





BORDER EXECUTIVE BOARD



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



MANATŪ AORERE

COVID-19 Response Weekly Report

8 October 2021

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Contents

	1. Status Summary	2
	2. COVID-19 Insights	7
	2.1 Insight of Note Written by the Department of the Prime Minister and Cabinet	7
	2.2 Insight of Note Written by the Ministry of Health	8
	3. Ministry of Health	
	3.1 Items to Note/Updates	
	3.2 Policy/Programme Updates	14
	3.3 Technical Advisory Group: Update	16
	3.4 Recent Communications Issues and Activities	
	3.5 Upcoming Publications	
	4. Managed Isolation and Quarantine Weekly Report	
	4.1 Items to Note/Updates	
	4.2 Operational Update	19
	4.3 Large Group Arrivals Update	22
	4.4 Upcoming Communications Issues and Activities	
	4.5 Fees	
	4.6 Emergency Allocation Applications	24
	4.7 Resolutions Update	24
	5. Border Executive Board Report	
	5.1 Key Issues Being Considered	26
	6. New Zealand Customs Service Weekly Report	27
	6.1 Items to Note/Updates	27
	7. COVID-19 Chief Executives Board	29
	7.1 Items to Note/Updates	29
	8. COVID-19 Independent Continuous Review, Improvement and Advice Group	29
	8.1 Items to Note/Updates	29
	9. Strategic COVID-19 Public Health Advisory Group	29
	9.1 Items to Note/Updates	29
	10. Business Leaders Forum	29
	10.1 Items to Note/Updates	29
	11. Community Panel	29
	11.1 Items to Note/Updates	29
	12. Government Modelling Group	
	12.1 Items to Note/Updates	
\checkmark	13. Upcoming Cabinet Papers	
	14. Appendix One - Weekly updates on Infection Prevention and Control (IPC) at the Border	31
•	15. Footnotes	32

	1.	Status	Summary
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Key		
Symbol	Colour	Meaning
	Green	On track, no roadblocks, no significant delays anticipated
•	Amber	Slow progression, some delays, some roadblocks present
	Red	Not progressing, on hold, significant delays

Border

Age	ency	Last Week	This Week	Agency Comment
Border Measures	он			Border Worker Testing Register As at 6 October, there were 274 Persons Conducting a Business or Undertaking (PCBU) covering 13,107 active workers in the BWTR. Two new PCBUs were added in the past week. 5,516 of the active workers are listed as working in MICF facilities and 7,191 at the air or maritime borders. Of thes,94 Percent have been compilant in meeting their mandatory testing requirements. 0 Hie border workers are listed as working in MICF facilities and 7,191 at the air or maritime borders. Of thes,94 Percent have been compilant in meeting their mandatory testing requirements. 0 Hie border workers are listed as working in MICF facilities and 7,191 at the air or maritime borders. Of thes,94 Percent have had two doses of the COVID-19 vaccine 0 S percent have had two doses of the COVID-19 vaccine 0 The romaining 1 percent represent workers in the BWTR who have not been vaccinated yet or have not been matched to their vaccination record due to the absence of NH-matching in the CIR. Border Workers Main O Elitop Order workers have opted into saliva testing, 50 percent are compilant in meeting their testing requirements. 0 Of the 1037 active workers is at 2115,930 on 6 October 15,014 individue and 1,003 businesses had registered with APHG, the saliva testing for those in managed isolation facilities for the two weeks at at 11,59am on 6 October 15,014 individue and 1,003 businesses had registered with APHG, the saliva testing provider engaged by the Ministry. On 5 October APHG conducted 1,846 saliva tests for permitted workers is at 11,59am on 6 October 15,014 individue and 1,003 businesses had registered with APHG, the saliva testing provider engaged by the Ministry. On 5 October APHG conducted 1,846 saliva test
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Agency	Last Week	and the second second	Agency Comment
Мон	•	•	 Testing requirements for workforce of permitted businesses operating under Alert Level 3 As part of the Ministry's targeted approach to COVID-19 testing in Auckland, the hospitality, retail and construction sectors operating under Alert Level 3 are asked to take part in surveillance testing of their workfor order to: quickly identify any new chains of transmission provide a level of assurance that there is a low risk of undetected community transmission prior to movement to Alert Level 2. This testing is not mandatory, but the Ministry is encouraging employers to support their workers to undertake two swab tests at least five days apart over two weeks while Auckland is in Alert Level 3. Groups already undertaking surveillance testing, such as permitted workers crossing Alert Level boundaries or border workers, do not need to undergo this additional testing.
MBIE	•	•	 Staff Testing Compliance reporting is at 97%, (same as last week), for staff who worked in the week of 27 September – 3 October. 3% of staff on site in the week of 27 September – 3 October are showing in the BWTR as overdue (130 workers). The Workforce Testing and Vaccination team will be following up with those workers. This week it was discovered that a hotel worker at the Sudima Rotorua hotel had not been signing into Who'sonLocation (WOL) on entry to work since early August. Instead they had used a screenshot of the sign-in to get past security. The worker has been stood down until they have two negative saliva tests and hotel has started a disciplinary process. More information is in the body of the report. Vaccinations The BWTR shows, of the workforce on site for the week of 27 September – 3 October, 97.6% have had two doses of the vaccine, 1 5% had one dose and 1% have vaccination status 'unknown'. Vaccination assurance follow-ups for those with an 'unknown' status in BWTR in the previous week found one breach of the Vaccination Order. An unvaccinated waste management worker was allowed on site to corrubish. More details on this are contained in the body of the report. There was one vaccine exemption granted last week by MBIE MIQ. This worker, a nurse in Auckland, had been identified as having been working on site with a vaccination other than Pfizer. This had not been picked through assurance checks as the vaccination information had been entered into BWTR showing the worker was compliant when they were not. This has been raised with the Ministry of Health. Two Ministerial exemptions have been granted to two workers with overseas vaccinations not currently covered by the Vaccination Order.
MBIE	•	•	 Saliva Testing As at 4 October, 545 MIQ workers opted-in to saliva testing. Saliva testing is currently operational across all active MIQF sites. We are working closely with the Ministry of Health on the proposed changes to the Required Testing Order in line with your expectations, and how these can be successfully rolled out. We are using all available communications channels to strongly encourage our workers to opt-in to saliva testing and for those workers at quarantine facilities to provide daily saliva samples while at work during this current outbreak.
МоН	•		• The situation was reviewed on 5 October by the Chief Medical Officer which approved a further pause in quarantine-free travel from New Zealand to Australia to be next reviewed on 12 October.
MFAT	•	•	 S7(b)(i), S7(b)(iii) Separately, Niue's Cabinet has approved, in principle, to commence limited returns for Niueans stranded in Auckland from 18 October. Passengers will be limited to 15 people per flight. This decision will remain un review depending on the situation in New Zealand. S7(b)(i), S7(b)(iii)

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Border (Continued)

Agency	Last Week	This Week	Agency Comment
MFAT	•		 One-way QFT The first QFT flight from Vanuatu arrived into Christchurch on 4 October carrying 153 RSE workers. Officials observed that health requirements were fully implemented. The next flight is scheduled into Auckland for 11 October. 56(b)(i) The first QFT flight from Samoa into Auckland is scheduled for 16 October. Work continues between New Zealand and Tongan officials, RSE industry, and Air New Zealand to set the date of the first QFT flight. Industry have given in-principle agreement to a flight potentially in early November. Industry workforce needs and the need to repatriate long-term workers remain the central issues. 56(a) Cook Islands repatriations The first repatriation flight for Cook Islanders and residents stranded outside of Auckland departed New Zealand, from Christchurch, on 7 October. All passengers were required to provide evidence of a negative COVID-19 test prior to departure and complete seven days in an MIQ facility on arrival. A second flight on 15 October will repatriate the remaining people who have been in Auckland. These passengers will be required to complete 14 days in MIQ. Cook Islands Prime Minister Mark Brown has separately announced an extension of restrictions on inwards travel until 5 November (NZT).

Managed Isolation and Quarantine and Return to the Community

Agency	Last Week	This Week	Agency Comment
MBIE	•	•	 Ventilation Systems Ventilation remediation work has been completed for seven facilities (30% of rooms across the entire portfolio). Six facilities are nearing completion and 12 more are underway. All allocated air filtration units for quarantine rooms have been installed. An additional 20 units have been requested by the Holiday Inn for the small corridors which run off their main corridors in their facilities. The in-parallel deployment of air filtration units for commons spaces for the two remaining facilities (Sebel Manakau and Rydges Auckland) is near completion. Further information about ventilation systems is outlined in the body of the report.
мон	•	•	 Additional returnee testing in MIQ Phase 1 of day 6/7 COVID-19 testing for returnees on the same floor (or proximity) of cases in Managed Isolation facilities (MIFs) has been introduced from 25 August. Phase 2 of Day 6/7 nasopharyngeal swabbing will be added to the routine testing schedule for all returnees arriving in MIFs from 30 September. That means returnees will now be tested on days 0/1, 3, 6/7 and 12. This change is in response to the more transmissible Delta variant, which has caused an increase in the number of day 12 positive tests in MIFs. This additional day 6/7 test will allow us to identify potential cases well before day 12, which in turn allows us to: organise quicker transfer to a quarantine facility (or quarantine zone of a dual-use facility), thereby reducing the risk of in-MIF transmission o ensure there is adequate time for source investigations and public health risk assessments to be completed before day 12, in order to limit the impact on other returnees who may otherwise need to stay longer o identify any potential cases of in-MIQF transmission earlier using a risk-based approach o collect more data and information on the length and latency of COVID-19 and the Delta variant. This change is part of our ongoing refinement of the MIF system, as we learn more about how the virus works. Onsite health teams will use their clinical discretion to determine whether testing is conducted on day 6 or day 7, in relation to their workload and testing capacity at the facility on those days.
Arg MBIE	•	•	 Renewing Contracts We now have the legal contracts for 29 facilities, with three further contracts currently out for signing. Work continues to finalise the Services Agreement with the Quality Hotel Elms, Christchurch. We are working to finalise a contract variation with the Ramada Auckland to extend their contract past December to provide coverage for the 501s in the absence of QFT with Australia resuming.
MBIE		•	 Self-Isolation Pilot As at 5 October, we have received 484 expressions of interest covering 592 participants (498 for travel to Auckland and 94 for travel to Christchurch). We provided a briefing [2122-1284] on 6 October seeking your decisions on key operational matters.
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Managed Isolation and Quarantine and Return to the Community (Continued)

Agency	Last Week		Agency Comment
MBIE	•	•	 Fees collection Ongoing invoicing has almost caught up with automatic invoicing and we are now up to returnees leaving MIQ on 13 September. We are currently investigating the treatment of Afghanistan returnees, aircrew and border averters. Aircrew invoicing is being tested currently and we plan to have all airline invoicing up to date by the end of the week. A solution that will allow credit card payments is in the build stage. Self-Isolation Trial We are beginning work to invoice returnees in the self-isolation trial, which will be manual until a longer term process can be built. Debt Recovery Of the now 657 invoices worth \$2.13m sent to a debt collection agency: \$172k (up \$50k, 8%) has been paid (or will be paid through instalment), \$300k is currently awaiting information from customers or has been credited due to an error, a further \$191k (this includes the no address/overseas category) requires more detailed tracing, \$31k is classed as a broken arrangement; and the remaining \$1,467k (includes the passive collection) debt continues to be a work in progress. 1,253 invoices worth \$4.12m have now been passed to MBIE's partner firm for active management. They will commence work on these over the coming weeks.
MBIE	•	•	 P2/N95 Mask Implementation Following consultation with employers, unions and workers, MBIE has confirmed that it will be mandatory for non-health workers to wear fit checked P2/N95s masks and to be fit tested. We are communicating the decision to employers, unions and workers from the week of 4 October. It will become mandatory to wear the fit checked P2/N95 masks from 5 working days after the decision is communicated. The team is working with the Regional Isolation Quarantine Command Centres to understand how to best roster the 4,200 workers who will be fit tested. Procurement and ICT activities are under way to ensure that fit testing of all workers can commence from October.

Community Protection

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Agency	Last Week		
МоН	•	•	 As at 9:00am 6 October, there have been 1,420 community cases associated with the Delta Community Outbreak, an increase of 39 since the day prior. Of these, 334 are active cases, 1,085 are recovered and there has been one death. As at 6 October, there are 32 cases linked to the Auckland Community outbreak who are currently in hospital. As at 6 October, there are 1,410 open contacts. Of these, 72 are Close Plus contacts and 697 are Close contacts. As at 9:00am 6 October the testing sites in operation are as below: In Waikato there are 6 testing sites for the public, 1 CTC and 5 pop-ups. In Auckland there are 21 testing sites for public, 6 usual CTCs and 15 pop up sites.
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Vaccinat	ion	
Agency	Last Week	Agency Comment on Status of Focus Area
МоН	•	 As at 5 October 2021 5,467,111 vaccinations have been delivered, including 2,105,686 people who are fully vaccinated. As at 5 October 2021, 14,338 vaccinators have completed COVID-19 vaccinator training 9,215 vaccinators have actively vaccinated in the programme so far. As of 5 October 2021, Book My Vaccine holds 1,009,471 future bookings at 723 sites. Over 80 percent of people aged 12+ are booked or have been vaccinated with at least one dose. This figure is over 93 percent for th 65+ age group. The expected Pfizer delivery of 300,960 doses arrived as scheduled. The major milestone of 2 million fully vaccinated people was reached on 3 October 2021. The My Covid Record web application was announced on 5 October 2021, with the first phase, allowing people to view their vaccinated against COVID-19. The use of drive-through clinics continues to be a successful method of increasing vaccine uptake, particularly among Maori, Pasifika, and disabled people.

Resurgence Planning and Response

A STATE OF S	Last Week	This Week	Agency Comment on Status of Focus Area
DPMC	•		 National Response plan Q4 has been released to agencies on 1 October. Ministerial process around redactions is underway for proactive release and a media plan for a low-key release is being developed. National Response Transitional Planning is underway.
МоН	•		On 4 October 2021, the PM announced that Auckland would remain at Alert Level 3 but with several key changes. People will be able to connect with loved ones outdoors with no more than two households at a tin to a maximum of 10 people; early childhood education will return for all; and people can move around Auckland for recreation.
DPMC	•		 A webinar was scheduled for 4 October, with Waikato Region RLG, DHB and CEs to present to the wider system on what went well in their response, and what they would have done differently to prepare better. The had to be cancelled due to the escalation in the Waikato outbreak. A webinar will be scheduled in the next few weeks. Readiness are reviewing the short and longer term outcomes noting the PM's comments on entering a transition phase, and how the team can best support readiness efforts across the system. A report will be prest to the CCB once the workstream has been mapped out.
MBIE	•	•	 MIQ's Response to the Delta Outbreak: Community cases The need for quarantine rooms in Auckland has started to increase again. Specialist planning for managing difficult community cases is being progressed in Auckland. Planning is underway to support the Health system's quarantine requirements outside of Auckland where possible.
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2. COVID-19 Insights

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

2.1.1 Countries' Approaches to Recognising COVID-19 Vaccines

This insight gives a brief overview of the COVID-19 vaccines recognised by various countries, and their approach to the arrival of people with vaccines that are not being used in their country. This insight is intended to be brief, and further analysis is available if required.

Which COVID-19 vaccines are recognised by most countries?

The most commonly-approved COVID-19 vaccines worldwide are generally those that have been granted Emergency Use Listing by the World Health Organization,¹ following a process of assessing the safety and efficacy of vaccine candidates. These are AstraZeneca, Covishield, Janssen, Moderna, Pfizer/BioNTech (Pfizer), Sinopharm, and the Sinovac vaccine.² Sputnik-V is also widely used, but has not been approved by the World Health Organisation under the Emergency Use Listing.³ Approximately 124 further COVID-19 vaccines are in the process of clinical development, with 194 in pre-clinical development.⁴

There are various approaches to COVID-19 vaccine recognition, which are summarised below.

- In the United States, European Union, United Kingdom, Australia, Canada, and Japan, approval has generally been extended to four main vaccines: AstraZeneca, Janssen, Moderna, and Pfizer.⁵ Some countries also recognise others, such as Canada, which permits some of the internationally-produced versions of the COVID-19 vaccine, such as Covishield.⁶
- Countries in the Middle East and Asia have generally adopted a slightly broader strategy, recognising AstraZeneca, Janssen, Moderna, and Pfizer, with other vaccines utilised in some countries to relieve supply constraints such as Novavax, Sinopharm, Sinovac, and Sputnik-V, ⁷ as well as domestically produced vaccines. However, China limited approval to six domestically-produced vaccines: Anhui Zhifei, CanSino, Minhai, Sinopharm (Beijing), Sinopharm (Wuhan), and Sinovac. ⁸
- Latin America generally recognises the majority of the vaccines which have been listed by the World Health Organisation, with the exception of Moderna; with some countries also recognising other vaccines, such as Sinopharm, Sinovac, and Sputnik-V, as well as domestically produced vaccines.⁹
- 143 low-income countries are largely reliant on COVAX supplies.¹⁰ COVAX is a global alliance that aims to enhance vaccine access by distributing donated vaccines to poorer countries.¹¹ The COVAX scheme includes those vaccines recognised by the World Health Organisation: AstraZeneca, Covisheild, Janssen, Moderna, Pfizer, Sinopharm, and Sinovac.¹² However, only Astrazeneca and Pfizer have been delivered to date, with only 2.3% of people in low-income countries receiving at least one dose.¹³

Which are the COVID-19 vaccines that are not recognised by most countries?

Some countries have made domestically-produced vaccines which are generally not in use beyond the countries in which they have been developed. They have not been granted Emergency Use Listing by the World Health Organisation, and are not widely recognised.¹⁴ These include: Abdala in Cuba; COVIran Barekat in Iran;¹⁵ Bharat Biotech: Covaxin and ZyCov-d in India;¹⁶ ¹⁷ the Anhui Zhifei Longcom/Zifivax COVID-19 vaccine,¹⁸ CanSino, and Kconvac, in China;¹⁹ CoviVac,²⁰ and EpiVacCorona in Russia;²¹ and Qazvac in Kazakhstan.²²

How are different countries approaching the situation where incoming people do not have a COVID-19 vaccine they recognise?

Most countries and regions analysed differentiated their approach to arrivals that are vaccinated with COVID-19 vaccines they recognise, from others, for the purposes of testing and quarantine requirements. There are some exceptions such as in Asia and Latin America, where there are countries that have no difference in approach, requiring everyone to quarantine.

Implications

Going forward, a primary issue confronting authorities will be vaccination certification including how COVID-19 vaccination status is established and verified. The United Kingdom for example was criticised by some when they released their entry requirements for the COVID-19 vaccine and did not recognise vaccination records from some countries.²³ Similarly, the European Union faced a diplomatic and trade fallout when they did not recognise COVISHIELD, an Indian-produced equivalent to the AstraZeneca vaccine which is widely-distributed through the COVAX initiative.²⁴

2.2 Insight of Note Written by the Ministry of Health

2.2.1 COVID-19 International Perspectives: 6 October 2021

Global daily new COVID-19 cases have been declining since late August, although almost 450,000 COVID-19 cases and 7,500 deaths are still being reported daily.²⁵ New cases in Oceania and Europe are increasing, those in North America, Africa and Asia are declining, those in South America are plateauing.²⁶ Over 3.1 million cases and 30,000 deaths were reported in the last week. 234 million cases (~3% of the global population) and 4.8 million deaths have been reported in the pandemic to date.²⁷ Limited testing and challenges in the attribution of causes of death in some countries means that the true number of confirmed cases and deaths are likely to be significantly underestimated.²⁸ Approximately 34% of the global population is fully vaccinated and a further 12% have received one dose.²⁹ The Delta variant and its sub-strains continue to increase in prevalence worldwide and are dominating in most countries with sufficient sequencing rates.³⁰

Given the very high vaccination rates and subsequent full reopening, Portugal has been included in the following summary. New Caledonia has also been included because of the current outbreak and relatively low vaccination rates compared to other countries in the Pacific. This is contextually relevant to countries within the Realm of New Zealand. Given that New South Wales was previously following a similar strategy to New Zealand, the insights gained from the analysis of their COVID-19 strategies in the current outbreak is beneficial and relevant to informing future responses to the current Delta Outbreak.

Portugal

- After experiencing in January 2021 what was then one of the greatest surges of infections worldwide, with daily new cases peaking at over 16,000 and over 300 deaths per day, new cases and deaths have since plummeted.³¹
- An average of just over 600 cases and five deaths are being reported daily and hospitalisations are around 5% of that at their peak.³²
- Portugal steadily accelerated its vaccination campaign over the year and now leads the world in terms of the proportion of the population fully vaccinated.³³
- At the peak of the vaccine rollout, an average of 150,000 doses were being administered per day to the population of 10.3 million. Now 85% of the population are fully vaccinated, about 98% of those over 12.³⁴

On 1 October Portugal lifted almost all remaining COVID-19 restrictions, allowing full occupancy in restaurants and cultural venues.³⁵ Among the few measures that remain in place, mask-wearing is compulsory on public transport, at large events, in nursing homes, hospitals and shopping venues.³⁶ There will no longer be limits to the number of people allowed to attend cultural events, weddings and baptisms.³⁷ Digital certificates or negative tests will no longer be mandatory in hotels and gyms but will still be required for air or sea travel, or to attend major cultural or sporting events.³⁸

While many nations have seen vaccination levels plateau when coverage reaches 60-70%, Portugal has vaccinated most eligible individuals despite initially encountering misinformation and doubt around vaccines.³⁹ Existing Portuguese attitudes to vaccines were positive, the national vaccination programme was already well established due to a large polio outbreak in mid-twentieth century; and the vaccine hesitant and anti-vaccine population are thought to be in the minority.⁴⁰



The success has also been attributed to the figurehead Admiral Gouveia e Melo, a navy general and coordinator of the Portuguese COVID-19 Vaccination Plan Task Force.⁴¹ In regular televised appearances, his public rhetoric focussed on portraying the COVID-19 response as a war to be fought, and he was largely seen to be detached from politics and politicians.⁴² Vaccines were administered in 'production lines' in large sports centres. Medical professionals were shown receiving vaccinations to emphasise the safety of the vaccine.⁴³

The use of "influencers" has also been a key strategy for Portugal, 5000 micro-influencers trained by the Directorate-General of Health to help convey COVID-19-related health information to local communities, sharing up-to-date health information tailored to local needs, concerns and conditions from familiar and trusted voices in the community.⁴⁴ In addition, feedback has been provided to national health authorities on how information and restrictions are being received in local communities, and any misperceptions that may have evolved.⁴⁵ Portugal may soon start offering booster doses to older and vulnerable people.⁴⁶



<u>New Caledonia⁴⁷</u>

- Since an initial three Delta COVID-19 cases reported four weeks ago sparked an outbreak in New Caledonia, a total of 8,142 cases and 157 deaths have been reported in the French territory since the last of the pandemic.⁴⁸
- The initial three cases were geographically distant, not linked to each other or to international travel, prompting a swift, strict national lockdown.⁴⁹
- Currently, a 7-day average of 946 new cases are reported per day and 277 cases are in hospital and a further 109 are being cared for in hotels. Prior to this outbreak, New Caledonia had reported 136 cases and no deaths.⁵⁰
- Despite having well-developed healthcare capacity, which can expand to a total of 80 ICU beds, hospitals are at capacity.⁵¹ France has sent medical staff and equipment to establish additional hospital and ICU capacity.⁵²
- Prior to outbreak, only 25% of the population were fully vaccinated. Since then, the demand for vaccines has increased in the population.⁵³ As of 28 September 2021, 29% of the population are fully vaccinated and 20% have received one dose.⁵⁴

The current lockdown, in place since the beginning of the outbreak and likely to be extended, includes mandatory mask use outside of the home, a curfew, closure of schools, universities and non-essential businesses and a ban on all gatherings. Strong police enforcement has been in place.⁵⁵



The New Caledonian congress passed a mandatory vaccination law, obliging all of those over the age of 18 to be vaccinated by the end of the year.⁵⁶ It is expected that France's Passe Sanitaire "health pass" will be introduced this week, which is likely to exclude unvaccinated individuals from participating in parts of public life, as in mainland France.⁵⁷ These actions have prompted protests. The government aims to administer 25,000 doses per week and to fully vaccinate 80% of the population by December.⁵⁸ The French government also issued a requirement for those entering New Caledonia to be fully vaccinated on 17 September 2021. The current lockdown remains in force, but the government has decided to reopen schools.⁵⁹



New South Wales (NSW)⁶⁰

- The current outbreak in NSW began when the first case was reported on 16 June 2021 in an international airport driver.⁶¹ Initial public health restrictions were instituted, including mandatory mask wearing on public transport in some suburbs, as well as, contact tracing.⁶²
- On 26 June 2021, 10 days after the initial case was reported, and in response to rapid growth in the outbreak to 82 cases, NSW implemented a series of stay-at-home orders for parts of the state, including Greater Sydney.⁶³ These initial restrictions were relatively lenient and permitted funerals with attendees under 100 people, and outdoor exercise with up to 10 people, with relatively wide definitions of essential workers.⁶⁴ 43 percent of cases reported during this period were infectious in the community.⁶⁵ This prompted a stricter lockdown for the local government areas of concern in late July 2021, 33 days following the detection of the initial case.⁶⁶
- To date, those in Greater Sydney have spent the past 14 weeks in varying states of lockdown.⁶⁷
- Cases have begun to trend downwards, likely due to ongoing lockdown restrictions and rapidly rising rates of vaccination. To-date 67.5% of individuals over 16 years of age are fully vaccinated and an additional 21% having received one dose.⁶⁸

On 27 September 2021, the NSW Government announced its three-stage plan for easing current lockdown restrictions between mid-October and 1 December 2021.⁵⁹ Stage One will commence once 70% of the adult population is fully vaccinated, which is expected by 11 October 2021.⁷⁰ Stage One will lift stay-at-home orders for vaccinated residents.⁷¹ Once 80% of the adult population is fully vaccinated, Stage Two will commence, where limits on individuals permitted in venues and facilities will be eased or removed entirely, although social distancing will still be required for indoor venues.⁷² Travel restrictions within NSW will be removed and masks will remain mandatory for all public indoor premises and settings.⁷³ Most freedoms will only be extended to vaccinated individuals.⁷⁴ Stage Three will commence on 1 December 2021 irrespective of the vaccination coverage.⁷⁵ Social distancing will be reduced, and most remaining caps on customer numbers will be removed.⁷⁶ Masks will remain mandatory on public transport, aircraft, and airports.⁷⁷ These freedoms will apply even to the unvaccinated. Lockdowns may still occur but are likely to be localised.⁷⁸



3. Ministry of Health

3.1 Items to Note/Updates



3.1.1 Health System Readiness Work Programme Update

This item updates you on the work underway in the Health System Readiness Programme (the Programme).

A significant priority for the Ministry is to build health system readiness so it can manage COVID-19 in a sustained and sustainable manner. This is being delivered through the Programme. The key objectives of the Programme in reconfiguring the health system to manage COVID-19 cases in the community are two-fold:

- keep the number of people who get COVID-19 as low as possible
- manage people with COVID-19 with the optimal level of appropriate input to meet health and social needs.

This involves a required system effort switch from a health system inundated and resourced against COVID-19 activities, towards a health system that can adequately manage COVID-19 in the community.

Under the Project Management Office, there are currently nine work programmes of new and existing programmes, projects, initiatives, and activities that are being delivered to operationalise health system readiness for COVID-19 in the broader community. The current nine work programmes and their accompanying aims are:

- Public health: ensuring future COVID-19 incursions through more open borders can be kept to management levels
- Workforce: maximising productive use of existing workforce, whilst reducing the demand on workforce
- Environment, facilities, and supplies: ensuring an increase in hospitalisations can be managed by the health system
- Models of care: managing people with COVID-19 with the optimal level of appropriate input to health and social needs
- Northern Region Resilience Plan: ensuring lessons from our journey, and Delta, are incorporated across the sector
- Maori equity, Pasifika equity, and disability equity: ensuring equitable distribution of resources across communities and regions
- Data and digital: enabling decision-making through high level surveillance
- Funding: investing in system-wide initiatives to be able to adequately respond
- DHB resilience and readiness planning: readying the health system to be more agile, better equipped, and more vigilant.

The key focus of these work programmes includes delivery of initiatives over the immediate four to six weeks, six months, and 12 months. A structured and consistent approach to programme reporting will be adapted from the COVID-19 Vaccination & Immunisation Programme reporting. The first key activity of the Project Management Office is to aggregate all nine existing readiness programme activities into a 'programme on a page' summary document. A first draft is due by mid-October 2021. A communications approach is in development to ensure key messages can be cascaded across the sector.

The Programme, governance structure, and accompanying Assurance Group, and Steering Group membership is provided in Figure 1 and Tables 2 and 3 below. Membership has occurred through direct appointment by the Director-General of Health and the Ministry's Deputy Chief Executive, Sector Support and Infrastructure. The Steering Group had its inaugural weekly meeting on 30 September. Following an initial risk workshop, the inaugural fortnightly Assurance Group meeting is scheduled for 15 October.



Figure 1: Health System Readiness Programme's governance structure

Table 1 Assurance group membership

Member	Role
Ken Whelan, Chair	Whanganui DHB Chair, Crown Monitor
Dr Ashley Bloomfield	Director-General of Health
Robyn Shearer	Deputy Chief Executive, Ministry of Health (Ministry)
Andrew Connolly	Chief Medical Officer, Ministry
Colin MacDonald	Independent contractor (ex-Chief Executive DIA)
John Whaanga	Deputy Director-General Māori Health, Ministry
Dame Dr Karen Poutasi	Commissioner, Waikato DHB
Murray Jack	Professional Director
Dr Samantha Murton	President of the Royal NZ College of General Practitioners, GP
Hon Steve Maharey	Chair of Pharmac, Chair of ACC, Governance Group Finance, Information and Procurement MoH, COVID-19 Governance Group Ministry

Table 2 Steering Group membership

Member	Role/Representation
Andrew Connolly, Chair	Chief Medical Officer, Ministry of Health (Ministry)
Dr Ashley Bloomfield	Director-General of Health
Robyn Shearer	Deputy Chief Executive, Ministry
Amy Wilson	Deputy Director-General Health Workforce, Ministry
Andrew Norton/Martin Hefford	Transition Unit
Kristen Stephenson	COVID-19 Health Response, Ministry
Dan Coward	DHB Chief Operating Officer, Chair
Fergus Welsh	Chief Financial Officer
Gerardine Clifford-Lidstone	Director Pacific Health, Ministry
Dr Jeff Lowe	Chair, GPNZ
John Whaanga	Deputy Director-General Māori Health, Ministry
Lorraine Hetaraka	Chief Nursing Officer, Ministry
Caroline Flora	Associate Deputy Director-General System Strategy and Policy, Ministry
Martin Chadwick	Chief Allied Health Professions Officer, Ministry
Dr Nick Chamberlain	CEO, Northland DHB
Russell Simpson	Chief Executive, Whanganui DHB, SRO
Simon Everitt/Dr Don Matheson	Public Health Agency
Sarah Fitt	Pharmac CEO
твс	Māori representative
TBC	Pacific representative
твс	Community representative

Next steps

The first task is to collate all the current COVID-19 related activities, and identify their inter-dependencies and key milestones, so that we have a whole-of-sector view.

Then we will operationalise the governance structure - the Steering Group has had its first meeting, and the Assurance Group is having its first meeting next week.

We are identifying scalable initiatives for both the primary and acute sectors. For example, where good practice is occurring in particular areas, we will support the sharing of that experience with other DHBs, either



directly, through forums, or through other means. We are also considering lessons learned from the current COVID-19 outbreak in Auckland, working with the Northern Region Resilience Planning Group, who presented their reflections to the Steering Group this week.

We will update you on the work programme through the Weekly Report.

3.2 Policy/Programme Updates

3.2.1 COVID-19 Vaccine and Immunisation Programme

As at 11.59 pm on 5 October, 5,467,111 vaccinations have been delivered, including 2,105,686 people who are fully vaccinated. Of those fully vaccinated, nine percent are Māori, six percent are Pasifika, and 18 percent are Asian.

329,208 Māori have received their first dose of the COVID-19 vaccine, which represents ten percent of the total population who have received their first dose as at 5 October.

703 sites were active on 5 October.

Group 4 rollout

Everyone aged 12 and over is now eligible to book a vaccination appointment as of 1 September. Uptake among the 12-to-15-year-old cohort has been particularly strong, with more than 70 percent of this group having received or booked at least one dose. Uptake in this group has been faster than in any other age group.

On 3 October the Programme passed the major milestone of two million people being fully vaccinated. More than 85 percent of the eligible population of Auckland has now received at least one dose of the vaccine, while 80 percent of the eligible population have received their first dose nationwide.

Equity

Further work is underway to identify the demographic traits of the 'yet to engage' population. The variables being analysed (alongside ethnicity and age) include deprivation, rural/urban and access times. Engagement with Whakarongarau is also underway to understand what other metrics we might add to this dataset.

The Programme is focussed on improving uptake of the vaccine. This includes supporting innovative approaches to vaccine uptake, providing contract flexibility where it is needed, ensuring mobile options are in place where they are needed to reach whanau, and to target vaccination communications and access for particular cohorts of people.

DHBs are providing a range of services to meet the needs of disabled people within their areas. These include mobile vaccination services, residential disability services and, in some instances, home visits. While not always possible under higher alert level conditions, home vaccinations continue to be delivered across the majority of the country.

The Ministry of Health, DHBs, and the Ministry of Housing and Urban Development are working with providers of transitional housing to boost vaccinations among the homeless, utilising the existing trust and relationships these providers have established with this cohort.

Mandatory vaccination of healthcare workers

Consultation is ongoing with key stakeholders regarding a proposal that requires the majority of healthcare workers to be vaccinated against COVID-19.

While vaccination uptake is high in some parts of the sector, we need vaccination rates to be higher across this workforce to protect healthcare workers and the wider community better from COVID-19.

Our consultation will include health unions, professional associations, the Office for Disability Issues, the Privacy Commissioner, Māori representatives and aged care employers.

Workforce

As at 5 October, 14,338 vaccinators have completed COVID-19 vaccinator training and 9,215 vaccinators have actively vaccinated in the programme so far.

The pool of trained vaccinators is expected to continue to increase over the coming months. The Immunisation Advisory Centre (IMAC) has advised that there has been a surge in the registrations and completion of vaccinator training.

The Hands Up database has over 16,500 registrations as at 5 October. The workforce team is developing guidance to support DHBs with a quick process for recruitment that reflects the need to recruit staff quickly and under various alert levels.

Book My Vaccine

As of 5 October, Book My Vaccine holds 1,009,471 future bookings at 723 sites.

General practice and pharmacy rollout

Onboarding of primary care continues to progress well. There are now more than 700 active primary care sites, with the number of pharmacies in particular increasing considerably. There are now more than 350 pharmacies onboarded to provide COVID-19 vaccinations across New Zealand.

Technology

The My Covid Record web application was announced on 5 October. The first phase of this, which allows people to view their vaccination records, will go live next week. The digital COVID-19 vaccination and test result certificates will be available in late November 2021.

Work is ongoing to enable registration of overseas vaccinations into the COVID-19 Immunisation Register, which will allow these records to be visible in the My Covid Record app.

Supply

The expected Pfizer delivery of 300,960 doses arrived as scheduled.

Overall wastage is tracking well at around 0.18 percent week to week, well below our own target of less than 2 percent. This translates to around 155 vials. An effective immunisation programme recognises that some wastage is inevitable.

New Zealand support for vaccine roll-out in the Pacific

The Cook Islands and Niue will begin the rollout of the vaccine for their 12 to 15-year-old population group in early October.

Planning is underway with Samoa, Tonga, and Fiji on plans to vaccinate their 12 to 17-year-old cohorts using the Pfizer vaccine. We are expecting vaccine delivery to the three respective countries to commence in October.

3.3 Technical Advisory Group: Update

CVTAG

The COVID-19 Vaccine Technical Advisory Group (CVTAG) is scheduled to meet on 5 October and an update will be provided in a future Weekly Report.

TAG

The COVID-19 Technical Advisory Group (TAG) is scheduled to meet on 15 October and an update will be provided in a future Weekly Report.

CTTAG

The COVID-19 Testing Technical Advisory Group (CTTAG) is scheduled to meet on 14 October and an update will be provided in a future Weekly Report.

Therapeutics TAG

The COVID-19 Therapeutics Technical Advisory Group (Therapeutics TAG) met on 1 October 2021 and discussed the following items.

- therapeutics: update on COVID-19 therapeutics supply
- therapeutics: prioritisation criteria
- guideline update
- patient information update
- equity considerations
- therapeutics: clinical trials including in primary care/community.

The next Therapeutics TAG meeting is scheduled for 15 October and an update will be provided in a future Weekly Report.

3.4 Recent Communications Issues and Activities

As at 5 October 2021

Date	Activity	Lead agency	Comms material	Ministerial Involvement
5 Oct 21 ongoing	Auckland outbreak: daily communications and support for the health sector and public, incl. cases in North West Waikato. Locations of interest and updated health advice.	Ministry of Health	Communications, key messages, website, stakeholder engagement	Optional
5 Oct 2021	Announcement of further changes to boundary crossing rules, for relocation and returning home.	DPMC/ Ministry of Health	Web content, talking points, operational comms	Yes - announcing
5 Oct 2021	Announcement of additional testing in MIQ at day 6.	Ministry of Health /MBIE	Web content, talking points, operational comms	Optional
5 Oct 2021	Announcement of further details of self-isolation pilot.	MBIE/ Ministry of Health	Web content, talking points, operational comms	Yes
05 Oct 2021	Announcement of COVID-19 Amendment Bill.	Ministry of Health /DPMC	Web content, talking points	Yes
5 Oct 21	The Middlemore Hospital rapid antigen testing pilot is underway and exploring use in other high-risk settings.	Ministry of Health	Talking points, web content	Optional



3.5 Upcoming Publications

Title	Date	Context	ELT contact
Publication: Getting through	December	The National Ethics Advisory	Clare Perry, Deputy Director-
Together	2021	Committee's publication Getting Through Together considers the ethical issues that may arise during any pandemic. The emphasis is on using shared ethical principles so people can care for themselves, their whānau and their neighbours, and make decisions. This is updated from the 2007 version.	General, Health System Improvement and Innovation,

4. Managed Isolation and Quarantine Weekly Report



MINISTRY OF BUSINESS, INNOVATION & EMPLOYMENT

4.1 Items to Note/Updates

4.1.1 MIQ's response to the Delta outbreak

We have seen an increase in community cases and close contacts coming into Auckland MIQ over the past few days. This trend is expected to continue.

We continue to work on ways to strengthen our response to the more difficult cases coming into MIQ from the community in Auckland. Work is underway to house high risk individuals in a single wing with heightened Police, security, health and cultural services available.

We are carrying out contingency planning should MIQ be asked to support the Health system for the Hamilton event. We are also contingency planning should we be asked to provide community isolation or quarantine beds in other locations where MIQ has facilities. This includes updating previous work on which levers could be used should we be directed that community beds take precedence over those arriving over the border.

4.1.2 Self-Isolation Pilot

The online Expressions of Interest (EOI) process successfully went live at 9AM on Thursday 30 September and remains open until 9 October. As at 5 October, we had received 484 EOIs covering 592 participants (498 for travel to Auckland and 94 for travel to Christchurch).

We look forward to receiving your confirmed selection of official delegation participants by 9 October in order to meet our other timelines and ensure that businesses have sufficient time to provide evidence and make travel and accommodation bookings.

We provided a briefing [2122-1284] on 6 October seeking your decisions on key operational matters.

4.1.3 Lobby Release

The third lobby release opened about 20 minutes before 11am on Tuesday 5 October.

At 12 noon 25,100 people were moved into the queue — this was randomised, as part of the lobby process.

This number continued to grow as people entered the queue throughout the room release (these people go to the back of the queue). There were 28,406 people in the queue in total.

Rooms started being released at 12 noon and were gone by 2:06pm.

6,449 people from 126 countries managed to secure MIQ vouchers across 3,739 rooms.

Following last week's release we identified that some users were members of more than one group in the lobby. We contacted 7 users to validate that the other members of their group had valid identities and are working through their responses. Where we find that people have entered fake identities as part of their lobby group, users will be notified that their vouchers will be cancelled and accounts suspended as this breaches our terms of use.

Q

This can occur at the moment because passport numbers are not validated at the lobby step, but they are validated afterwards when people get through to the MIAS system. We are working with our Customer Portal team to achieve up-front validation. We are also working through some possible changes to the lobby to tighten the settings – such as all members of the group having to enter their passport numbers rather than just one.

The next lobby release will be on the 12th of October. We are planning to release approximately 3,000 rooms (subject to handbacks) for the period of November – January.

4.1.4 MIQ's role in Afghanistan evacuation

A total of 428 evacuees from Afghanistan have arrived in New Zealand. The table below shows the MIQ status of the Afghanistan evacuation programme as at 10am Wednesday 6 October:

Place	Category	Number	Notes
Naumi MIF	Evacuees	23	
Pullman MIF	Evacuees	1	
Jet Park QF	Evacuees	0	
Rydges MIF	Evacuees	0	Group of 5 departed 5/10/2021
Waipuna MIF	NZDF	1	
TOTAL Returnees in MI		25	Total Departed MI: Afghan Nationals 404 (plus baby), NZ National 1, AOG Staff 89

The last of the AoG staff that deployed to AMAB will depart managed isolation on 7 October.

Expected Arrivals: There are 11 people in three family groups S6(b)(i) who have active emergency allocation requests. A further group of at least 35 Afghan nationals are expected to cross into S6(a), with a view to travelling to NZ on or about 18 October. This group have also submitted individual emergency allocation requests. MFAT are also tracking an additional 30 Afghan nationals who intend to travel to NZ in coming weeks.

The AoG working group is making good progress in establishing a robust BAU process for managing future evacuees from Afghanistan, but this process is likely to be made difficult by the increasing trend of groups of evacuees engaging third party agents to coordinate their travel. These agents are not always liaising with MFAT which means evacuees can arrive in New Zealand unannounced. MIQ Operations is working with the MIQ Exemptions team to cross-reference inbound evacuees by their Emergency Allocation requests.

4.2 Operational Update

4.2.1 Capacity Update - As at 6 October

A total of 41,896 vouchers have been released on MIAS for the period of June through to the end of January 2022.

129,991 returnees have secured a voucher to return home from March through to the end of January 2022.

Returnees from over 180 countries have successfully secured a voucher to travel during this period.

4.2.2 Ventilation

Ventilation remediation work continues for the remaining facilities in parallel with the deployment of air filtration units for the remaining two facilities' common spaces. All allocated air filtration units for quarantine rooms have been installed. An additional 20 units have been requested by the Holiday Inn for the small corridors which run off their main corridors in their facilities.

The ventilation remediation at Four Points commenced on 1 October as planned and is on track to be completed prior to a cohort arriving on 10 October.

The last 13 of 203 air filtration units were delivered to Jet Park Auckland on Friday. The installation of air filtration units into the quarantine rooms of the two Christchurch facilities (Commodore (15), Sudima (28)) was completed late last week.

Work is progressing with the Ramada Auckland and the Elms Christchurch ventilation remediation work which is targeted for completion ahead of returnee arrivals.

Installation of air filtration units for common spaces for the remaining two of 31 facilities (Sebel Manukau and Rydges Auckland) continues. The Rydges have 20 units still to install between cohorts. For the Sebel, following the installation of all 41 units that were delivered to the facility, we are working through confirming additional units required to address coverage of short corridors off the main corridors. An additional 13 units are likely to be required for the facility.

The remediation work at the Novotel Christchurch Airport is in progress in parallel with completing fire damper work to obtain building code of compliance. The ventilation work can be carried out with the same number of 35 rooms being unavailable as was needed to carry out the fire damper work. Both pieces of work are expected to be completed no later than 20 November.

Remediation work for the Grand Mercure Wellington has been completed and final test results received and analysed. Our HVAC engineer has confirmed that all but one room has achieved MIQ preferred conditions. Final signoff for the facility will now be progressed.

4.2.3 Vaccination of Frontline Staff

For workers on site for the week 27 September – 3 October 2021, BWTR shows that 97.6% had two doses of the vaccine, 1.5% had one dose and the remaining 1% (45 workers) had vaccine status 'unknown'.

Of the 45 workers with an 'unknown' vaccination status, 6 still require an NHI match. The Workforce Testing Team is investigating the remaining 39 workers, to confirm vaccination status.

Vaccination assurance follow-ups for those with an 'unknown' status in BWTR in the previous week found one breach of the Vaccination Order. An unvaccinated waste management worker was allowed on site to collect rubbish. Security staff indicated that entry checks were completed but could not confirm if the proof of vaccine matched the driver's ID. Security staff will be reminded of entry process and the company has been contacted to remind them only vaccinated staff are allowed on site.

Of the 39 workers who were NHI-matched but showing vaccination status 'unknown' in the 20-26 September 2021 weekly report:

- 22 have been confirmed as being compliant with the vaccine order;
- 14 are compliant, but have been passed to MoH for investigation as potential NHI issues;
- 1 was an incorrect sign-in
- 1 has a Ministerial exemption (vaccinated overseas); and
- 1 has been contacted and we are awaiting a response.

4.2.4 Staff Testing

Reporting from BWTR shows that 4,676 people undertook work in our facilities last week, and the table below shows how many of those workers were compliant with the Testing Order, were overdue for a test or still needed to be NHI-matched.

Workers on site 27 Sep-3 Oct 2021	Total	Percentage of total NHI-matched workers on site
Compliant NHI-matched workers	4,540	97%
Overdue NHI-matched workers	130	3%
Need NHI-match	6	
Workers on site	4,676	

Compliance remained steady on 97% since last week.

Of the 130 overdue, 68 of those are less than 4 days overdue, 49 are 4-10 days overdue and 13 are 11+ days overdue. The Workforce Testing and Vaccination team will be following up with these workers to make sure they get tested as required.

Of the 6 that still need an NHI-match, 4 were created in BWTR in the last 7 days.

This week it was discovered that a hotel worker at the Sudima Rotorua hotel had not been signing into Who'sonLocation (WOL) on entry to work, instead they had used a screenshot of the sign-in page to get past security. This meant they were not recorded as needing to be tested. While they had some tests over this period they were not sufficient to meet the testing order requirements. The worker has been stood down until they have two negative saliva tests and hotel has started a disciplinary process. We have also escalated to Ministry of Health due to the non-compliance. We have contacted WOL to see if it is possible to have the date and time added to the sign-in confirmation page so that a screenshot cannot be used. Security on site will

make sure that workers only sign-in to WOL after other entry checks have been completed (ID and vaccination proof sited) and all workers must sign-in in front of security staff.

8 workers were previously reported as '11+ days overdue' in the report for the week 27 September to 3 October 2021. Three are now showing compliant in BWTR, four are compliant but have been referred to MOH for NHI issues, and one has been instructed to be swabbed.

4.2.5 Saliva Testing

As at 4 October, 545 MIQ workers have opted-in to saliva testing.

Saliva testing is currently operational across all active MIQF sites. The Ramada Auckland and The Elms Christchurch will have saliva testing made available once they are operating as MIQ sites.

Following advice from Ministry of Health, we are strongly encouraging workers to opt-in to saliva testing and for those workers at quarantine facilities to provide daily saliva samples while at work during this current outbreak.

We have been working closely with the Ministry of Health on the proposed changes to the Required Testing Order in line with your expectations, and preparing for how these can be successfully rolled out. Given the operational impacts we will need time to manage communications and engagement with our PCBUs and workforce once the Order is signed. We expect this to take up to two weeks. We also continue to work through the reporting and monitoring impacts arising as a result of the changes.

Following advice from Ministry of Health, we are using all available communications channels to strongly encourage our workers to opt-in to saliva testing and for those workers at quarantine facilities to provide daily saliva samples while at work during this current outbreak. The Ministry of Health and APHG have provided our quarantine facilities with face-to-face support opportunities to further encourage uptake. We are continuing to engage with our PCBUs to ensure workers are provided with access to information about saliva testing and are encouraged to opt-in.

Workers are given a choice of testing modality and the uptake to date indicates a stronger preference for the nasopharyngeal testing regime. We will continue to promote the benefits of the saliva testing regime to ensure all workers who are interested in opting-in have the ability to do so, and for our workers in quarantine facilities we will continue to strongly encourage uptake of daily testing.

4.2.6 Ombudsman Update

Self-initiated investigation into the Managed Isolation Allocation System.

The Ombudsman has written to MBIE advising that his Office is commencing a self-initiated investigation into the MIAS system, based on a number of complaints his Office has received. The scope of the investigation focuses on how MBIE has addressed, or proposes to address, any reasonable concerns about the current system, and whether it is taking reasonable and timely steps towards future planning for the allocation of spaces in MIQ.

The allocation system is said to be unlawful.

The allocation system is said to be unfit for purpose.

The allocation system is said to be unfair.

The allocation system is said to be poorly managed.

For aspects of the system that have been determined at the Ministerial level, the Ombudsman intends considering "the advice and recommendations provided to Ministers by MBIE".

The Ombudsman has made a detailed request of MBIE for documentation and responses around a broad range of related issues, to be received by his Office by 05 November. MBIE has begun working on this response.

4.2.7 Ongoing/Other Notifications

We have received six Ombudsman notifications this week. All of these were preliminary requests for information or follow ups on old cases. As of 4 October, we have one open case. This week we received notifications of three final opinions and two provisional opinions – all of which were in our favour.

We issued one response to an OPCAT notification on 1 October, regarding the Jet Park Hotel Hamilton. The Ombudsman has followed up on three previous inspections (SO Auckland, Commodore Christchurch and Novotel Christchurch). Our responses to these are due 8 October.

4.3 Large Group Arrivals Update

Summary of approved group arrivals as at 5 October 2021 (to December 2021)

Group	Date of Arrival	Allocation	Final number of	Comments
Group	Date of Arrival	Approved	rooms allocated	comments
RSE	4 Nov 2021 (Flight 7)	150	116 (150pax) TBC	RSE flight seven will be from the Solomon Islands. This will be the final RSE flight to enter MIQ. RSE workers in the Solomon Islands are progressing vaccinations. It is likely a MOH exemption to enter will be required, as some may not meet the 1 Nov vaccination requirement.
	Sept 2021	60	40 (45 pax)	Arrivals are spread across the whole month. An additional 7 pax were scheduled to travel from Australia — while they were offered priority for flights and voucher <mark>s they declined</mark> and 2 have pulled out.
Construction Accord	Oct 2021	60	46 (65 pax)	Arrivals are spread across the whole month. Note that this includes 9 pax (5 rooms) who still need to confirm their flights & have vouchers issued.
	Nov 2021	60	TBC	
	Dec 2021	60	TBC	
	4 Oct 2021	8	2 (8 pax)	
Refugee Intakes	TBC	24	12 (24 pax)	Other than emergency cases, the Refugee intake has been put on hold due to Auckland being in Alert Level 3 and the subsequent impact on the Mangere Refugee Centre.
	07 Sept 2021	1	1 (1 pax)	
	10 Sept 2021	1	3 (6 pax)	
	16 Sep 2021	1	1 (1 pax)	
	22 Sep 2021	5	2 (5 pax)	
Afghanistan Evacuees	25 Sep 2021	1	1	A workshop took place to further develop a phased, inter-agency response to ensure
	27 Sep 2021	2	1 (2 pax)	advanced notice of arrivals from Afghanistan. An additional 76 is expected to arrive this month (dates tbc).
	29 Sep 2021	1	1	nonch (dates toc).
	2 Oct 2021	20	10 (20 pax)	
Cricket: White Ferns	30 Sep 2021	30	21 (24 pax)	No training exemption required.
	4 Oct 2021	62	61	
	5 Oct 2021	30	30	
	6 Oct 2021	30	30	
	26 Oct 2021	100	TBC	Over half of flights have now arrived and peak occupancy occurs 5 Oct with 270 mariners
	9 Nov 2021	67	TBC	n MIFs in AKL and CHC, with numbers then quickly dropping off. There have been a smal number of positive test results (less than 2%), and a few minor bubble breaches. All MIFs
Mariners	21 Nov 2021	1	TBC	have commented how they have enjoyed hosting these mariners.
C	Late Nov 2021	Up to 15 (catch up of pers deferred from earlier flights)	TBC	
	Early Nov	25	TBC	Trial monthly allocation for exporter, administered by NZTE.
NZTE	Early Dec	25	TBC	
	7 Oct	72	13 (17 pax)	
EXPO	25 Oct	2044	22 TBC	
1	22 Nov	80	80 TBC	
Mountain biking: Crankworx	October	70	50 TBC	
Rugby: All Blacks	Late Nov	<mark>65</mark>	ТВС	Standard returnees – not requiring training exemption.
Rugby: Black Ferns	Late Nov	65	TBC	Standard returnees – not requiring training exemption.
	22 Sep 2021	24	24	Black Caps returning from Pakistan – bought forward from 7 October due to Emergency situation. Standard returnees – not requiring training exemption.
Cricket: BlackCaps	24 Nov 2021	20	TBC	Standard returnees – not requiring training exemption.
	9 Dec 2021	33	TBC	This cohort of BlackCaps will be seeking a training exemption. Engagement with NZC has begun to plan for their arrival.
	4 Oct	5	5	
NZDF	11 Oct	15	12	
			15 (16 pax)	

	21 Oct	50	17 TBC	
	3 Dec	76	TBC	
Cricket: Bangladesh	10 Dec	35	твс	Bangladesh will be seeking a training exemption. Engagement with NZC has begun to plan for their arrival. Note that to accommodate the team in a MIF that can safely support them to train, permission to break cohorting will be sought.
	27 Sep	145	136 (141 pax)	
	1 Oct	27	27	
	4 Oct	45	43	1
E	6 Oct	17	10 TBC	
	9 Oct	10	10 TBC	1
	11 Oct	201	200 (201 pax) TBC	1
	13 Oct	13	13	These arrivals are for the combined US Antarctic Programme (USAP) as well as the
Antarctic	18 Oct	42	42	Italian, French, German and Korean programme.
	25 Oct	20	TBC	
Programme	29 Oct	3	TBC	
	3 Nov	22	TBC	
	12 Nov	7	TBC	
	15 Nov	138	TBC	
	19 Nov	42	TBC	
	20 Nov	19	TBC	
	20 Dec	65	TBC	

4.3.1 Time Sensitive Travel (TST)

The Time Sensitive Travel window for arrivals in November/December 2021 closed on 14 September 2021. Applications were received for 679 people, including at least 116 family members, and four ministerial delegations for 30 people and 30 rooms. Applications are currently being assessed and it is anticipated approximately 428 rooms will be required. This will be confirmed after the decision meeting on 8 October.

4.4 Upcoming Communications Issues and Activities

4.4.1 As at 6 October 2021:

Date	Activity	Lead Agency	Comms Material	Ministerial Involvement Y/N
Tuesday 12 October	Lobby Voucher Release	MIQ	Proactive comms	N
Friday 15 October	Announcement of successful 150 applicants of Self Isolation Pilot	MIQ	Proactive comms	N
Week of 11 October TBC	MIQ Report on Absconder from Novotel Ellerslie	MIQ	Proactive comms and interviews	N
Late October TBC	Ramada to reopen as MIF for deportees	MIQ	Reactive comms	N
November	Report on 4 MIF transmissions during community outbreak	Мон	Joint MoH and MIQ proactive comms	N
Mid November	New MIF in Christchurch operationalised	MIQ	Proactive communications	твс

4.5 Fees

4.5.1 Invoicing

The table below shows the number of invoices issued up to the 3rd of October.

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

Please note that for all arrivals from the 20th of August, all invoicing had payment terms of 30 days except for sports groups under Crown Service Agreements who have 10 days.

Grouping	Invoices issued (net of credit notes)	Paid	Issued not due	lssued over due	Invoices issued (\$)	Paid (\$)	Issued not due (\$)	Issued overdue (\$)	90+ days over due	90+ days overdue (\$)
Groups/ Temp Visa	4,591	1,895	1946	750	\$45,231,354	\$30,762,174	\$10,265,072	\$4,204,108	0	\$0
Maritime	471	319	121	31	\$2,389,845	\$1,603,089	\$663,953	\$122,802	16	\$41,286
Aircrew	204	145	0	59	\$1,088,210	\$818,044	\$0	\$270,166	53	\$231,637
Other	24,492	13,891	5250	5352	\$83,600,099	\$49,941,826	\$16,516,845	\$17,141,428	2010	\$6,530,835
Total	29,758	16,250	7,317	6,192	\$132,309,508	\$83,125,133	\$27,445,871	\$21,738,504	2,079	\$6,803,758

*Groups has only previously included sports groups, critical workers and critical Health Workers. However, going forward this now includes temporary visa holders as this aligns more to the categorisation of Critical workers i.e. same fee charging structure.

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

4.5.2 Weekly Average Invoicing and Debt Recovery %

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

Recent Weeks	Average invoicing per week (\$)
Past week	3,394,281
2-4 weeks	3,511,660
5-8 weeks	2,592,046
9+ weeks	1,885,497

4.5.3 Waivers

The table below breaks down the waiver application information between 11 August 2020 and 03 October 2021. The numbers below relate to all waiver applications; waivers can be applied for before, during and after an individual has stayed in managed isolation.

Waiver applications received	In progress	Total completed	Total financial hardship applications	Total special circumstances applications	Approved w	vaiver applications	Declined w	aiver applications
					Financial Hardship	Special Circumstances	Financial Hardship	Special Circumstances
10,187	3736	6451	831	5620	87	4814	744	807

4.6 Emergency Allocation Applications

6,082 applications have been processed since 30 October 2020. 417 applications were received in the week ending 3 October 2021 and 242 applications were processed. Of the 242 applications processed in the week ending 3 October 2021, 60% were approved.

Emergency Allocation Applications	Weekly Totals 27 September – 3 October	Year to Date Totals 30 October 2020 – 03 October 2021
Approved	143	3,256
Declined	99	2,826
Applications processed	242	6,082

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

Total Rooms Approved Under Emergency Allocation from 27 September to 3 October	156
Rooms allocated in MIAS	120
Awaiting flight details or MIAS registrations from the applicants to complete the room allocation process	36

The emergency allocation system is being used by applicants at a higher volume than anticipated. This causes significant pressures on the Operations teams as they assess each application and are increasingly declining applications. We anticipate that the continued release of vouchers via the lobby system will reduce this pressure over time.

4.7 Resolutions Update

Data from the Complaints and Feedback Customer Management System for the week 28 September to 4 October is as follows:

Week 28 September – 4 October	Received	Active Cases	Resolved
Complaints	225	29	231
Improvements	6	0	6
Compliments	5	1	4
Queries	17	1	16

Week 28 September – 4 October	Received	Active Cases	Resolved
Ombudsman/OPCAT	10	5	15
Parliamentary/OIA	0	0	1
Other	2	1	3
Total	264	37	276

The average number of complaints received each week since the start of MIQ is 139. For the last 4 weeks the case average is 253 per week.

This week we received 264 new cases and have resolved 276 cases. This number is similar to 266 cases received last week.

MIAS cases represented 53% of all cases received. Numbers again spiked on Tuesday 28 September and Wednesday 29 September due to the second voucher release, but steadily came down towards the end of the week.

5. Border Executive Board Report



BORDER EXECUTIVE BOARD

5.1 Key Issues Being Considered

5.1.1 Border Executive Board Meeting

The Board met on 6 October.

The Board endorsed the updated "Health at the border" work programme and the progress being made in the three priority areas. Health at the border is one of the "systems improvements" components of the Board's work. The priority areas are:

- A health presence at the border is considered a "regular" function;
- Health has the ability to escalate health measures and presence; and it seeks to integrate health information for arriving vessels with other agencies;
- Health anticipates having representation in the Integrated Targeting & Operations Centre (ITOC) in early 2022, initially during business hours.

The Board expressed an interest in hearing from Simon Everitt, Establishment Director of the interim Public Health Agency, about how the proposed health functions will connect with the border.

The Board continues to focus on ensuring the border activity that is part of Reconnecting New Zealanders is co-ordinated with the wider programme.

The Board discussed potential trade and business implications relating to the impact if a workplace was to have a COVID-19 positive employee. The Board will continue to discuss next week, with the intention of providing you with advice in the near future.

5.1.2 Future Borders Sprint process

On 6 October, the Future Borders project team presented their final showcase for the Chief Executive Sponsors' group. This concludes the eight-week Customs-led Sprint project to design a safe, secure, and smart travel and border process that is scalable and can support the gradual reopening of New Zealand's air border. A final report to close the Sprint is being prepared for the Reconnecting New Zealanders Ministerial Group.

The Chief Executive Sponsors' group supported the team's overall direction and a phased trial concept. The project team is preparing a detailed proposal to support phased trials, including private sector-run modified isolation. These will be informed by public health advice, and input from the Ministry of Business, Innovation and Employment (MIQ). A brief on the trials will be provided to you by the end of the month in order to meet the industry preferred 1 December start date.

5.1.3 One-way QFT with Samoa, Tonga and Vanuatu

On 4 October, the first one-way quarantine-free flight from Vanuatu with 153 vaccinated Recognised Seasonal Employer workers arrived in Christchurch.

6. New Zealand Customs Service Weekly Report



6.1 Items to Note/Updates

6.1.1 Maritime

Vanuatu Chief

The vessel was granted pratique by the Auckland DHB on 4 October.

Small craft arrivals – Opua

There are currently four small craft in port at Opua. Two of these vessels have crew isolating on board, while crew from the other two vessels are isolating at an Auckland Managed Isolation Facility.

There are six small craft inbound to Opua over the next few weeks.

Other

The New Zealand flagged *Arrow*, a 20-metre aluminium mono-hull cray fishing vessel, sunk in the early morning of 5 October approximately 25 nautical miles north of Cape Reinga. The commercial container vessel *Nefeli* which was close by rescued the three crew (all New Zealand citizens) from the *Arrow*. The *Nefeli* arrived into Auckland at 7.00pm on 5 October and the three rescued crew members were transferred to a Managed Isolation Facility.

6.1.2 Pre-Departure Testing

For the period 27 September to 3 October, there were no warnings or infringements issued.

	Date	27 Sep	28 Sep	29 Sep	30 Sep	1 Oct	2 Oct	3 Oct	Week Total	%
	Passengers subject to PDT	369	200	259	221	201	384	160	1794	
Primary Actions	Test Certificate Verified	364	195	243	216	196	333	151	1698	94.6%
(Passport Control)	Exemption verified	5	5	13	2	4	47	8	81	4.5%
	Referred to Secondary Area	0	0	3	3	1	3	4	15	0.9%
Secondary Area	Compliant	0	0	3	3	1	3	4	15	100%
Actions	Warned	0	0	0	0	0	0	0	0	0
	Infringement	0	0	0	0	0	0	0	0	0
	Prosecution	0	0	0	0	0	0	0	0	0

Red flights

6.1.3 QFT – Cook Islands

On Tuesday 28 September, the Cook Islands Government extended its pause on inbound passenger travel from New Zealand until at least 11.59pm on 4 November 2021 (Cook Islands time).

The Cook Islands has separately set out its broad criteria for tourism to restart from New Zealand:

- Quarantine-free travel will not fully reopen until New Zealand is at Alert Level 1. The Cook Islands Prime Minister said in a 25 September 2021 media statement that visitors will be permitted to return to the Cook Islands once New Zealand reaches Alert Level 1, even if there remain COVID-19 cases in the New Zealand community.
- Tourists will need to be fully vaccinated s6(b)(i) s6(a)

Cooks Islands Prime Minister Mark Brown also announced plans on 25 September to commence the repatriation of Cook Islands residents and work permit holders still in New Zealand on two charter flights. The first flight, scheduled for 7 October, will be only for those passengers outside Auckland who will be required to complete seven days on arrival in the Cook Islands at an MIQ facility.

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The second flight, scheduled for 15 October, will repatriate the remaining people who have been in Auckland. That cohort will be required to complete 14 days of quarantine in an MIQ facility. Both cohorts will be required to submit pre-departure tests, and undergo day zero and day five tests (and day 12 tests for the second cohort).

There was one arrival flight from Rarotonga on 1 October with 55 passengers.

7. COVID-19 Chief Executives Board

7.1 Items to Note/Updates

The COVID-19 Chief Executives' Board (CCB) did not meet this week. The next meeting for the CCB will be on 12 October.

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

8.1 Items to Note/Updates

The COVID-19 Independent Continuous Review, Improvement and Advice Group met on 5 October, Members of DPMC's Policy team attended part of the meeting to discuss the proposed COVID-19 vaccine certificates for domestic use. Members of the Group, Professor Philip Hill and Dr Debbie Ryan met with representatives from the Ministry of Foreign Affairs and Trade on 1 October, to discuss assurance frameworks and mechanisms in place for one-way Quarantine Free Travel for Recognised Seasonal Workers from certain Pacific countries.

Regarding the Group's recent advice to you on the Delta outbreak, DPMC has sought responses from relevant agencies in preparation for the proactive release of the advice during the coming fortnight.

9. Strategic COVID-19 Public Health Advisory Group

9.1 Items to Note/Updates

The Strategic COVID-19 Public Health Group met on 6 October. Discussions canvassed the emerging evidence and lessons from Singapore; a recent report of observations on the current Delta outbreak and their implications for Reconnecting New Zealanders, issued by the COVID-19 Independent Continuous Review, Improvement, and Advice Group; and considerations for the latest round of commissioning received from Ministers.

10. Business Leaders Forum

10.1 Items to Note/Updates

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

11. Community Panel

11.1 Items to Note/Updates

The Community Panel met on 6 October. Professor Philip Hill, member of the COVID-19 Independent Continuous Review, Improvement and Advice Group joined the discussion as an observer which will support more collaboration between the groups and panels. Members of DPMC's Policy team attended part of the meeting to discuss the proposed COVID-19 vaccine certificates for domestic use. The Panel then discussed lessons, learnings and opportunities from the Alert Level 4 lockdown to be used in the future and other stakeholders that should be brought into the Community Panel discussions. The next meeting for the Panel will be on 10 November.

12. Government Modelling Group

12.1 Items to Note/Updates

No update for this week.



14. Appendix One - Weekly updates on Infection Prevention and Control (IPC) at the Border

	Audit summary	IPC Standard Operating Procedures (SOPs), Operations Frameworks and guidance documents
Managed Isolation and Quarantine Facilities (MIQFs)	The quarterly MIQF IPC Audits for the Auckland facilities remain on hold until Alert Level 2 is confirmed. Thirteen Auckland facilities are currently overdue for quarterly audits by between 16 to 57 days. Recommendations made from risk findings identified at audit 5 for Hamilton, Rotorua and Christchurch MIQFs are being progressed locally. Findings requiring national action i.e. the fit testing of N95 masks for non-healthcare staff, remain a work in progress from round 4 audits. The two Wellington MIFQs are scheduled for their quarterly IPC Audit next week: Bay Plaza 6 October 2021 Grand Mercure 7 October 2021. The IPC audit tool has been updated to include Interim guidance relating to: management of door openings and movement through our MIQFs	our IPC SOPs and discuss our IPC learnings over the course of the pandemic as $S6(b)(i)$

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	Audit summary	IPC Standard Operating Procedures (SOPs), Operations Frameworks and guidance documents
	 allocation of rooms in MIF/isolation areas and dual use facilities MIQ workers accommodated in an MIQF facility vaccination status of MIQF workers. An information sharing meeting was held with the MBIE Quality Assurance Advisor to gain an understanding of common issues. 	
Airports	Air border IPC review tool updated with latest air border IPC guidance. QFT green airport IPC reviews on hold. International red airport reviews proposed for November 2021 – dependent on Auckland alert levels and completion of quarterly MIQF IPC audits.	The revised IPC guidance for the air border for green and red zones (version 1.3) was published on the Ministry of Health's website on 16 September 2021. The next review of the documents is scheduled for mid-October 2021 as part of the monthly review cycle.
Maritime/Ports	Meeting will be scheduled with Ministry of Health Border Operations – COVID-19 Health System Response to confirm scope for ongoing maritime port IPC reviews. Maritime port IPC reviews proposed for November 2021 – dependent on Auckland alert levels and completion of MIQF IPC audits.	The current guidance for pilots and workers undertaking a necessary task on an affected ship is published on Maritime NZ s website. As part of the continued engagement with the sector, the IPC team developed further detailed guidance on how to wear the appropriate PPE; the drafted document was shared with Maritime NZ via the Ministry of Health Border Operations team to collate feedback from the sector - this process is ongoing at this stage. The Ministry of Health Border Operations team is also engaging with the New Zealand Customs Service and Maritime NZ in establishing ownership of action points in response to the findings in the latest IPC assurance visits at the ports. This work was slightly delayed due to the ongoing domestic response work.

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