



**MINISTRY OF BUSINESS,
INNOVATION & EMPLOYMENT**
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**DEPARTMENT OF THE
PRIME MINISTER AND CABINET**
TE TARI O TE PIRIMIA ME TE KOMITI MATUA



BORDER EXECUTIVE BOARD



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



COVID-19 Response Weekly Report

11 March 2022

Contents

1. Status Summary	2
2. COVID-19 Insights	6
2.1 Insight of Note Written by the Department of the Prime Minister and Cabinet	6
3. Ministry of Health	9
3.1 Policy/Programme Updates	9
3.2 Upcoming Publications.....	16
4. Managed Isolation and Quarantine Weekly Report	17
4.1 Items to Note/Updates	17
4.2 Operational Update	17
4.3 Judicial Reviews, Dispute Resolution, Ombudsman and OPCAT	18
4.4 Upcoming Communications Issues and Activities.....	18
4.5 Invoicing	19
4.6 Emergency Allocation (EA) Applications	20
5. Border Executive Board Report	21
5.1 Key Issues Being Considered	21
6. New Zealand Customs Service Weekly Report	22
6.1 Items to Note/Updates	22
7. COVID-19 Chief Executives Board	24
7.1 Items to Note/Updates	24
8. COVID-19 Independent Continuous Review, Improvement and Advice Group	24
8.1 Items to Note/Updates	24
9. Strategic COVID-19 Public Health Advisory Group	24
9.1 Items to Note/Updates	24
10. Business Leaders Forum	24
10.1 Items to Note/Updates	24
11. Community Panel.....	24
11.1 Items to Note/Updates	24
12. Government Modelling Group.....	25
12.1 Items to Note/Updates	25
13. Upcoming Cabinet Papers.....	27

1. Status Summary

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

Border

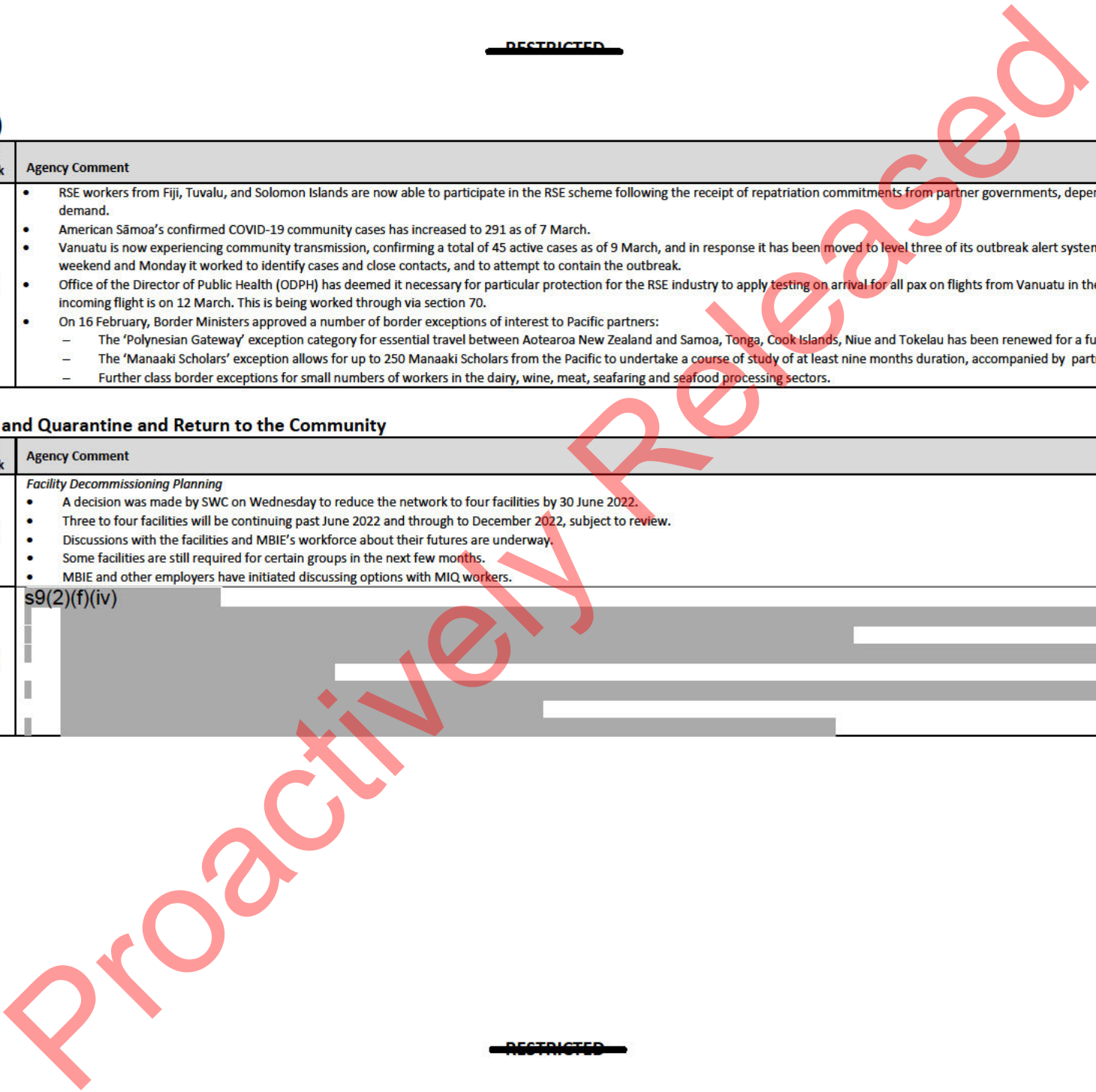
	Agency	Last Week	This Week	Agency Comment
Border measures	MoH	●	●	<ul style="list-style-type: none"> Step 2 of Reconnecting, enabling all vaccinated New Zealanders from Australia and around the world, and further exceptions for skilled workers and working holiday visas, commenced 2 to 13 March 2022. On 28 February 2022, in light of the reduced relative risk from the border, Cabinet agreed that from 4 March 2022 fully vaccinated arrivals would no longer have to self-isolate. Travellers are still expected to do a Rapid Antigen Test (RAT) on day 0/1 and day 5/6 and report the results through an email survey or 0800 number. The Ministry of Health is proceeding with a light touch RAT monitoring and compliance role only, with no active enforcement, for travellers entering via the Testing on arrival pathway (which entails two automated email reminders to upload RAT results). The Ministry of Health is monitoring the roll out of steps 1 and 2 alongside border agencies to work to refine operations where necessary, ensuring systems are robust for Reconnecting New Zealanders to the world, with expected arrivals to increase. This includes providing further advice on testing requirements, the Pacific Quarantine Free Pathway, Very High Risk jurisdiction classification, and enduring measures beyond Omicron Phase Three. MPI are continuing to distribute existing packs which also include a supplementary A5 that covers off the recent changes to the removal of the self-isolation requirement.
	Testing and vaccination of border workforce	MBIE	●	●
Two-way QFT Cook Islands		MFAT	●	●
Two way QFT with Niue	MFAT	●	●	<ul style="list-style-type: none"> Niue's Cabinet has signed off a timeline for easing its border restrictions, primarily focusing on moving from mandatory MIQ to a self-isolation model. It has not set a fixed date for a full re-opening of borders with no MIQ or self-isolation. Beginning with the flight on April 4, Niue will reduce MIQ to seven days, with travellers to then isolate at home for 3 days. From May, Niue will move to self-isolation – likely for a period of around five to seven days. The timeline has not yet been publicly announced. Since these decisions, the first case of COVID-19 has been detected in self-isolation. Posts in the Cook Islands and Niue were tasked on 10 March to inform respective governments of New Zealand's decision to maintain QFT from these countries irrespective of their COVID-19 situation.

Border (Continued)

Reopening new travel pathways - Pacific Islands	Agency	Last Week	→ This Week	Agency Comment
	MFAT	●	●	<ul style="list-style-type: none"> RSE workers from Fiji, Tuvalu, and Solomon Islands are now able to participate in the RSE scheme following the receipt of repatriation commitments from partner governments, depending on employer recruitment demand. American Sāmoa's confirmed COVID-19 community cases has increased to 291 as of 7 March. Vanuatu is now experiencing community transmission, confirming a total of 45 active cases as of 9 March, and in response it has been moved to level three of its outbreak alert system (the highest level). Over the weekend and Monday it worked to identify cases and close contacts, and to attempt to contain the outbreak. Office of the Director of Public Health (ODPH) has deemed it necessary for particular protection for the RSE industry to apply testing on arrival for all pax on flights from Vanuatu in the month of March, noting the next incoming flight is on 12 March. This is being worked through via section 70. On 16 February, Border Ministers approved a number of border exceptions of interest to Pacific partners: <ul style="list-style-type: none"> The 'Polynesian Gateway' exception category for essential travel between Aotearoa New Zealand and Samoa, Tonga, Cook Islands, Niue and Tokelau has been renewed for a further six months from 3 May 2022. The 'Manaaki Scholars' exception allows for up to 250 Manaaki Scholars from the Pacific to undertake a course of study of at least nine months duration, accompanied by partners and dependent children. Further class border exceptions for small numbers of workers in the dairy, wine, meat, seafaring and seafood processing sectors.

Managed Isolation and Quarantine and Return to the Community

Place and conditions of stay	Agency	Last Week	→ This Week	Agency Comment
	MBIE		●	<p><i>Facility Decommissioning Planning</i></p> <ul style="list-style-type: none"> A decision was made by SWC on Wednesday to reduce the network to four facilities by 30 June 2022. Three to four facilities will be continuing past June 2022 and through to December 2022, subject to review. Discussions with the facilities and MBIE's workforce about their futures are underway. Some facilities are still required for certain groups in the next few months. MBIE and other employers have initiated discussing options with MIQ workers.
	MBIE	●	●	<p>s9(2)(f)(iv)</p> <div style="background-color: #cccccc; height: 100px; width: 100%;"></div>



Community Protection

Agency	Last Week	This Week	
Case investigation, surveillance and testing	●	●	<ul style="list-style-type: none"> As at 11.59pm 8 March 2022, there are 22,454 new cases in the community. There are a total of 285,906 community cases. As at 9 March 2022, there are 742 cases who are currently in hospital. There are 19 in ICU. As at 9 March 2022, 8,777 (5.3 percent) of the 166,987 new household contacts have returned a positive test result in the last 14 days to 9 March 2022. <p>Testing</p> <ul style="list-style-type: none"> Testing plans for higher risk settings, including aged residential care, Corrections facilities, youth justice facilities, residential care and in-home care settings have been developed s9(2)(f)(iv) RATs are now the primary form of testing. Supply of both PCR and RATs is being prioritised around protecting priority populations from severe disease and/or death, ensuring equity and limiting the impact on society through the protection of critical workers and critical infrastructure. As at 9 March there were 41,331 self-reported RATs and 22,393 supervised/assisted RATs. Volume through community testing centres (CTCs) and collection sites continues to be very heavy. Some DHBs continue to be tight on supply due to very high demand, however the Ministry of Health is continuing to push supply to them to keep them topped up while the supply chain fills. Four pushes of RATs to DHBs/CTCs are being done this week to replenish supplies. There continues to be delays in the delivery of orders due to ongoing constraints with the domestic freight and courier network affecting some GPs, pharmacies, community providers and aged residential care facilities. DHBs continue to support these locally. The Ministry is also putting large quantities of RATs with other points that can provide local distribution, including iwi and PHOs as a short-term solution to create more channels for RATs to be distributed into the network. Large volumes have been distributed to Māori distribution hubs. This week there will be a further push to South Island Māori distribution hubs, PHOs and the disability providers. As at 9 March 2022, there were only three samples five days or older across the New Zealand laboratory network. As at 4 March 2022, the baseline COVID-19 laboratory PCR testing capacity is 31,410 tests per day without pooling.
Implementation and operation	●	●	<ul style="list-style-type: none"> As at 11.59 pm on 8 March 2022, 10,757,940 vaccinations have been delivered, 3,965,736 people are fully vaccinated and 2,479,546 booster doses have been administered. 73 percent of people eligible for a booster have received a booster. 97 percent of the eligible 12+ population has now received at least one dose, and 95 percent is now fully vaccinated. As at 11.59pm on 8 March 2022, 250,933 Pfizer Paediatric first doses have been administered, with 53 percent of children aged 5-to-11-years having either booked or received their first dose of vaccine. 5,746 Paediatric second doses have been administered. All DHBs have hit or passed 90 percent first doses. Nineteen DHBs have reached 90 percent fully vaccinated. Auckland, MidCentral, Capital & Coast, Hutt Valley, Canterbury, and Southern DHBs have also achieved 90 percent fully vaccinated for Māori. Work is underway for delivery of the Novavax vaccine, with a rollout date to be confirmed. The Ministry has engaged with Te Rūnanga Nui o ngā Kura Kaupapa Māori o Aotearoa to enable Māori health providers to run targeted vaccination clinics with Kura Kaupapa. Sprint strategies in Northland, Bay of Plenty, Hawkes Bay and Canterbury have proven successful, and the approach has been shared with all DHBs. All initial sprint DHBs and Māori Health Providers are either maintaining or scaling their sprint approach for the coming weeks. Counties Manukau, Tairāwhiti, Wairarapa and West Coast DHBs commenced their sprint activities on 4 March 2022. Weekly Regional DHB meetings have been established from 1 March 2022 to share learnings and identify any barriers the Programme or region could address. Since 17 January 2022, an estimated 2.4 million eligible individuals have been sent a booster reminder message. Between 23 February and 2 March 2022, 33 national phone campaigns were undertaken to support population uptake on Boosters. These campaigns were aimed at Group 4 (general population), prioritising Maori and Pacifica and those 65 years+. Campaigns continue to have a regional focus with a view to prioritise DHBs with lower booster uptake and in areas with known community transmission, including Tairāwhiti, Lakes, Northland, Hawkes Bay and MidCentral. The programme continues to work with DHBs and community groups to support the booster and paediatric rollout for disabled people. All DHBs are working to deliver paediatric vaccinations with a strong equity focus. Across the country Kura Kaupapa will enable Māori health providers (MHPs) to run vaccination clinics targeting enrolled tamariki, alongside boosters for their whānau. Barriers such as clinic hours and travel will be eliminated with the running of vaccination clinics within kura, allowing for a trusted and familiar space for tamariki to get vaccinated. The Cause Collective is developing a Pacific youth campaign to encourage boosters and 5–11-year-old vaccinations. This includes a social media and radio campaign and videos made and featuring young people, for young people. Sessions have been held with the DHB senior responsible officers and operations leads on data-sharing for the 5-to-11 age group. The decrease in demand for 12+ Pfizer doses and increased stock holding at DHB sites to mitigate Omicron driven vaccine supply chain disruption has resulted in high stock volumes at vaccination clinics. Higher than average wastage of 12+ Pfizer is expected over the next fortnight.

Resurgence Planning and Response

COVID-19 Management
Planning and Response

Agency	Last Week	This Week	Agency Comment on Status of Focus Area
DPMC	●	●	<ul style="list-style-type: none">• Cross-agency urgent issue mitigation has been occurring daily through the AoG Ops forum and bi-weekly in the AoG Supply Chains forum to keep New Zealand moving. Agencies and sectors are reporting increased workforce impacts, though these are currently being managed.• DPMC has established the daily distribution of key updates to sector agencies and Minister's offices.• A stocktake of workstreams underway to mobilise or supplement agencies/sectors/industry was provided to the CCB. A significant amount of work is underway to mitigate workforce pressures caused directly or indirectly by isolation requirements, and all immediate solutions have been exhausted. Further exploration of how regions whose outbreaks have peaked, can support other regions experiencing significant workforce pressures, was identified as worthwhile from the CCB.• The second of the winter planning sessions was held this week using a scenario of a new variant in the community during winter. Discussions were held regarding long-term assumptions in preparation for winter, and conversations touched on the social licence and economic balance in future advice for restrictions, the impact of misinformation, and the joint statement from Food and Agriculture Organization (FAO), World Organisation for Animal Health (OIE) and World Health Organization (WHO) statement on prioritising the surveillance of SARS-CoV-2 infection in wildlife and preventing the formation of animal reservoirs.
MoH	●	●	<ul style="list-style-type: none">• New Zealand has remained at the red setting of the COVID-19 Protection Framework since 23 January 2022. On 1 March 2022, Ministry of Health officials re-assessed the current COVID-19 outbreak situation and made a recommendation via the Director-General of Health that the red setting remains appropriate for New Zealand. The next assessment will be undertaken on 15 March 2022.• The Department of the Prime Minister and Cabinet are undertaking a review of the COVID-19 Protection Framework. The Ministry of Health are currently developing their feedback on whether the Framework remains fit for purpose in supporting the COVID-19 Response and assessed the impact of the Framework's restrictions across the health system.• The shift from Phase 2 to Phase 3 of the Omicron response plan was implemented at 11.59pm on 24 February 2022. Under Phase Three, the intent is that resources and effort (particularly relating to testing, case investigation and contact tracing) will be targeted on the populations at risk of severe outcomes from COVID-19. The Ministry of Health continues to support DHBs as required to ensure that the needs of at-risk populations can be met in light of the current Omicron outbreak.

Readiness Planning

Proactively Released

2. COVID-19 Insights

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

2.1.1 Scan of Situations in Countries After the Omicron Peak

Introduction

The Insights and Reporting Team in DPMC's COVID-19 Group have analysed the current COVID-19 situation in countries that have moved past the peak number of cases associated with the Omicron wave. This report looks at the healthcare, economic, workforce, and social situation in Australia, the United Kingdom, Ireland, and the United States. The countries chosen have social and governmental structures that have similarities to New Zealand, and have moved past the peak of cases caused by the Omicron wave. It should be noted, however, that unlike New Zealand, all of the selected countries had widespread community transmission throughout 2020 and 2021. It is possible, therefore, that New Zealand may see different impacts to those observed in these countries. For example, New Zealand may see a more sustained demand for hospital or ICU capacity as patients who might require medical intervention were not infected earlier in the pandemic due to transmission being limited by effective public health measures. This is a summary version of a long form report that is available upon request.

Case Rates and Public Health Measures

In all of the countries analysed, public health measures were eased after case numbers began to fall, with varying degrees of public health measures kept in place.

In Australia, where public health measures remained the most stringent, some states removed capacity limits at certain venues. Mask mandates were also dropped for indoor settings except for high risk areas such as hospitals and public transport. Unlike the other countries analysed, in Australia, states maintained some check in and vaccine pass rules for hospitality and entertainment venues.^{1 2 3 4 5}

In the United Kingdom and Ireland, following the declining number of cases after the Omicron wave, there was an almost complete removal of COVID-19 public health measures including rules around mask wearing, and self-isolation. The United Kingdom also plans to end the supply of free rapid antigen tests by 1 April 2022 and end financial support for workers who are unable to attend work due to COVID-19 infection.^{6 7 8 9 10}

In the United States, changes to COVID-19 rules are determined by the respective state and city authorities. Across most states in the United States, COVID-19 public health measures have been, or are in the process of being, relaxed including rules on mask wearing. Vaccine mandates, which were the subject of public protests, are also being relaxed across many parts of the United States.¹¹

In most of the countries analysed, the overall test positivity rate after the Omicron peak remained higher than before the start of Omicron. This suggests that despite case numbers falling back towards the levels observed before the outbreak of Omicron, there is likely to be a higher prevalence of the virus in the community, except in the case of the United States.¹²

Healthcare Situation

In all of the countries analysed, the additional impact of Omicron on ICU demand had for the most part subsided within a month of the peak number of cases. Demand for ICU capacity rose during the Omicron outbreak in all of the countries analysed, except Ireland. As with hospital admissions, demand for ICU capacity declined quickly as Omicron case numbers began to fall.

Longer term impacts on the health system such as backlogs in elective surgery, and health care worker burnout have come to the fore. A large challenge now is the longer-term issue of the backlog of elective surgeries, which were delayed due to COVID-19. In the United Kingdom, the waiting list for surgery is expected to remain at least as long as it is now for another two years, whilst in Ireland there are currently 730,000 people waiting for procedures delayed due to COVID-19. In the United States concerns by medical professions have been raised regarding the general health of the population, as treatments for cancer and cardiovascular disease have been postponed. Compounding matters is a nationwide shortage of blood due to a slowdown in donations during the pandemic.^{13 14 15 16 17 18 19} There are also challenges in addressing backlogs given worker

burnout. For example, In New South Wales, Australia, the recommencement of elective surgeries after the Omicron peak has led to industrial action by a nursing union, with members complaining of being burnt out.

Economic Situation

The Omicron wave had a negative impact on economic activity initially in most of the countries analysed.

The United Kingdom, Ireland, and the United States, all saw a small negative impact to their respective economies as a result of the Omicron wave. Australia stands out somewhat as it loosened some of its restrictions as the Omicron wave hit, leading to a growth in consumer spending during the Omicron peak. Retail sales in Australia continued to rebound in January, despite the peak of Omicron cases occurring in the middle of the month, reaching the second highest level on record.^{20 21 22} In the cases of the United States, the United Kingdom, and Ireland, the impact of Omicron on their economies was small, for example, it is expected to amount to less than 1% of GDP in the United Kingdom.²³

However, the economy improved in most of the countries analysed, following the removal of restrictions.

In the United Kingdom, and Ireland, there was also a clearly discernible recovery in economic activity as restrictions were removed. For example, in the United Kingdom a survey of businesses by the Recruitment and Employment Confederation found that confidence in the economy improved in January, whilst the construction sector grew at its fastest pace in 6 months.^{24 25} In Ireland, 40% of businesses surveyed by the Bank of Ireland, expected a rise in business activity over the next 3 months, whilst a survey carried out by InterTrade Ireland found that 40% of firms surveyed were already seeing businesses grow.^{26 27} By contrast, businesses in the United States are showing signs of falling confidence, with 36% of firms surveyed saying they were confident about the United States economy compared to 40% surveyed at the end of 2021.

Longer-term economic concerns are now coming to the fore, such as inflation and supply chain issues.

The biggest concern for businesses in the United States, however, no longer appears to be COVID-19, with a survey by the American Institute of Certified Public Accountants revealing that concerns around inflation, labour, and raw material costs are now taking precedence.²⁸ Concerns around inflation and supply chains were also identified in all of the countries analysed. For example, in Australia, 37% of businesses reported experiencing supply chain issues in February.²⁹

Workforce Situation

Workforce absenteeism continues to be in an issue in some of the countries analysed. Data from the United Kingdom, the United States, and Australia, showed that absenteeism due to COVID-19 infection continued to be elevated beyond the point at which the peak number of cases were observed. In Australia, 58% of large businesses, 41% of medium businesses, and 14% of small businesses had staff unavailable due to COVID-19 in the month of February.³⁰ In the United Kingdom, 25,908 health staff remained off work due to COVID-19 infection, more than double the amount before Omicron.³¹ In the United States, there were 7.8 million people off work due to either being infected with COVID-19 themselves or caring for someone else who was, in early February.³²

Some sectors in which employees bore the brunt of COVID-19 are now facing shortages. Staff burnout, particularly in the healthcare sector, is having an impact. For example, 400 workers a week left the healthcare profession in the United Kingdom during 2021.³³

There has been a change in work habits following COVID-19, with more workers preferring to work from home. In the United Kingdom, workers have continued to work from home in greater numbers even after the government advised people to go back to the office, with office footfall in the United Kingdom down 34% in the seven days to 11 February 2022, compared to pre-pandemic levels.³⁴

Some sectors that were temporarily shut down for COVID-19, are now facing staff shortages on reopening.

In Ireland it has been noted that many people working in sectors temporarily shut down by COVID-19 restrictions have since moved into other professions, leaving behind a skills shortage when these sectors reopen.³⁵ A similar pattern has been observed in the United States, where employment in the transportation and warehousing sector is now 10% above levels observed pre-pandemic, whilst employment in the leisure and hospitality sector remains 9% below pre-pandemic levels.³⁶

Public Opinion

There was a mixed picture of public opinion regarding public health measure changes in the countries analysed. In the United Kingdom, where public health restrictions have mostly been removed, 48% of

respondents to a YouGov poll believed that they should always be required to isolate whilst a further 27% said that isolation rules should be in place at least for the next few months. The United Kingdom has also seen opposition to the removal of health measures from the Royal College of nurses and healthcare union UNISON. In the United States, polling by IPSOS revealed that support for measures such as having proof of vaccination to enter sporting events fell 7% in February but remained relatively high at 55%, with support for the measure in restaurants and workplaces at 48% and 55% respectively. There were, however, protests against vaccine mandates in Australia and the United States. In Ireland, public opinion is generally favourable towards the government's approach, with 70% of respondents to surveying carried out on 21 February 2022, reporting that public health measures were appropriate and 53% of respondents indicating they thought Ireland was returning to normal at about the right pace.^{37 38 39 40 41 42 43}

Thank you to the following teams that assisted with this report: the Ministry of Foreign Affairs and Trade and the Ministry of Business Innovation and Employment

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3. Ministry of Health



3.1 Policy/Programme Updates

3.1.1 Aged Residential Care sector COVID-19 Response: update

This item is to provide you with information about progress on the COVID-19 response to the Aged Residential Care (ARC) sector. Based on contact with sector stakeholders, the Ministry of Health understands that, overall, ARC facilities are currently managing well with support from the DHBs and their facility colleagues.

Work has been underway over the past two weeks to implement reporting systems that capture the COVID-19 impact on ARC facilities. The Ministry of Health is in the final stages of being able to extract COVID-19 positive case numbers to report on these case numbers by DHB region and facilities. This data will be added to the daily Sitrep as soon as the reporting can be finalised.

Feedback from facilities is that they are struggling to report high numbers of positive tests (via RATs) through the existing reporting channels (My COVID record or 0800 number). The Ministry of Health is working to implement a process for bulk uploads of test results for ARC facilities. The Ministry of Health expect to have this in place by 18 March 2022.

DHBs are providing the Ministry of Health with daily updates on ARC facilities. The reports received to date indicate that regions are able to cope with staffing shortages, however there are regions of concern – Waikato, Tairāwhiti, Hutt Valley and Southern. The Ministry of Health has contacted these DHBs to support them with their response.

Two facilities have significant numbers of COVID-19 cases amongst both residents and staff. The DHBs in these regions (Waikato and Southern) are actively supporting these facilities, including putting DHB staff into the facility to give facility staff a break. They are also working with these facilities to increase the use of Personal Protective Equipment to further protect any spread, and are ensuring greater general practitioner (GP) support.

The Ministry of Health has established a steering group to centralise and respond to ARC issues. This group meets weekly and will continue to meet until it is no longer needed, and the current response has stabilised.

Next steps

Over the next week the Ministry of Health will finalise our reporting mechanisms so that they have a national view of the ARC response and provide visibility on cases in ARC facilities through the daily Sitrep.

The Ministry of Health will provide your office with further updates on the ARC sector response in two weeks through the weekly report, as the current COVID-19 situation evolves.

3.1.2 Health system preparedness programme: update

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

COVID-19 Care in the Community

Care Coordination Hubs

On 25 February 2022, the Ministry of Health completed assessments of 44 Care Coordination Hubs (“the Hubs”). A summary of findings from the assessments follows.

The overall identified strengths of the Hubs were:

- Hubs that have good connections to iwi, intersectoral and primary care relationships and are co-located are well placed to support their communities
- DHBs that have manaaki providers (non-clinical support groups) are looking at new ways of supporting

their communities (eg, to deliver medicines rather than click and collect)

- Improved redistribution of the local workforce means the health sector is better positioned to move resources quickly.

Identified pressures included:

Workforce capacity

- Ensuring the workforce can keep up with the increase in cases, as well as pressures due to staff or their dependents contracting COVID-19 and having to self-isolate or require care
- IT system access, training, and usability - the current approach is inconsistent and requires manual data entry, extraction and using siloed systems.
- Coordinating with primary care and manaaki providers, including new providers being onboarded and brought up to speed on the delivery of support. The Ministry of Health expect this to reduce with Hubs changing their operating model to focus only on those who need support rather than all cases
- Some Hubs are waiting for Ministry of Health guidance before making decisions. The Ministry of Health is working to address some of the Issues. These will be covered in greater detail along with timeframes for completion in the next weekly report.

Disability

Following feedback from the disability sector on experiences with self-isolating at home, the Ministry of Health have developed a COVID-19 Care in the Community disability approach. This covers how we plan to engage with the disability sector, as well as key deliverables from the COVID-19 Care in the Community Programme, to support the delivery of care for individuals with disabilities who are isolating at home.

Data and reporting are a strong focus of the approach. To better support data and quality, the Ministry of Health are including disability identity questions in the online form for COVID-19 cases. This will assist with the identification, targeted support, and reporting of disabled individuals receiving COVID-19 care in the community. The updated online form is expected to be included in the next release, in the week commencing 14 March 2022.

Governance

The three advisory groups for the COVID-19 Care in the Community Programme are now up and running and meet on a weekly basis. The purpose of the groups is to provide support to the programme to prepare guidance, and operational and technical support. The key focus areas of these groups are:

- Clinical Pathway Advisory Group: reviewing the clinical pathways (including assignment to self-management and managed pathways)
- Therapeutics Implementation Group: preparing guidance for logistics of rollout and delivery of new therapeutics
- Data and Digital Advisory Group: reviewing and prioritising scheduled releases of new and iterated functionality.

COVID-19 Care in the Community Framework

With the active implementation of the Omicron Response Plan, greater self-management and automation, and alternative isolation accommodation options, the Ministry of Health are updating the COVID-19 Care in the Community Framework which was published in December 2021. The updated Framework will include new content on the self-management pathway, use of digital tools, and alternative accommodation guidance. The Ministry of Health will publish the third version of the COVID-19 Care in the Community Framework during the week ending 25 March 2022.

Accommodation guidelines

The Ministry of Health is working alongside the Ministry for Housing and Urban Development, MSD, and Kāinga Ora to update the guidance document *A Public Health guidance document for temporary accommodation providers*.

This guidance outlines what social service agencies, emergency and transitional housing, public and temporary housing, holiday accommodation, managers and owners may need to consider supporting guests/clients, staff, and contractors in the event they have a case or cases requiring isolation at the property.

The updated guidance will reflect the Omicron Response Plan, and that COVID-19 cases will need to self-identify to accommodation managers that they are a positive case, rather than the Public Health Units (which was the case under the Delta outbreak).

The Ministry of Health will publish the updated guidance by 11 March 2022 on their website.

Metrics

A draft dashboard that presents a set of key metrics that provide a weekly summary of case activity across the COVID-19 Care in the Community patient journey was presented to you last week.

The first weekly dashboard was provided this week, on 9 March 2022.

Data and Digital

Both MSD and GPs have raised concerns with the electronic referral pathway, which is critical to supporting COVID-19 positive patients isolating in the community. The Ministry of Health met with MSD on 4 March 2022, to work through these challenges and resolve these concerns and issues.

Updates and integration of lessons learnt to date continue to be acted on by the Ministry of Health.

Workforce

The Ministry of Health is exploring opportunities for a joint MSD/Ministry of Health/health sector recruitment campaign. The campaign is aimed at students to work in the COVID-19 response and COVID-19 Care in the Community.

Due to the similarities between the workforce pools in both the MSD and Ministry of Health databases, work is underway to expand the already established 'Hands Up' Database to include MSD contacts. In the meantime, MSD launched its campaign on 2 March 2022, which involves confirming availability of their clients for employment.

Communication and engagement

The Ministry of Health is working on messaging and assets to support uptake of the digital tools to help people through their isolation period. Content is also being developed to provide more information for those isolating at home with home help/home care support, isolating when pregnant, and isolating at home with children.

The Ministry of Health has held several hui and fono with community groups on the Omicron response, COVID-19 Care in the Community, and digital tools. Key feedback to date has been the need for the Ministry of Health to present to regional and local groups, in addition to the national-level webinars. The Ministry of Health has scheduled some of these and are working with leading agencies to have more scheduled.

Next steps

The Ministry of Health will keep you updated on the impact of the Omicron outbreak through the daily SitRep.

3.1.3 COVID-19 Vaccine and Immunisation Programme

COVID-19 Vaccinations

As at 11.59 pm on 8 March 2022, 10,757,940 vaccinations have been delivered, including 4,021,832 first doses, 3,965,736 second doses, 34,147 third primary doses, and 2,479,546 booster doses.

- 250,933 paediatric first doses have been administered to five-to-11-year-old children, with 53 percent of this population now having received their first dose, two percent more than last week. 5,746 paediatric second doses have been administered
- 53 percent of the eligible population aged five-to-11-years have now received their first dose
- 73 percent of people eligible for a booster dose have received their booster. This is one percent up from last week
- 86 percent of the eligible population five years and older have now received at least one dose. 80 percent of this population are fully vaccinated
- 749 vaccination sites were active on 8 March 2022
- Nearly 100 percent of people over the age of 65 have received two doses of vaccine, and 91 percent have received their boosters.

Driving uptake

Six DHBs have reached 90 percent fully vaccinated for Māori, with several more DHBs very close to achieving this milestone. All DHBs have achieved at least 90 percent first doses and nineteen DHBs have achieved at least 90 percent fully vaccinated for their 12 plus populations. Northland DHB is 3,111 doses from reaching the 90 percent fully vaccinated milestone as at 11.59pm 8 March 2022.

Boosters

As at 8 March 2022, 2,479,546 people have received a booster dose. This represents 73 percent of the 3,420,608 people who are currently eligible for a booster, a one percent rise since last week.

Strategies for uptake continue to focus on increasing uptake of boosters and five-to-11-years vaccinations, including directed efforts to raise vaccination rates for tamariki Māori and Pacific children. Strategies for uptake for adults have pivoted towards generating wider support publicly for booster doses. All DHBs are working to continue to provide a range of vaccination services amid the increased focus on response and testing during the omicron surge.

Vaccination sprints are underway in eight DHBs across the country. These sprints are joint drives between the DHBs and Māori Health providers to increase vaccination rates, particularly for Māori, and are being used as an opportunity to trial innovative approaches. The Sprints in Northland, Bay of Plenty, Hawkes Bay and Canterbury have proven successful, and the approach has been shared with all DHBs. All initial sprint DHBs and Māori Health Providers are either maintaining or scaling their sprint approach for the coming weeks. Counties Manukau, Tairāwhiti, Wairarapa and West Coast DHBs commenced sprint activities on 4 March 2022. Weekly regional DHB meetings have been established to share learnings and identify any barriers the Programme or region could address.

As demand for vaccination eases, DHBs are redistributing their workforces from fixed clinics to mobile and pop-up sites for targeted outreach to communities. For example, Wairarapa DHB is redistributing workforce from their main clinic in Masterton to mobile and pop-up clinics. This will allow the DHB to set up mobile sites in Martinborough and Featherston, two days each a week. If there are any vaccination gaps in the region, the DHB can send a team to do a pop-up anywhere in the Wairarapa.

Five-to-11-year-olds

Fifty three percent of children aged five-to-11-years-old have either booked or received their first dose as at 11.59pm on 8 March 2022.

To date, 33 per cent of the eligible tamariki Māori aged five-to-11 years have been partially vaccinated, an increase of two percent since last week.

All DHBs are working to deliver paediatric vaccinations with a strong equity focus. DHBs are running targeted whānau-based events to deliver primary course and booster doses to parents and caregivers when

they bring their tamariki for vaccinations. For example, Taranaki DHB is in its fourth week of its “Around the Maunga” vaccination campaign, a series of equity-based vaccination events in a number of locations.

The Ministry of Health has engaged with Te Rūnanga Nui o ngā Kura Kaupapa Māori o Aotearoa to align on strategies to reach tamariki and whānau. Across the country Kura Kaupapa will enable Māori health providers to run vaccination clinics targeting enrolled tamariki, alongside boosters for their whānau. The Ministry of Education will distribute information through existing channels to promote information on vaccination clinics, pop-up and outreach sites as well as using the Ministry of Health’s COVID-19 vaccination information and graphics to provide whānau with trusted information regarding vaccinations for their tamariki.

The Cause Collective is developing a Pacific youth campaign to encourage boosters and five-to-11-year-old vaccinations. This includes a social media and radio campaign and videos made and featuring young people, for young people.

Data sharing

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

Sessions have been held with the DHB Senior Responsible Officers, and separately with the DHB Operations Leads specifically on five-to-11-year-old data sharing. DHB guidelines and agreements have been updated and issued to include five-to-11-year-old vaccination data sharing requirements. A factsheet on data sharing for this age group has been developed to support community and local leaders to explain why the Ministry of Health shares data, how it is kept safe and how it can help us protect communities.

Vaccination Order

A new process is in development for group Temporary Medical Exemption applications for Persons Conducting a Business or Undertaking (PCBUs) for workers who have had a positive COVID-19 test, and who require a temporary exemption before receiving their next vaccine dose. A webinar to explain changes to impacted stakeholders was held on 4 March 2022.

A group application from all 20 DHBs for Temporary Significant Service Disruptions has been assessed, resulting in approximately 1,450 exemptions being granted for a 10-day period. Further applications from DHBs are expected to be received on a fortnightly basis.

Equity

All regions have events planned to raise uptake among Māori, with a particular focus on tamariki Māori. As the Omicron outbreak spreads, providers planning vaccination events are working to limit the risks of disruption and ensure staff are also available to deliver testing and support to whānau diagnosed with COVID-19. For example, Bay of Plenty DHB has developed a two-week rotation of their vaccinator and testing resources to iwi-led sites to ensure consistency of access.

Providers continue to adjust their working hours to operate during weekends and evenings to increase accessibility for whānau. The programme continues to support a collaborative approach with Māori health providers and pharmacies in areas where there is a good vaccination uptake via pharmacies.

The Government has invested \$10 million to help Pacific health providers over the next two years, with a focus on outside the Northern region to help scale up the services already provided to Pacific communities. This funding will go towards supporting workforce resources including Pacific vaccination initiatives across the Auckland, Wellington, and Waikato regions. This investment aims to support Pacific Peoples to prepare for Omicron phase 3 and to respond and rebuild following the impacts of COVID-19.

The Prepare Community Fund is also available for Pacific community groups to access to help mobilise their communities and to support Pacific community-led initiatives to increase vaccinations for Pacific people aged five and over and to increase booster uptake.

The programme continues to work with DHBs and community groups to support booster and paediatric rollout for people with disabilities, with all vaccination services utilised in 2021 continuing in 2022. Services for people with disabilities include a dedicated phone assistance line, home vaccinations, transport arrangements, disability-specific events, support for whānau, and dedicated communications.

Novavax

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

Work is currently underway to ensure that the Novavax COVID-19 vaccine can be incorporated across the Programme's operational sites. The Immunisation Advisory Centre (IMAC) is developing the vaccinator training package and all supporting documentation is being updated. The distribution and delivery model for the Novavax vaccine will mirror the implementation of the AstraZeneca vaccine.

Technology

As at 11.59pm on 8 March 2022, 5,382,533 My COVID Passes have been issued to 3,892,931 individuals. This represents 97 percent of the fully vaccinated population. 7,394 passes were generated to unique users this week. The total number of passes generated is higher due to the ability for consumers to request a new pass be generated if, for example, they have lost the original pass they downloaded and need to replace it.

The ability for consumers to save their International Vaccine Certificate into their smartphone digital wallet has gone live. When consumers request a new international vaccine certificate following a booster the resulting email will now include a button for each of Apple and Android along with the PDF of the new certificate.

3.1.4 Technical Advisory Group: update

COVID-19 TAG

The COVID-19 Technical Advisory Group (COVID-19 TAG) did not meet in the week commencing 28 February 2022. The next COVID-19 TAG meeting is scheduled for 25 March 2022.

CV TAG

The COVID-19 Vaccine Technical Advisory Group (CV TAG) met on 1 March 2022 and discussed the following items.

- Vaccine rollout
- Future vaccine portfolio
- Novavax as a heterologous booster
- Pfizer second booster (Fourth dose)
- Myalgic encephalomyelitis/chronic fatigue syndrome (ME/CFS) trial proposal

The CV TAG meeting held on 8 March 2022 will be reported in the next update.

Therapeutics TAG

The COVID-19 Therapeutics Technical Advisory Group (Therapeutics TAG) did not meet in the week commencing 28 February 2022. The next Therapeutics TAG meeting is scheduled for 11 March 2022.

3.1.5 Upcoming communications issues and activities

As at 8 March 2022

Date	Activity	Lead agency	Communications material	Ministerial Involvement
8/03/22 ongoing	Omicron community outbreak: daily communications and support for the health sector and public, including cases in a number of regions across the country. Updated health advice, rollout of RATs as main diagnostic tool.	MoH/DPMC	Talking points, key messages, communications, website, stakeholder communications	Optional
8/03/22 ongoing	Access to RATs – who to test / where to test messaging.	MoH/DPMC	Talking points, key messages, communications, website, stakeholder communications	Yes
09/03/22	COVID-19 Health Hub – navigation release.	MoH	Communications to support cases/contacts to self-isolate	No
9/03/22	Contact tracing and isolation guidance.	MoH	Key messages, talking points, website	Optional
9/03/22 ongoing	Health System Preparedness: Omicron Phase 3 – updates for the primary care sector and regional health co-ordination centres, latest Community framework.	MoH	Website, health stakeholder engagement	No
13/03/22	Reconnecting New Zealand – communications re next Step (2.2) and preparing Step 3.	MoH/DPMC	Q&As, stakeholder engagement, website updates, specific stakeholder guidance updates, collateral updates for MIQ guests, internal communications materials for MIQ health staff, specific communications around changes to Maritime Border Order, talking points (tbc)	Optional

3.2 Upcoming Publications

Title	Date	Context	ELT contact
Publication: The National Telehealth Service Annual Plan 2021/2022	31 March 2022	<p>This 2021/22 annual plan is the sixth for the National Telehealth Service and is the first time the National Telehealth Service annual plan has been translated into Te Reo Māori.</p> <p>The 2021/22 plan centres around four key focus areas that collectively see the National Telehealth Service deliver integrated solutions across the physical, mental and social health sectors, while continuing to provide more equitable and sustainable health outcomes for every person in New Zealand.</p> <p>These focus areas will enable the National Telehealth Service to deliver care, support and advice to people in New Zealand to improve their wellbeing and health outcomes through phone and digital channels. Extending the reach to New Zealand's most inequitable areas of health - priority populations, children, mental health, primary care – while also continuing to adapt and enhance their services and experiences</p>	Clare Perry, Deputy Director-General, Health System Improvement and Innovation, s9(2)(a)

Proactively Released

4. Managed Isolation and Quarantine Weekly Report

4.1 Items to Note/Updates

As part of the exemptions application process, MIQ administers a PHRA tool on behalf of the Director General of Health. The PHRA determines whether someone can be considered for an early or temporary release in exceptional circumstances. If a person is deemed too high risk by the tool then the MIQ decision maker has no discretion to approve the application, no matter how exceptional the circumstance.

Since 11.59pm, Friday 4 March the only border arrivals who have been required to enter MIQ are those who do not meet the definition of “fully vaccinated”. This includes people who are less than 14 days since a second dose of an approved vaccine, those who are unvaccinated, and those who have one of the 23 vaccines that are not eligible for the medium risk pathway. The current PHRA does not allow anyone aged over 13 who does not meet the definition of “fully vaccinated” to be considered for an early or temporary release, even if their circumstances are exceptional (e.g. a dying close family member). Since Saturday 5 March, MIQ has received four applications from people who did not meet the definition of fully vaccinated and were seeking an early or temporary release from MIQ. All of these were declined as the PHRA immediately deems them unable to be considered on the basis of their vaccination status.

MIQ have asked the Ministry of Health to revise the tool to allow these people to be considered, particularly in the light of the fact that there is now public health advice in existence that states that requiring unvaccinated people to go into MIQ is no longer proportionate to the risk they pose given the community outbreak. s9(2)(h) . It is also causing people in MIQ who are applying to be distressed, as they have no pathway to be granted an early or temporary release, no matter how exceptional their circumstances. During the Health Select Committee on Thursday 10 March, the Director General Health agreed to review the tool.

4.2 Operational Update

4.2.1 Omicron Outbreak – Ongoing Support

MIQ continues to run eight quarantine facilities across New Zealand to respond to the Omicron outbreak. There are a small number of community cases and positive border cases that are in our facilities across the system. Of the eight facilities, there are three facilities that are empty. As previously advised, there will be empty facilities at any given time as the MBIE discontinues contracts for facilities and work towards the rationalisation of the MIQ network.

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

4.2.2 Current Capacity

As at 9 March 2022 there were 483 people remaining in Managed Isolation and Quarantine.

Of the 32 facilities, 19 are currently empty.

Total PAX in MIQ	Returnee no:	Community no:	Unvaccinated/ don't meet vaccine requirements for release	Mariners/Air Crew	Evacuees/ Refugees	USAP
483	8	191	41	104	98	41

4.2.3 Vaccination of Frontline Staff (including booster information)

For workers on site for the week 28 February to 6 March 2022, BWTR shows that 99.5% had two doses of the vaccine, 0% had one dose and the remaining 0.5% (20 workers) had the vaccine status ‘unknown’.

Of the 20 workers with an ‘unknown’ vaccination status, 8 still require an NHI match. The Workforce Testing Team is investigating the remaining 12 workers to confirm vaccination status.

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

Of the 10 workers who were NHI-matched but showing vaccination status 'unknown' between 21-27 February 2022, all workers have been confirmed as being compliant with the Vaccination Order.

For workers on site for the week 28 February to 6 March 2022 with regards to booster shots:

Workers on site 28 Feb - 6 Mar	Has received a booster	Overdue for booster	Eligible in coming months	Under 18	Unknown*	Total
	3,761 (94.2%)	10 (0.3%)	196 (4.9%)	17 (0.4%)	8 (0.2%)	3,992

The Workforce Testing and Vaccination team will investigate the 10 workers showing as overdue for a booster to check if they were breaches of the Vaccination Order or if there was another reason for that (e.g. data error).

Of the 14 workers who were on site between 21-27 February who appeared to be overdue for a booster (in breach of the Vaccination Order), follow ups have identified 10 breaches of the Vaccination Order. The other workers were primarily data errors in BWTR, and there is one worker who has been contacted and MBIE are awaiting confirmation of vaccine status.

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

4.3 Judicial Reviews, Dispute Resolution, Ombudsman and OPCAT

4.3.1 Ombudsman Complaints

MBIE are currently managing 71 cases, with 53 of these being preliminary enquiries.

Of the 18 active requests:

- one is the Chief Ombudsman's self-initiated investigation;
- five are on emergency allocations; two on fee waivers;
- three on exemptions from managed isolation;
- two on undue financial hardship;
- one on access to fresh air in a facility;
- two are on the legal basis of a stay in MIQ and two on MIQ facilities.

MBIE are seeking Crown Law advice on some opinions to support our responses.

4.3.2 OPCAT

MBIE have received a request for information for next month's returnee MIQ room plan. MBIE have received the Ombudsman's provisional report for Chateau on the Park Christchurch. MBIE's feedback and comments are due COB Friday 11 March. MBIE have received a request for information regarding all communications for 20 individual cases. MBIE's response with this information is due COB Friday 11 March. MBIE have received a substantial request for information regarding home and community isolation. MBIE's response is due COB Wednesday 23 March.

4.4 Communications Issues and Activities

4.4.1 As at 9 March 2022:

Date	Activity	Lead agency	Comms material	Ministerial Involvement Y/N
10 March	Health Select Committee		Preparation material	Y
10 March TBC	Announcement MIQ future/ decommission numbers	MIQ	Proactive	Y TBC
14/21 Week TBC	Grounded Kiwis verdict	MIQ	Proactive	N

4.5 Invoicing

The table below shows the number of invoices issued up to **6 March 2022**. Please note the addition of a new row at bottom of the table, providing a quick snapshot of percentages around total invoices issued, and of the total invoices by value.

Grouping	Invoices issued (net of credit notes)	Paid	Issued not due	Issued over due	Invoices issued (\$)	Paid (\$)	Issued not due (\$)	Issued overdue (\$)	90+ days over due	90+ days overdue (\$)
Groups /Temp Visa	8,135	5,368	893	1,874	\$69,292,565	57,377,250	2,434,079	9,481,237	1,007	\$5,560,270
Maritime	687	555	51	81	\$3,297,901	\$2,969,330	\$78,347	\$250,224	25	\$110,815
Aircrew	257	241	4	12	\$3,178,376	\$2,135,847	\$567,106	\$475,422	8	\$101,437
Other	35,066	22,310	4,252	8,504	\$112,479,735	\$78,072,829	\$7,886,034	\$26,520,871	5,254	\$17,111,089
Total	44,145	28,474	5,200	10,471	\$188,248,577	\$140,555,257	\$10,965,566	\$36,727,754	6,294	\$22,883,610
Percentage	100%	64.5%	11.8%	23.7%	100%	74.7%	5.8%	19.5%	14% of invoices issued	12% of \$ value of invoices

4.5.1 Fees Collection

Invoicing is up to the point where returnees left MIQ between 14 - 17 December 2021. MBIE is currently around seven weeks behind our normal processing timeframes after moving from 14 day stays to 7 and 10 day stays in MIQ, meaning more people could go through MIQ. The increased workload is expected to continue until MBIE reaches the end of February invoices, and more people will have access to self-isolation.

4.5.2 Debt Recovery

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

- \$1.786m has been paid (or is being paid through instalment).
- \$1.116m is currently awaiting information from customers or has been credited due to an error.
- A further \$2.788m (this includes the no address/gone overseas category and passive collection) requires more detailed tracing.
- \$619k currently have waiver applications under assessment.
- The remaining \$985k of debt continues to be a work in progress.

4.5.3 Fee Waivers

All Waiver Applications Received	Received and not progressed	Total Completed (as at 8 February 2022)	Approved Waiver Applications			Declined Waiver Applications		
			Financial Hardship	Special Circumstances	BOTH	Financial Hardship	Special Circumstances	BOTH
15,927	2,088	10,042	90	6806	56	1,271	1,567	250

4.5.4 Fee Waiver backlog

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

- New applications for fee waivers received from 28 February to 6 March 2022 is 241.
- The net reduction in applications from 13 December 2021 to 6 March 2022 is 1,290.
- The weekly net decrease in applications from 28 February to 6 March 2022 is 210.

Status	Backlog at 13 Dec 2021	New Applications Received since 13 Dec 2021	Backlog at 6 March 2022
Processing or to be processed	3,979	2,628	3,062
Waiting for Customer	1,108		735
Total	5,087	2,628	3,797

System actions by Waivers Officers 28 February to 6 March 2022.

Actions	Applications Triaged	Assessments Completed	RFI's Sent	Outcomes Sent	Total
Total	661	502	272	377	1,812

4.6 Emergency Allocation (EA) Applications

10,126 EA applications have been processed since 30 October 2020.

12 EA applications were received in the week ending 6 March 2022 and 12 applications were processed.

Of the 12 applications processed in the week ending 6 March 2022, 67% of EA's were approved.

Emergency Allocation Applications	Weekly Totals	Year to Date Totals
	28 February – 6 March 2022	30 October 2020 to 6 March 2022
Approved	8	6,236
Declined	4	3,878
Applications processed	12	10,114

5. Border Executive Board Report



5.1 Key Issues Being Considered

5.1.1 Border Executive Board Meeting

The Border Executive Board met on 9 March 2022.

s9(2)(b)(ii)

The Ministry of Health, supported by the Ministry for Primary Industries and the Border Executive Board has started work on future health risks and surveillance at the border. The work is linked to the existing BEB Health at the Border initiative that is strengthening the intelligence led approach by expanding membership of ITOC to include the Ministry of Health staff. The New Zealand Traveller Declaration (NZTD) will provide a platform for collecting relevant information from passengers (for example, which countries they have visited in the last 14 days) to inform health assessments prior to passengers arriving in New Zealand.

The Board approved a phased approach to progressing maritime border activity. Advice will be included in the DPMC led paper to Ministers the week starting 21 March 2022 to remove the isolation requirements for crew changes and people who have tested negative before disembarking a ship. Further advice will be provided on cruises that includes a public health assessment, along with options for future maritime settings.

The Board discussed Reconnecting New Zealanders noting decisions are due from Cabinet on March 14, following SWC on Wednesday 9 March 2022 relating to border settings and managed isolation and quarantine facilities. Implementing Step 2 went well. Challenges remain with passengers completing Nau Mai Rā in advance of arrival. Other matters being worked through include: pre-boarding information and support; accuracy of MIQ alerts due to vouchers not being cancelled and improving communications to help people navigate the complexities of travel.

The next BEB meeting is 23 March 2022.

5.1.2 Maritime – Maritime Border Programme

In light of recent changes to the aviation sector, officials have reviewed the alignment with maritime border settings. The key urgent change needed is to streamline crew changes without requiring MIQ. Officials will report back to Reconnecting Ministers on 21 March 2022.

The isolation and testing requirements in the Maritime Border Order are now stricter than in the aviation pathway and will affect the very small number of New Zealanders seeking to enter through the maritime border. Officials will be seeking a public health risk assessment of all the maritime settings, to inform advice to Ministers in April 2022.

Maritime NZ and Immigration officials are working on ways to ensure there are sufficient maritime workers to avoid critical skills shortages. Maritime NZ has also been hosting workshops with the cruise industry with the aim of a staged re-opening later this year, and the industry presented to officials from the Ministry of Health this week.

6. New Zealand Customs Service Weekly Report



6.1 Items to Note/Updates

6.1.1 New Zealand Traveller Declaration System

Pilot 3 for the New Zealand Traveller Declaration programme commenced on 4 March 2022. Between 8 and 10 March 2022, eligible travellers on targeted flights departing from Australia, the Pacific, and Los Angeles have been asked to volunteer as Pilot 3 participants.

Pilot 4 will be the final Pilot before the programme goes live. It is planned to run between 18 to 22 March 2022, with a higher number of airlines participating. The pilot flights are scheduled for 21 and 22 March 2022.

The New Zealand Traveller Declaration Cabinet paper and business case addendum for previously approved contingency funding will be submitted to your office on 11 March 2022.

Next week, Customs will commence a two-week communications and engagement countdown to 'go live'. This is in three stages.

- Stage one: Provide airlines, ticket resellers and travel agents with a communications toolkit that outlines what they are required to communicate to travellers about the New Zealand Traveller Declaration and what they need to do when the system goes live.
- Stage two: Reach out to major government and private employers across New Zealand to encourage the use of their channels to post information for their employees should they be supporting a friend or whānau member returning to New Zealand.
- Stage three, go live day: Awareness raising through paid channels, particularly online channels, so that travellers know where to go and what to do.

The Programme will provide you with any advice should the changes considered by the Cabinet Social Wellbeing Committee on 9 March 2022, the paper titled Reconnecting New Zealanders: Further changes to international border settings, have implications for the New Zealand Traveller Declaration.

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

As part of Reconnecting New Zealand, the COVID-19 Public Health Response Air Border 2021 was enacted on 28 February 2022. Customs staff undertake compliance checks for all travellers at the border. There are different requirements placed on travellers now based on their citizenship and the country that they been in within 14 days of their journey to New Zealand beginning.

Customs will continue to check all passengers on arrival for evidence of Pre-Departure testing or exemption, and Vaccination Verification or exemption.

Customs will continue to report on checks conducted at the border by Customs Officers but due to the increase in passenger numbers will only report on non-compliance actions. Travellers who do not provide the required evidence may incur an infringement offence fee between \$500 and \$4,000 depending on the nature of the offence.

New Zealand citizens who do not provide the required evidence of vaccination status will be referred to Ministry of Health officials for further intervention.

6.1.3 Non-compliance Statistics

For the period from 1 March to 7 March 2022 inclusive, a total of 12,912 passengers arrived in New Zealand. Of this number, a total of 23 were considered to not meet the requirements for air travel to New Zealand.

- As a result, for the period, 8 travellers were issued warnings letters and 9 travellers have been issued with an infringement offence fee for not meeting pre-departure testing requirements.

- For the period, no travellers have been issued with an infringement offence fee, and 6 travellers have been referred to Ministry of Health for further intervention for not meeting vaccination verification requirements.

Proactively Released

7. COVID-19 Chief Executives Board

7.1 Items to Note/Updates

The COVID-19 Chief Executives Board (CCB) held its most recent meeting on Tuesday 8 March 2022. Discussions encompassed workforce absenteeism and business continuity, strategic work towards the 'new normal', social cohesion, the Chief Executives' concerns and priorities raised within the System Assurance Framework, and recent progress in implementing Reconnecting New Zealanders. The next CCB meeting will be held on 22 March 2022.

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

8.1 Items to Note/Updates

The COVID-19 Independent Continuous Review, Improvement and Advice Group met on Wednesday 9 March 2022. The meeting, which you attended in part, was also attended by members of DPMC's Policy team to receive feedback on the post-Omicron work being undertaken as part of the COVID-19 Protection Framework review and to plan the future of the response. The DPMC Secretariat is following up with your office on your feedback to the Group during your participation in this meeting.

9. Strategic COVID-19 Public Health Advisory Group

9.1 Items to Note/Updates

The Strategic COVID-19 Public Health Advisory Group held its most recent meeting on Wednesday 9 March 2022. Members welcomed Minister Verrall to discuss commissioning priorities for the coming weeks. The DPMC Policy Team also participated in the meeting to discuss the work on post-Omicron planning. The Group then exchanged insights on vaccine mandates, building on international experiences and the existing domestic legal landscape. Their advice on this topic is due to be finalised this week.

10. Business Leaders Forum

10.1 Items to Note/Updates

The Business Leaders Forum is meeting on Friday 11 March 2022. The Prime Minister, Deputy Prime Minister and yourself as COVID-19 Response Minister are all scheduled to attend. The discussion will include perspectives on key aspects of the current response to COVID-19 and work underway to plan the future of the response.

11. Community Panel

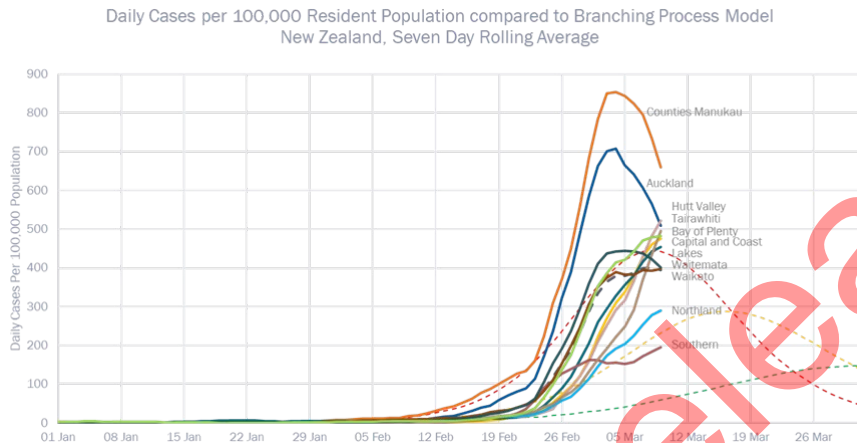
11.1 Items to Note/Updates

The Community Panel held its last monthly meeting on Wednesday 2 March 2022. Its next monthly meeting will be on Wednesday 6 April 2022.

12. Government Modelling Group

12.1 Items to Note/Updates

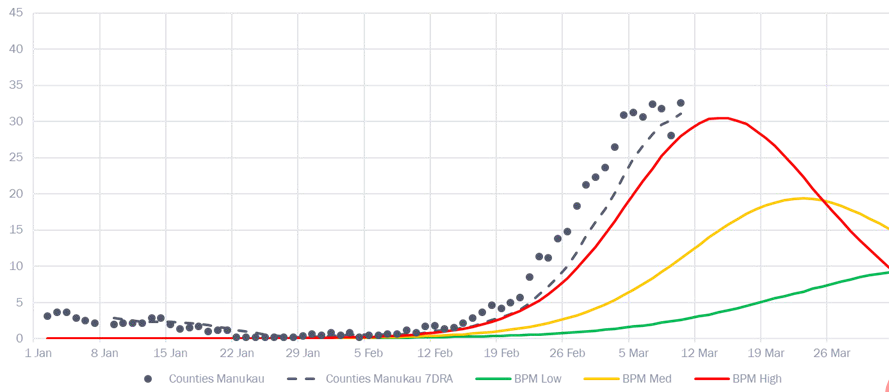
Despite the challenges of tracking cases against model scenarios since the introduction of RATs, there are early indications that Auckland and Counties Manukau DHBs may have reached their peak in terms of daily cases, and are now declining. However, other DHBs are now increasing, suggesting that there are likely to be smaller, later regional peaks (particularly in Hutt Valley, Tairāwhiti, Bay of Plenty, Capital and Coast, and Lakes DHBs).



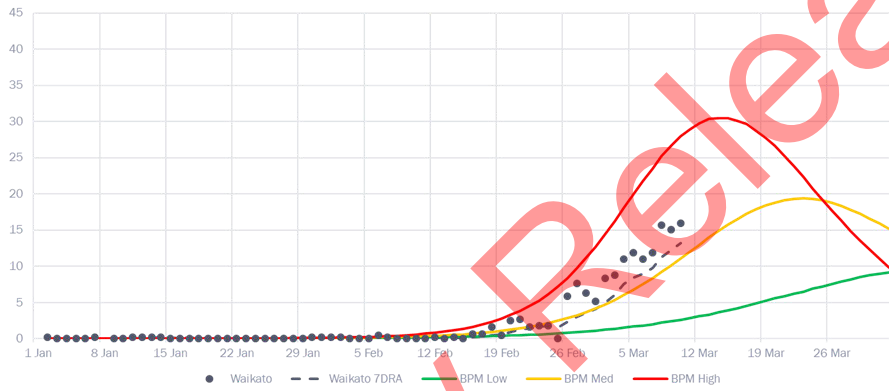
Another key metric now is COVID-19 hospital bed occupation, which is tracking between the medium and high transmission scenarios – it is important to note that peak hospitalisation rates in the updated scenarios are significantly lower than the original Omicron scenarios. This also varies at a regional level, with Auckland and Counties Manukau tracking above the high transmission scenario, while Waitemata and Waikato are tracking between the high and medium scenarios, and all other DHBs below the medium scenario.



Daily Hospitalisation 100,000 population Compared with Branching Process Model
Counties Manukau DHB



Daily Hospitalisation 100,000 population Compared with Branching Process Model
Waikato DHB



s9(2)(f)(iv)



13. Upcoming Cabinet Papers

s9(2)(f)(iv)



Proactively Released

- ¹ Government of New South Wales. Rules for people in NSW. <https://www.nsw.gov.au/covid-19/stay-safe/rules/people-in-nsw> - Accessed 7 March 2022
- ² Queensland Government. Public Health and Social Measures plan. <https://www.covid19.qld.gov.au/government-actions/queenslands-covid19-vaccine-plan/queenslands-public-health-measures> - Accessed 7 March 2022
- ³ Our World in Data. COVID-19 Data Explorer. <https://ourworldindata.org> – Accessed 7 March 2022
- ⁴ The Age. Mask rules loosened as Victoria records 5874 cases, 15 deaths <https://www.theage.com.au/national/victoria/mask-rules-loosened-as-victoria-records-5874-cases-15-deaths-20220226-p592vn.html> - Accessed 7 March 2022
- ⁵ ABC News. Queensland's COVID-19 restrictions ease, including the mandate on masks. But is it the end for them completely? <https://www.abc.net.au/news/2022-03-04/qld-coronavirus-covid19-mask-rules-density-restrictions-ease/100860862> - Accessed 7 March 2022
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