: none"> • MIQ Service • Infrastructure Workstream • Service owner and sector lead agency for business travel exemptions reviews and approvals. New automated process using Business Connect. • Essential Services (Which businesses can open under alert level changes) 	<ul style="list-style-type: none"> • Internal border movements • Exceptions from external border closure • Contributions to and where necessary leading system policy imperatives
<p>Four</p> <p><i>Coordinate support for communities (including business) to minimise the social and economic impacts</i></p>	<ul style="list-style-type: none"> • Temporary Accommodation Service • Essential Services (Which businesses can open under alert level changes) • Small business support 	<ul style="list-style-type: none"> • Contribution via NWCG?
<p>Five</p> <p><i>Coordinate and align COVID-19 Communications & Engagement and local implementation of Public Information Management requirements</i></p>	<ul style="list-style-type: none"> • call centre functions (e.g. Government Helpline). 	<ul style="list-style-type: none"> • DPMC COVID-19 Group PIM function • Visitor Sector Emergency Advisory Group (VSEAG)

COVID-19 NATIONAL RESPONSE PLAN

Six

Support and contribute to Intelligence processes

- Via Intel function within Evidence & Insights
- Weekly dashboard

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COVID-19 NATIONAL RESPONSE PLAN

Transport Response Team/ Ministry of Transport

Objective number	Lead	Support
<p>One</p> <p><i>Enable effective decision-making & governance</i></p>	<ul style="list-style-type: none"> ● Lead transport Workstream 	<ul style="list-style-type: none"> ● Provide a Liaison Officer as required. ● Attend COVID Chairs
<p>Two</p> <p><i>Enable effective and coordinated support to the COVID-19 Health System response</i></p>	<ul style="list-style-type: none"> ● Lead public health measure on transport engagement with transport sector with respect to public health measures set by the Minister for COVID-19 Response or the Director-General of Health. 	<ul style="list-style-type: none"> ● Engage with the MoH (or DPMC COVID-19 Group) to clarify the regulations and guidance, on the following public health measures: <ul style="list-style-type: none"> ○ Contact tracing (with respect to transport services) ○ Physical distancing (with respect to transport services) ○ Use of face coverings on public transport ○ Movement restrictions ○ Cleaning measures (with respect to transport services). ● Ministry of Transport to issue guidance to the transport sector to support the implementation of the above public health measures. Maritime New Zealand, Civil Aviation Authority, and Waka Kotahi to issue sector specific guidance. ● Provide direct support to transport sector entities (as required) to support public health measures – including incidents requiring contact transport involving a public transport service, or disinfection of an aircraft/ship/vehicle.
<p>Three</p> <p><i>Coordinate efforts to contain COVID-19 by enabling effective National and regional mechanisms</i></p>	<ul style="list-style-type: none"> ● Issue guidance to the transport sector to support the implementation of the above public health measures (as above). ● Engage with industry: <ul style="list-style-type: none"> ○ through the Maritime Sector Meeting (MoT – Chair); note this is a regular meeting. 	

COVID-19 NATIONAL RESPONSE PLAN

	<ul style="list-style-type: none"> ○ through the Aviation Sector Meeting (MoT – Chair); note this is a regular meeting. ○ through the Regional Council Meetings on Public Transport (Waka Kotahi – Chair) note this is a regular meeting. ○ through the Road Transport Forum ○ directly with KiwiRail (with respect to Rail Freight). 	<ul style="list-style-type: none"> ● Support the processing of applications in the Business Travel Register (by reviewing and commenting on transport sector exemption applications and conducting audits of transport sector requests that were auto approved).
<p>Four</p> <p><i>Coordinate support for communities (including business) to minimise the social and economic impacts</i></p>	<ul style="list-style-type: none"> ● Manage the essential transport inbox (essentialtransport@transport.govt.nz), with respect to queries from the public/businesses; including welfare related queries associated with movement restrictions (and either provided advice or direct to appropriate agency). 	
<p>Five</p> <p><i>Coordinate and align COVID-19 Communications & Engagement and local implementation of Public Information Management requirements</i></p>	<ul style="list-style-type: none"> ● Publish information on the Ministry of Transport website with respect to public health measures on transport services (e.g. compulsory use of face coverings) and movement restrictions. ● Provide transport entities with collateral (posters etc) produced by DPMC COVID-19 Group Communications with respect to public health measures on transport services (e.g. the face covering posters and the ‘travel safely’ poster). ● Provide PA scripts for use on public transport services as required. 	
<p>Six</p> <p><i>Support and contribute to Intelligence processes</i></p>	<ul style="list-style-type: none"> ● Issue SitReps (as per agreed timing and frequency) 	

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COVID-19 NATIONAL RESPONSE PLAN

New Zealand Police		
Objective number	Lead	Support
<p>One</p> <p><i>Enable effective decision-making & governance</i></p>	<ul style="list-style-type: none"> Deliver core police functions such as checkpoints, Compliance & Exemptions 	<ul style="list-style-type: none"> Membership of the NRLT Membership of the NRG
<p>Two</p> <p><i>Enable effective and coordinated support to the COVID-19 Health System response</i></p>		<ul style="list-style-type: none"> other agencies with functions such as compliance checks, exemptions and public education on Health Order requirements MBIE at all Managed Isolation and Quarantine facilities MoH in respect of operational response capability Police Districts supporting local DHB/PHU's, Local Government and CDEM groups
<p>Three</p> <p><i>Coordinate efforts to contain COVID-19 by enabling effective National and regional mechanisms</i></p>	<ul style="list-style-type: none"> Lead the Compliance workstream and support exemptions. Responsible for implementing and operationalising check point for boundaries. 	<ul style="list-style-type: none"> policy and legal advice, provides specialist policing capability and capacity to support lead agencies Key support role working with other Government agencies across Iwi, Pacifica and vulnerable communities Key role in communicating with major supplies and essential businesses- e.g. supermarket owners, Pharmacies, petrol stations etc
<p>Four</p> <p><i>Coordinate support for communities (including business) to minimise the social and economic impacts</i></p>		<ul style="list-style-type: none"> Key support role working with other Government agencies across Iwi, Pacifica and vulnerable communities Considerable contact with Iwi and Pacifica communities particularly in the Auckland region- meetings, on-line communication content, multi-language video publications, relationship strengthening
<p>Five</p> <p><i>Coordinate and align COVID-19 Communications & Engagement and local implementation of Public</i></p>		<ul style="list-style-type: none"> Strong and agile Police strategic Comms team supporting MoH and DPMC COVID-19 Group Linked to the DPMC COVID-19 Group comms structure Consistency of agency messages

*Information Management
requirements*

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COVID-19 NATIONAL RESPONSE PLAN

Te Arawhiti

Objective number	Lead	Support
One <i>Enable effective decision-making & governance</i>		<ul style="list-style-type: none">• CE attends COVID Chairs

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COVID-19 NATIONAL RESPONSE PLAN

New Zealand Customs Service

Objective number	Lead	Support
<p>One</p> <p><i>Enable effective decision-making & governance</i></p>	<ul style="list-style-type: none"> • Lead boarder Workstream • Incident Management Team continues to be linked to AOG strategic response (Wellington level), to inform Customs senior management, and to pass Customs objectives, intentions and requirements onto other agencies 	<ul style="list-style-type: none"> • Attend Border Sector Governance Group meetings • Attend COVID Chairs
<p>Two</p> <p><i>Enable effective and coordinated support to the COVID-19 Health System response</i></p>	<ul style="list-style-type: none"> • Maintain travel restrictions at the border (air and maritime). • Public health checks at airports • Receive and process all arriving air passengers, and pass onto MIQ • Oversee the isolation of maritime crews (both commercial and small craft) • Integrate local operations with health officials, with established testing procedures for staff and arrivals, and escalation for positive tests. 	<ul style="list-style-type: none"> • Supports the testing strategy
<p>Three</p> <p><i>Coordinate efforts to contain COVID-19 by enabling effective National and regional mechanisms</i></p>	<ul style="list-style-type: none"> • COVID-19 resurgence managed through normal BAU structures, with exception of Operation Takutai (Maritime Border Order enforcement). Op Takutai is transitioning to BAU over time. • IMT remains active and has pre-existing links externally to DPMC COVID-19 Group, and internally to operational and tactical layers within Customs. 	
<p>Four</p> <p><i>Coordinate support for communities (including business) to minimise the social and economic impacts</i></p>	<ul style="list-style-type: none"> • Minimal impact on Customs. Business support measures have been in place since April and will continue as required (now BAU). 	

COVID-19 NATIONAL RESPONSE PLAN

<p>Five</p> <p><i>Coordinate and align COVID-19 Communications & Engagement and local implementation of Public Information Management requirements</i></p>	<ul style="list-style-type: none">• Customs Communications team linked to AOG Border Comms Group• Customs is well practised now at integrating health messaging, and that from other sources (e.g. Maritime NZ safety and stakeholder comms) into its internal and external messaging.	
<p>Six</p> <p><i>Support and contribute to Intelligence processes</i></p>	<ul style="list-style-type: none">• Customs Intel staff have been part of joint Intelligence planning and analysis from early on in the response. The Strategic Intelligence Unit in Customs will provide analysts as required on approach to the Customs IMT.• Information sharing is ongoing, with links at the strategic, operational and tactical levels. MOUs and information sharing agreements are being updated and created as required.	

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COVID-19 NATIONAL RESPONSE PLAN

Ministry for Primary Industries (MPI)

Objective number	Lead	Support
<p>One</p> <p><i>Enable effective decision-making & governance</i></p>		<ul style="list-style-type: none"> ● Attend Border Sector Working Group and AOG Compliance Governance Group. ● Data and Geospatial information sharing to support effective decision making.
<p>Two</p> <p><i>Enable effective and coordinated support to the COVID-19 Health System response</i></p>		<ul style="list-style-type: none"> ● contributes resources to the MoH response on request. We currently have 10 staff seconded to MoH or DPMC contributing to response efforts. ● can surge staff to support MoH as required.
<p>Three</p> <p><i>Coordinate efforts to contain COVID-19 by enabling effective National and regional mechanisms</i></p>	<ul style="list-style-type: none"> ● Coordination and communication with essential businesses and workplaces <ul style="list-style-type: none"> ○ engage with primary industry and food retail based essential businesses and workplaces to provide information and support regarding implementation of safe operating practices under COVID-19 restrictions, travel / movement exemptions across domestic borders, and liaison with other central government agencies regarding to immigration/work visa exemptions. ● Infrastructure and supply chain requirements <ul style="list-style-type: none"> ○ specific supply chain requirements. MPI engages with key primary industry and food sector participants to assist them to unblock barriers to their supply chains. E.g. pig farmers and butchers in original outbreak. 	<ul style="list-style-type: none"> ● Enforcement and Compliance <ul style="list-style-type: none"> ○ provides staff resources to the AOG Compliance 'Fusion' Hub. Several staff are already trained and ready to deploy on request. Note MPI staff are not authorised/delegated compliance powers under the COVID-19 Public Health Response Act 2020. ○ Deputy Director-General on the Governance group for the AOG Compliance work. ● Local government and community outreach <ul style="list-style-type: none"> ○ regional animal welfare coordinators and RC&FS staff are members of regional Welfare Coordination Groups, regional Psychosocial Support Agencies, regional animal welfare coordination teams and rural advisory groups/primary sector clusters.
<p>Four</p>	<ul style="list-style-type: none"> ● facilitated negotiations with support agencies to match oversupply of primary produce with communities such as the excess pork to foodbanks. This may not be necessary 	<ul style="list-style-type: none"> ● active member of the AOG Welfare Coordination Group (under CDEM Act 2002) and has staff who work with and are linked into all 16 regional CDEM groups.

COVID-19 NATIONAL RESPONSE PLAN

<p><i>Coordinate support for communities (including business) to minimise the social and economic impacts</i></p>	<p>in a resurgence depending on the nature and duration of any restrictions.</p>	
<p>Five</p> <p><i>Coordinate and align COVID-19 Communications & Engagement and local implementation of Public Information Management requirements</i></p>	<ul style="list-style-type: none"> • utilise teleconferences, and email as tools to communicate with external stakeholders. • The MPI website and MPI intranet both have dedicated COVID Information Hubs and content consumers are linked to the AOG response communications channels where appropriate to ensure alignment 	<ul style="list-style-type: none"> • active member of the AOG Response Group communication network (under CDEM Act 2002) and can provide skilled communications staff as required to support the DPMC COVID-19 Group. • provide staff resources on secondment into the DPMC COVID-19 Group communications team. • align key messages with the DPMC COVID-19 Group Communications key messages to share with stakeholders, industries and staff
<p>Six</p> <p><i>Support and contribute to Intelligence processes</i></p>	<ul style="list-style-type: none"> • experienced and trained members of the intelligence community and can provide additional staff as required. 	<ul style="list-style-type: none"> • staff seconded into the DPMC COVID-19 Group response in this area • National Operations Centre (NOC) is the contact point for information flow between agencies. • contribute to reporting processes where requested

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COVID-19 NATIONAL RESPONSE PLAN

Ministry of Education (on behalf of the Education sector)

Objective number	Lead	Support
<p>One</p> <p><i>Enable effective decision-making & governance</i></p>	<ul style="list-style-type: none"> Membership of 5 Regional Leadership Groups 	<ul style="list-style-type: none"> Education liaison / connection point in DPMC COVID-19 Group Policy and Strategy Group Through these connections / memberships, advise on potential impacts of policy decisions for education sector to inform decisions
<p>Two</p> <p><i>Enable effective and coordinated support to the COVID-19 Health System response</i></p>		<ul style="list-style-type: none"> Work in partnership with public health units when cases are confirmed in school and early learning service communities – supporting schools and early learning services to communicate with and support their community Regular communications and detailed guidance to education sector to support health’s prevention and response messaging – potential audience reach of more than 2 million Have resource to support exemption processes – for example can process education-related requests for exemptions for boundary restrictions and access to education sites in Level 4
<p>Three</p> <p><i>Coordinate efforts to contain COVID-19 by enabling effective National and regional mechanisms</i></p>		<ul style="list-style-type: none"> Ministry regional teams are located around the country (10 education regions) and provide the face to face and direct support to schools and early learning services, including engaging with iwi and community groups Membership of 5 Regional Leadership Groups Membership of range of AoG multi-agency groups, nationally, to ensure appropriate connections are made Work closely with sector representative groups (unions, principals associations etc) to agree education response and to align with national response
<p>Four</p>		<ul style="list-style-type: none"> Information sharing with education providers and their communities Regional teams work locally with schools, early learning services and with iwi and community groups

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COVID-19 NATIONAL RESPONSE PLAN

<p><i>Coordinate support for communities (including business) to minimise the social and economic impacts</i></p>		<ul style="list-style-type: none"> Regional staff are part of CDEM Welfare Coordination Groups
<p>Five</p> <p><i>Coordinate and align COVID-19 Communications & Engagement and local implementation of Public Information Management requirements</i></p>	<ul style="list-style-type: none"> Ministry of Education has a key role in disseminating public health messaging, including messaging targeted specifically at education providers (and their communities) through: <ul style="list-style-type: none"> Regular bulletins Website content Letter templates for providers to send to their parent and caregiver community (reiterating key messages, advising of wellbeing supports available) It is important to note that there are usually different requirements in school and early learning settings, than there are in the general public 	
<p>Six</p> <p><i>Support and contribute to Intelligence processes</i></p>	<ul style="list-style-type: none"> Provide SitReps as required Ministerial briefings 	<ul style="list-style-type: none"> Education liaison / connection point in DPMC COVID-19 Group Policy and Strategy Group Membership of five Regional Leadership Groups

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COVID-19 NATIONAL RESPONSE PLAN

New Zealand Defence Force (NZDF)

Objective number	Lead	Support
<p>One</p> <p><i>Enable effective decision-making & governance</i></p>		<ul style="list-style-type: none"> • Provide MBIE MIQ with Operations support
<p>Two</p> <p><i>Enable effective and coordinated support to the COVID-19 Health System response</i></p>		<ul style="list-style-type: none"> • Provide capability and resource support as required/available
<p>Three</p> <p><i>Coordinate efforts to contain COVID-19 by enabling effective National and regional mechanisms</i></p>		<ul style="list-style-type: none"> • Provide support to other government agency activities to the COVID-19 response both nationally and regionally as required/available e.g. MBIE led Managed Isolation and Quarantine Facilities, Police led regional checkpoints.
<p>Four</p> <p><i>Coordinate support for communities (including business) to minimise the social and economic impacts</i></p>		<ul style="list-style-type: none"> • Provide support to the wider NZDF community both nationally and internationally.
<p>Five</p> <p><i>Coordinate and align COVID-19 Communications & Engagement and local implementation of Public Information Management requirements</i></p>		<ul style="list-style-type: none"> • Provide consistency of messaging across the organisation and by example in the public domain
<p>Six</p>		<ul style="list-style-type: none"> • Provide specialist intelligence support to the DPMC COVID-19 Group response as required/available e.g. Insights and Reporting Group.

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COVID-19 NATIONAL RESPONSE PLAN

Support and contribute to Intelligence processes

- Support the flow of information for Managed Isolation and Quarantine capacity.

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COVID-19 NATIONAL RESPONSE PLAN

Te Kawa Mataaho Public Service Commission (PSC)

Objective number	Lead	Support
<p>One</p> <p><i>Enable effective decision-making & governance</i></p>	<ul style="list-style-type: none"> ● Continuity of Public Service leadership including Chief Executives ● AoG COVID System Workforce and Resourcing workstream including: <ul style="list-style-type: none"> ● enabling and coordinating critical workforce deployment linking available staff with areas of need. ● Public sector workforce guidance including: <ul style="list-style-type: none"> ● Issue workforce guidance for public sector management of staff ● Regular connection with Heads of HR on implementation of the guidance ● Agency implementation of the guidance and resolution of issues ● Communication, advice and issue resolution with PS on workforce guidance and related matters ● Staffing surge capacity across the public service including and not limited to prioritisation of BAU functions versus system COVID-19 requirements. 	<ul style="list-style-type: none"> ● Attend Chair of Chairs Public Service Commissioner and Deputy Public Service Commissioner
<p>Two</p> <p><i>Enable effective and coordinated support to the COVID-19 Health System response</i></p>	<ul style="list-style-type: none"> ● Assistant Commissioner support to Director-General of Health and to ensure MoH sustainability 	<ul style="list-style-type: none"> ● MoH in providing critical workforce resources where needed (MoH to lead this for health workforces) ● Reinforce public health messaging through workforce guidance and communication

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<p>Three</p> <p><i>Coordinate efforts to contain COVID-19 by enabling effective National and regional mechanisms</i></p>	<ul style="list-style-type: none">● MBIE Government Property Group (GPG) with alignment of workplace guidance with workforce guidance and communication/awareness through agency Heads of HR.	<ul style="list-style-type: none">● Facilitate Treasury advice or alignment on matters pertaining to Public Service workforce (e.g. redeployment of staff; pay restraint) with public finance obligations● MBIE management of the contingent contract workforce (tbc with MBIE)● MPI Government Health and Safety Lead (GHSL) alignment of health and safety guidance with workforce guidance and communication/awareness through agency Heads of HR● for DIA/GCDO in ensuring all agencies workforces are appropriately equipped to operate at all Alert Levels
<p>Six</p> <p><i>Support and contribute to Intelligence processes</i></p>	<ul style="list-style-type: none">● Public Service agency Heads of HR with regular intelligence, insights and guidance (via weekly TEAMS meeting and COVID enquiries email)	<ul style="list-style-type: none">● all agencies with intelligence, insights and feedback to enable achievement of their functions (via Assistant Commissioners)

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COVID-19 NATIONAL RESPONSE PLAN

Ministry of Social Development (MSD)

Objective number	Lead	Support
<p>One</p> <p><i>Enable effective decision-making & governance</i></p>	<ul style="list-style-type: none"> • Caring for Communities Governance Group (Chair) • Employment, Education & Training Governance Group (Chair) 	<ul style="list-style-type: none"> • Attend COVID Chairs Board (CCB)
<p>Three</p> <p><i>Coordinate efforts to contain COVID-19 by enabling effective National and regional mechanisms</i></p>		<ul style="list-style-type: none"> • MSD is based at the Auckland RIQCC coordinating the welfare response for people in Managed Isolation Facilities. • MSD provides funding for and contracts Community Connectors to work with people in Managed Isolation Facilities connecting them to a wide range of services and support.
<p>Four</p> <p><i>Coordinate support for communities (including business) to minimise the social and economic impacts</i></p>	<ul style="list-style-type: none"> • MSD plays a lead role in coordinating support for individuals, whanau and communities, including businesses, providing Income Support through our standard measures of assistance and extra measures (if activated) including <ul style="list-style-type: none"> ○ Wage subsidies ○ Leave support ○ Short-term absence payment ○ Job loss cover ○ Support for Temporary Visa Holders (until 31 August 2021) <p>Providing through our Māori, Communities and Partnerships arm Community Capability Funding and Food Secure Communities funding</p>	<ul style="list-style-type: none"> • Engage through C4C and NWCG to coordinate resurgence planning for emergency welfare services functions • Participating in Regional Leadership and CDEM Group activities • Emergency Accommodation needs and gap analysis in cooperation with MBIE, HUD, MoH and NEMA and other social sector agencies on housing issues • Follow housing guidance clarifying roles and responsibilities in the housing environment, and participate in an escalation group, if activated, to quickly address any issues that emerge at regional levels • Additional Task - work with MOH and NEMA to determine how processes and guidance applied in Auckland during the August AL3 lockdown can be applied through the rest of the country, for example the Complex Needs Escalation process.
<p>Five</p> <p><i>Coordinate and align COVID-19 Communications & Engagement and</i></p>	<ul style="list-style-type: none"> • MSD plays a lead role in the provision of welfare communications and C4C Communications. • linked into the DPMC COVID-19 Group PIM function, with lead for Welfare and C4C Communications 	

COVID-19 NATIONAL RESPONSE PLAN

<i>local implementation of Public Information Management requirements</i>		
Six <i>Support and contribute to Intelligence processes</i>	<ul style="list-style-type: none">MSD specifically supports this function through regular statistical releases on its website as well as contributing to situation reports.	<ul style="list-style-type: none">MSD is connected through the C4C channel (which has a specific intel and insights workstream lead by the Social Wellbeing agency)

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Annex 8. Readiness to respond

The table below sets out the activities that are required to be completed in order to be ready to successfully respond to a resurgence in a timely manner

Group	Tasks	Accountability
Governance and Assurance	Routine review of national policy settings	DPMC COVID-19 Policy
	Internal validation of Agency Plans, Inter-dependencies and Assumptions	All
	Validation of National Response Plan	DPMC COVID-19 Readiness
	Validation of Regional Resurgence Plans	NEMA
	Establishment of continuous improvement program	Risk and assurance
	Legislative orders established	DPMC COVID-19 Policy
Health Readiness	Issue Health System Plan	MoH
	Contact tracing system in place	MoH
	Ensure MIQF for community transmission	MoH
	Testing system in place with ability to surge	MoH
National Readiness	Issue National Response Plan	DPMC COVID-19 Readiness
	Issue Agency Plans	All
	Issue Alert Level, Boundary and Exemption Policies / Framework	DPMC COVID-19 Policy
	Develop a contingency plan for MIF/MIQF outages	MBIE
	Detail decision-making process for Immediate Response	DPMC COVID-19 Readiness
	Establish inter-Agency communications protocols	DPMC COVID-19 Readiness
Community Support	Agree on inter-agency roles and responsibilities	C4C
	Prepare system plan	C4C
	Vulnerable community identification and needs assessment	C4C
	Identify support channels	C4C

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Group	Tasks	Accountability
	Engage with Local government rep and ensure that their voice can be heard	DIA
Communications	Formulate public information campaign	DPMC COVID-19 Comms
	Engagement with regions and sub-regions	NEMA, DPMC COVID-19 Comms
	Engagement with government agencies, NGOs, Iwi and partners	DPMC COVID-19 Comms
Reporting and Insights	Draw on research to ensure continual improvement of the system	Insights
	Create inter-agency reporting protocols	Insights
	Draw on research to ensure continual improvement of the system	Insights
Support Activities	Identify resource requirements for resurgence	PSC
	Prepare for concurrent emergency management events	NEMA
	Scanning for future COVID-19 issues	MoH

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Annex 9: Templates to support Alert Level activation

Below is a list of templates required for use in response to resurgence of COVID-19 as at 15 February 2021. The status of the template is also listed (i.e. whether the template is up to date, needs review or whether other factors must be considered such as policy decisions). This table will be updated in line with template development.

Note that additional content will be added as planning for QFT evolves.

Template (by Alert Level)	Status
All Alert Levels	
Display of QR codes in workplaces and on public transport services	✓
Face covering requirements on public transport services (including domestic air transport services)	✓
Alert Level 2	
Boundary of alert level 2 area	Policy decision on boundary required at time of resurgence*
Workplaces to have contact tracing systems and processes	✓
1-metre and 2-metre physical distancing rules	✓
Physical distancing requirements in workplaces in alert level 2 area and any adjustments in specified workplaces	✓ Policy decision on whether food may be ordered at counter/table required at time of resurgence*
Social gatherings in alert level 2 area, default 100-person limit	✓
50-person limit for authorised funeral or tangihanga if the social gathering limit is 10 people	Policy decision on number limit for social gatherings required at time of resurgence*
Alert Level 3	
Boundary of alert level 3 area	Policy decision on boundary required at time of resurgence*
Physical distancing requirements on public transport services between alert level 3 area and alert level 2 area	✓
Permissions for category 1 and 2 travel between alert level 3 area and another alert level area	✓ Policy decision on permission for category 2 travel required at time of resurgence*
Stay-at-home requirements and permissions for essential personal movement in alert level 3 area	✓
Physical distancing requirements and adjustments for all individuals in alert level 3 area	✓

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Template (by Alert Level)	Status
Closure of premises unless alert level 3 requirements operating	✓
Workplaces to have contact tracing systems and processes	✓
Physical distancing requirements for workplaces and any adjustments in specified workplaces	✓
Prohibition on gatherings in outdoor places	✓
Alert Level 4	
Boundary of alert level 4 area	Policy decision on boundary required at time of resurgence*
Lock-down requirements and permissions for essential personal movement in alert level 4 area	Needs review
Physical distancing requirements for all individuals in alert level 4 area	✓
Closure of premises unless essential/critical business or service	✓
List of essential/critical businesses or services	Needs review
Workplaces to have contact tracing systems and processes	✓
Physical distancing requirements for workplaces and any adjustments in specified workplaces	Needs review
Prohibition on gatherings in outdoor spaces	✓
Transition options at Alert Level 3 or 4	
Allow people a certain period to return home	✓ Policy decision on whether to include this required at time of resurgence*

* All policy decisions are to be made in accordance with the process set out in the National Resurgence Response (Plan).

Needs review means it has been drafted based on what was used previously and has been updated in line with later refinements to the Alert Level 3 drafting, but has not been separately reviewed.

Annex 10. Acronyms

Acronym	Expanded Acronym
AOG	All of Government
BORA	New Zealand Bill of Rights Act 1990
C4C	Caring for Communities
CALD	Culturally and Linguistically Diverse Communities
CDEM	Civil Defence Emergency Management
CE	Chief Executive
DCE	Deputy Chief Executive
DG	Director General
DHB	District Health Board
DIA	Department of Internal Affairs
DPMC	Department of the Prime Minister and Cabinet
FENZ	Fire and Emergency New Zealand
IRT	Integrated Recovery Team
MBIE	Ministry of Business, Innovation and Employment
MFAT	Ministry of Foreign Affairs and Trade
MIN Edu	Ministry of Education
MIQ	Managed Isolation and Quarantine
MoH	Ministry of Health
MOJ	Ministry of Justice
MoT	Ministry of Transport
MPI	Ministry for Primary Industries
MSD	Ministry of Social Development
NEMA	National Emergency Management Agency
NRG	National Response Group
NRLT	National Response Leadership Team
NRP	National Response Plan
NZDF	New Zealand Defence Force

COVID-19 NATIONAL RESPONSE PLAN

Acronym	Expanded Acronym
NZP	New Zealand Police
PCO	Parliamentary Counsel Office
PHU	Public Health Unit
PMCSA	Prime Minister's Chief Science Advisor
PMO	Prime Minister's Office
PSC	Public Service Commission
QFT	Quarantine Free Travel
RLG	Regional Leadership Groups
SOG	COVID-19 Senior Officials Group
SOPs	Standard Operating Procedures
TA	Territorial Authority
TPK	Te Puni Kōkiri

PROACTIVELY RELEASED