

Office of the Minister for COVID-19 Response

Cabinet

COVID-19 RESPONSE: 13 DECEMBER REVIEW OF COVID-19 PROTECTION FRAMEWORK SETTINGS FOR NEW ZEALAND

Proposal

- 1 This paper reviews the current COVID-19 Protection Framework (Framework) settings across New Zealand. It also provides more information about localised lockdowns, including economic support that could be made available over the Christmas period.

Relation to government priorities

- 2 This paper concerns the Government's response to COVID-19.

Summary

- 3 On 29 November 2021 Cabinet confirmed the decision to transition all New Zealand to the COVID-19 Protection Framework at 11.59pm Thursday 2 December. It was agreed that Auckland and Northland along with various districts between Gisborne and Whanganui would move to the Red setting of the Framework, with the rest of New Zealand moving to Orange. Cabinet agreed to reassess these settings again today, with the next scheduled review in the week of 17 January 2022 [CAB-21-MIN-0509 refers].
- 4 It is important that the settings we agree today are appropriate to minimise community transmission and protect vulnerable communities through to mid-January. There continues to be inconsistent vaccination coverage across the country, and we are yet to see the impacts of our transition to the Framework less than a fortnight ago. These factors, along with heightened transmission risk associated with the relaxation of Auckland boundary restrictions, as well as increased general movement and gatherings over the holiday period, supports continuing a cautious approach to the country's Framework levels.
- 5 The Ministry of Health conducted its second COVID-19 Protection Framework health assessment on Wednesday 8 December. Based on an assessment of our previously agreed health factors, the Director-General of Health has recommended that Northern region DHBs (Northland, Waitemata, Auckland and Counties Manukau) should be at Red, with the rest of the country at Orange. These are the same recommendations in the first assessment on 27 November.
- 6 The Department of the Prime Minister and Cabinet carried out an assessment of the non-health factors we agreed would inform Framework decision-making. This assessment noted concern from some vulnerable communities about lower vaccination rates, particularly for Māori. The aggregate economic

impact of the Framework is forecast to be much lower compared to Alert Level 3 and 4 restrictions.

7 This paper presents two options:

7.1 adopting the health assessment recommendation to keep Auckland and Northland at the Red setting of the Framework but move all other regions to the Orange setting of the Framework; or

7.2 maintain a more cautious transitional approach and retain the current settings, with Auckland and Northland at the Red setting of the Framework, along with

7.2.1 Taupō and Rotorua Lakes Districts; and/or

7.2.2 Kawerau, Whakatane, Ōpōtiki Districts; and/or

7.2.3 Gisborne District; and/or

7.2.4 Wairoa District; and/or

7.2.5 Rangitikei, Whanganui and Ruapehu Districts; and

7.2.6 all other regions not at Red remain at Orange.

8 Ministers with Power to Act will review the Framework settings we decide today in the week commencing 17 January. A summer guidance pack will be provided to Ministers this week to support decision-making should any decisions be required over the holiday period.

Introduction

9 On 29 November Cabinet confirmed the decision to transition all New Zealand to the COVID-19 Protection Framework at 11.59pm Thursday 2 December. It was agreed that Auckland, Northland and other parts of the North Island between Gisborne and Whanganui would move to Red and the rest of country would be at Orange. Cabinet agreed to reassess these settings on Monday 13 December [CAB-21-MIN-0509 refers].

Decision-making factors

10 In October Cabinet agreed eight health and non-health factors that would be taken into account when making decisions about moving between different levels of the Framework. Indicative risk assessments and thresholds for movement between levels of the Framework have also been agreed by Cabinet [CAB-21-MIN-0421 refers]. A comparison of the differences between Red and Orange requirements is contained in Appendix 1.

Update on the current outbreak and response

- 11 As at 9am Friday 10 December, there were 56 people in hospital due to COVID-19, including 4 in intensive care or high dependency units (ICU/HDU). There are 6,630 active community cases associated with the current COVID-19 outbreak, 95 new community cases over the past 24 hours. The seven-day rolling average of community cases has reduced to 103, compared to 187 at our last review on Monday 29 November. There have been 20 deaths in this outbreak.
- 12 Based on the recent slowing in case numbers, the latest scenario projections from Te Pūnaha Matatini (TPM) indicate that new case numbers will decline through the remainder of the year, down from recent figures of around 1,300 cases per week to between 500 and 1,000 cases per week by the end of the year. Estimates are that the effective reproduction number (R_{eff}) was likely to be between 1.0 and 1.1 in the second half of November and below 1.0 for the initial part of December (though more recent estimates come with greater uncertainty and are subject to revision).
- 13 Recent case numbers have reduced more quickly than modelling suggested. However, there is a risk transmission may increase as a result of the transition to the Framework. Such increased transmission may manifest in the overall national number of cases, or in particular regions outside of Auckland that currently have few or no cases.
- 14 As we enter the summer period of increased travel and the Auckland boundary is relaxed, there is further risk that cases will spread outside of Auckland. Analysis of travel patterns using road and air travel data indicates that more than 100,000 Aucklanders leave the city each day over the summer period. Coupling this with historic electronic card transaction data, Northland, Thames-Coromandel and Tauranga have the greatest influx from Auckland by road. For air travellers, Christchurch and Wellington are the two largest destinations, followed by Queenstown, Nelson and Napier. This indicates the increase in risk related to the relaxation of the border around Auckland.
- 15 Te Pūnaha Matatini's (TPM) modelling indicates that cases seeded outside of Auckland may see outbreaks that grow, depending on factors such as vaccination levels and types of gathering. Not all cases will go on to infect others so seeding events do not automatically lead to widespread transmission. The higher the vaccination coverage is in an area, the less likely it is that each new case will lead to established transmission. However, regions that receive many visitors from Auckland may be more likely to also experience a higher number of new cases, which may make wider transmission a case of when, not if.
- 16 The dynamics around low-level transmission mean that modelling cannot predict when case numbers will arise in different areas or when transmission becomes established, rather than sporadic, in different local areas. The modelling can, however, give a sense of how the transmission dynamics will vary in different places, if transmission does become established. Officials are

continuing to work with TPM on scenarios for transmission in different local areas, and will share these results and discussing implications with DHB officials.

- 17 In general, more highly vaccinated communities are more likely to experience slower transmission, meaning that test, trace, isolate and quarantine measures can be used more effectively to mitigate spread and impact, and impacts are likely to be less severe in terms of hospitalisations and deaths. Cases in higher vaccinated communities are likely to accrue disproportionately in the unvaccinated, including children under 12 who are ineligible. Children under 12 generally have mild or asymptomatic infection but may transmit infection to more vulnerable whānau members.

Ministry of Health COVID-19 Protection Framework health assessment

- 18 On Wednesday 8 December, the Ministry of Health conducted a COVID-19 Protection Framework Assessment (Health Assessment) to consider appropriate Framework levels through to Monday 17 January 2022. The health factors were analysed and discussed as part of this assessment, and District Health Board (DHB) self-assessments of capacity and capability.
- 19 Increased risk associated with the Christmas period was central to considerations. In particular, the assessment noted that the risk for many regions across the country should be considered higher than DHB self-assessments or regional analysis alone might suggest, due to:
 - 19.1 The potential forthcoming impact of relaxing the hard boundary with Auckland, potentially seeding new COVID-19 cases around the country (at a time when the health system is usually operating with skeleton staff).
 - 19.2 The impact of transitioning to the Framework on the Auckland outbreak is not yet clear.
 - 19.3 A significant temporary rise in movement around New Zealand over the Christmas and New Year period.
 - 19.4 The fact that, while many DHBs are approaching the 90 percent vaccination milestone, there remain pockets of the community within these areas with lower vaccination rates.
 - 19.5 General workforce fatigue across the health sector at every level.
 - 19.6 Concern to protect groups most at risk from COVID-19 who could be exposed over the holiday period, such as those with co-morbidities, in areas of high socio-economic disadvantage, older people and those who are not yet fully immunised.

Vaccination rates

- 20 Appendix 2 provides updated vaccination rates and projections, as at 5 December.
- 21 While there are varying vaccination rates across all DHBs, there continues to be an encouraging increase in rates since the last assessment on 24 November, especially for Māori. Overall, Māori partial vaccination rates are up 5.2 percent, while Māori full vaccination rates are up 7.7 percent. This compares to the overall population's partially vaccinated rates that are up 2.1 percent and fully vaccinated rates up 4.4 percent.

Health system capacity

- 22 With the increase in travel following relaxation of Auckland boundary restrictions, there is likely to be a corresponding increase in pressure on the health system in affected regions. An overview of capacity in the four health regions is provided below.

Northern Region

- 23 Overall, Northern Regional Health Coordination Centre modelling shows cases trending down in the Northern Region. However, it is too early to conclusively gauge the longer-term impact of the move to the Framework in Auckland. The assessment noted that the current downward trend in cases may not continue. However, the Northern Regional Lead is expecting a drop in cases related to schools going on holiday and Aucklanders leaving the city over summer.
- 24 The Northern Region Lead supported the notion of Northland remaining at Red. The DHB self-assessment concluded that it did have sufficient capacity and capability to manage demand in the foreseeable future, but there are uncertainties due to the expectation of a summer surge of visitors into the area.
- 25 Concern was noted about primary care capacity, especially with Pacific providers in Auckland who are under a lot of pressure. Many are also still working through the transition to providing community care arrangements, including liaising with the Ministry of Social Development on the necessary welfare supports for those isolating at home. There is also ongoing concern about some vulnerable communities and the lower vaccination rates.

Te Manawa Taki (Mid Central) Region

- 26 There was some concern expressed by the Regional Lead based on modelling from Waikato University suggesting a possible exponential increase in cases in the Waikato DHB by the end of January 2022, if the region stays at Orange. In undertaking the assessment, the Ministry of Health did not sight this modelling in detail but understand that it underpins the concern shown in Waikato DHB's self-assessment. In the Bay of Plenty, some regional

concerns around capacity to provide care to patients after hours was expressed in the regional self-assessment, as well as concern around access to services over the holiday period. In our view, these factors combined strengthen the case for caution during the holiday and transition period.

Central Region

- 27 The Central Region Leads expressed concerns around whether Hawke's Bay hospital would have enough hospital beds in case of a significant outbreak over the holiday period (partly due to capacity challenges in the aged residential care sector).
- 28 Some concerns have also been expressed from health authorities in Wairoa about an influx of people over summer, given their area includes the Mahia Peninsula and the fact that healthcare providers will be operating on a skeleton staff over the holiday period.

Southern Region

- 29 The Regional Lead for Southern noted that they are likely to have sufficient capacity unless other DHBs in the North Island require their support – i.e. if there is a large increase in cases or hospitalisations required. They have a high degree of comfort in the requirement that visitors to the South Island will need to be fully vaccinated or have a negative test. For now, they understand why the South Island is at Orange as a precautionary measure over the holiday/transition period.

Testing and contact tracing capacity

- 30 Testing supplies and capacity is continuously monitored. As at Tuesday 7 December, testing turnaround time was 76.7 percent which was a slight decrease from the previous day.
- 31 Wastewater surveillance continues. Widespread transmission across Auckland and other regions with increasing case load is and potentially will limit the effectiveness of identifying risks in newly detected wastewater areas. As at Wednesday 8 December, there had been unexpected wastewater detections in Gisborne, Opononi, Kaiwaka and Northland. Increased wastewater testing will occur in these regions.
- 32 The Auckland Regional Public Health Service has raised concerns regarding the complexity of cases and contacts and the workload to manage them. This includes compliance of close contacts and support required from other government agencies. As cases are increasingly identified in Public Health Units (PHUs) outside of Auckland, the assistance support previously provided to Auckland is decreasing as those PHUs focus on their own communities.
- 33 All PHUs are continuing with case management and contact tracing regarding cases in their regions as required. This includes publishing locations of interest regarding cases in their regions as required. An escalation pathway

that also includes door-knocking has been implemented for uncontactable cases and contacts.

Transmission

- 34 There continues to be several DHBs at Orange, which are managing active and, in some cases, larger outbreaks since the last assessment meeting (e.g. Bay of Plenty and Nelson Marlborough). It would also reduce reliance on the restrictions at Green to mitigate the risk of greater transmission at this time. Green levels also rely on equitable and high vaccination rates for protection as there are fewer restrictions placed on unvaccinated at this setting.
- 35 The impact of relaxed Auckland boundary settings, movement over the holiday period, and transition to the Framework is still unknown. Work is underway to develop our understanding of Omicron, including how this new variant of concern, could impact transmission rates. A public health risk assessment of Omicron was completed on Wednesday 8 December and a further assessment will occur on Thursday 16 December. There are still uncertainties about the impact of Omicron variant in terms of disease severity and vaccine efficacy and it may take some weeks or months before there is a reliable body of evidence.

Director-General's recommendations

- 36 The Ministry of Health's assessment based on these factors resulted in a recommendation that all areas of the country should remain at Orange, except for Northland and Auckland metro DHBs which should remain at Red. They propose an assessment is undertaken to review settings again on Tuesday 11 January to inform advice to Ministers with Power to Act in the week of 17 January 2022. The Director-General confirmed these recommendations. The Ministry of Health has subsequently agreed to undertake the next assessment on Monday 17 January so as to better align with when Ministers will review settings that week.
- 37 If the current trend of increasing vaccination rates across all groups and reduction in case numbers continue, this should give greater confidence that DHBs that are at Red or Orange could potentially shift to Orange or Green. Through December and January, DHBs will continue necessary planning and action and we will start to better understand the impact of the country's move to the Framework.

Proposal

- 38 We need to decide whether, in addition to Auckland and Northland staying at Red (as recommended by the Director-General of Health), Taupō, Rotorua Lakes, Gisborne, Wairoa, Ōpōtiki, Kawerau, Whakatane, Rangitikei, Whanganui and Ruapehu Districts also stay at Red. On 29 November Cabinet decided to place these districts, that are generally popular holiday destinations, at Red due to low vaccination rates, especially amongst Māori, to provide additional protection to those communities as a transitional

measure while vaccination rates lift [CAB-21-MIN-0509 refers]. This cautious approach allowed time for the new Framework to bed in.

- 39 First doses in these districts have increased at a faster rate than almost all other regions in the country during the past two weeks; each region now has more than 85 percent of its population with at least partial vaccination, and Māori first and second doses have increased by around ten percent. However, these districts remain predominantly the areas with the lowest overall vaccination rates in the country. The full vaccination rate for Māori vaccination rates remain below 68 percent for Ōpōtiki, Whakatane, Kawerau, Whanganui and Ruapehu Districts (full details are included in Appendix 3).
- 40 All five DHBs that these districts are within (Bay of Plenty, Whanganui, Lakes, Tairāwhiti and Hawke's Bay) are projected to be at or above 85 percent full vaccination by 31 December (Appendix 3 refers). If Māori vaccination rates continue to increase at a similar rate to what we have seen over the past fortnight (first and second doses increased by around 10 percent), Māori vaccination rates could be at or above 80 percent by mid-January when we next review the Framework settings. The impact of our transition to the Framework will also be better known at this point.
- 41 While Māori vaccination rates continue to rise, retention of the current Framework settings in these districts may be the best strategy for minimising transmission and bolstering protection over the holiday period. There have not been significant concerns raised by iwi to suggest we need to consider moving other potentially at-risk areas, such as Taranaki or Waikato, to Red. Vaccination rates in these areas have also improved since our last review on Monday 29 November both for Māori and generally.
- 42 I accordingly recommend that Ministers agree to either:
- 42.1 keep Auckland and Northland at the Red setting of the Framework and move all other regions to the Orange setting of the Framework (recommended by the Director-General of Health); or
 - 42.2 keep Auckland and Northland at the Red level of the Framework, along with:
 - 42.2.1 Taupō and Rotorua Lakes Districts; and/or
 - 42.2.2 Kawerau, Whakatane, Ōpōtiki Districts; and/or
 - 42.2.3 Gisborne District; and/or
 - 42.2.4 Wairoa District; and/or
 - 42.2.5 Rangitikei, Whanganui and Ruapehu Districts; and
 - 42.2.6 all other regions not at Red remain at Orange;

- 43 Ministers with Power to Act will review these settings in the week commencing 17 January. The Department of the Prime Minister and Cabinet (DPMC) is providing a Summer Guidance Pack to Ministers this week. This pack will provide rosters, contact lists, and information about the national transport plan to support recalling Ministers with any Framework-related decisions required over the break.

Assessment of the proposals against the non-health factors

- 44 DPMC assessed the proposed settings against the non-health factors previously agreed by Cabinet. Detail of this assessment is provided in Appendix 4. At a high-level:
- 44.1 The aggregate economic impact of the Framework is forecast to be much lower than the impacts of Alert Levels 3 and 4 restrictions.
 - 44.2 Some vulnerable communities, including Māori, remain concerned about vaccination rates. Leaders in these communities, including iwi, suggest a cautious approach to our Framework settings is the best approach to preventing harm and minimising transmission while vaccination rates, including for Māori, continue to increase and supporting frameworks (including Care in Community) bed in.
 - 44.3 Since transitioning to the Framework, reports of non-compliance have been low and public attitudes to compliance are largely consistent with previous months. There has been a 20 percent increase in people understanding the Framework well or very well (71 percent) since November and a 10 percent increase in respondents who feel we are moving in the right direction (53 percent).
 - 44.4 Regional Leadership Groups expressed concern about business earning potential over summer following event delays or cancellations; further increases in unemployment due to vaccination requirements and loss of revenue; and constrained housing capacity providing barriers to self-isolation. Regional accommodation groups will work with Ministry of Health colleagues to understand ongoing challenges and to develop different approaches where necessary. Persistent or critical issues will be escalated to the national level for response.
 - 44.5 In terms of other operational considerations, minimal change is advantageous as New Zealanders continue to develop their understanding of the new environment we are now operating in. Auckland is adjusting to front line services and contracts transitioning from being managed by the Ministry of Health to the Ministry of Social Development. Focus is being placed on ensuring a seamless transition without impacting affected families. Police continue to work with iwi to reduce the risk of illegal checkpoints being established.

My Vaccine Pass implementation

- 45 Rollout and operationalisation of My Vaccine Passes (MVPs) has continued successfully since the transition to the Framework. As at Thursday 9 December, more than four million domestic MVPs (about 90 percent of people double vaccinated) and 95,526 temporary exemptions have been issued.
- 46 Ministry of Health staff, supported by surge capacity from across the public service, are working to resolve outstanding requests and work is going well to reduce remaining applications (as at Friday 10 December, there were 56,000 backlog requests). Non-digital pathways for getting an MVP (including in-person requests at all vaccinating sites) have also been stood up. Officials advise that nobody is waiting for a temporary exemption to be issued, e.g. people who were vaccinated overseas and cannot yet register for their MVP online. Some temporary exemptions will need to be re-issued this week due to initial exemption periods expiring.
- 47 My COVID-19 Vaccination Record, rather than MVPs, can be used to provide evidence of a negative test (including unvaccinated people leaving Auckland after 15 December).

Business sector feedback

- 48 Businesses have reported generally finding the use and verification of MVPs relatively straightforward. The most significant emerging challenges for business relate to clarifying which rules apply to premises that host multiple activities, and working out which rules apply for businesses, particularly for recreation activity businesses.

My Vaccine Pass compliance reporting

- 49 Non-compliance with the MVP requirements can be reported through the existing Unite Against COVID (UAC) website, alongside existing COVID-19 breach reporting (for other breaches of the COVID-19 Protection Framework and self-isolation requirements). Officials will ensure that the existing COVID breach portal (currently manually triaged by Police) clearly states that breaches of MVP requirements can be reported through this tool, and appropriate messaging is provided through government communications channels so that people know where to report.
- 50 There are concerns that this portal is based on old technology and the manual triaging model is not sustainable in the longer term. DPMC, Police, WorkSafe, and the Ministry of Business, Innovation and Employment (MBIE) will work together to develop a replacement platform. MBIE has offered to support the development of this tool and host the infrastructure. However, the tool will be presented under UAC branding and hosted on the UAC website. Officials intend to migrate to the more sustainable solution by the end of January.

Localised lockdowns have not be used under the COVID Protection Framework

Localised lockdowns

- 51 On 18 October Cabinet noted there will be no restrictions on interregional travel or internal boundaries under the Framework, except in the case of a localised lockdown [CAB-21-MIN-0421 refers]. We have preserved the ability to use localised lockdowns where necessary to suppress transmission and protect vulnerable communities, particularly where there is unmanageable pressure on the health system.
- 52 Movement restrictions in and out of a lockdown area are not a default setting under the Framework – under a minimise and protect strategy they are less likely to be needed. s9(2)(g)(i)

What localised lockdowns will look like

- 53 The form of localised lockdowns will depend on the area they are being applied to. Each lockdown will be bespoke, comprising a combination of tools or controls proportionate to the response required in an affected area. The full suite of tools or controls will not necessarily be employed in every situation.
- 54 Available restrictions available under the COVID-19 Public Health Response (Protection Framework) Order 2021, include:
- 54.1 movement within the area (stay at home order);
 - 54.2 access to businesses or services;
 - 54.3 opening of businesses or services; and
 - 54.4 movement in, out or through the area (cross-boundary restrictions with exceptions).
- 55 Permitted reasons to move within a lockdown area will be largely the same as ‘essential personal movement’ permitted at Alert Level 3 and 4. Even under the most restrictive lockdown settings, movement will be allowed to do things like exercise, access specified businesses and services (including supermarkets, healthcare, judicial institutions, contactless services), carry out specified work (including essential infrastructure, social welfare, freight, transport and logistics), and to care for children or vulnerable people. The Director-General will continue to be able to grant exemptions from the Order, including from the requirement to comply with movement restrictions.
- 56 I anticipate restrictions will generally be applied at a district level (district and city councils). Where lockdown restrictions are being used to alleviate pressure on the health system, the scale of the lockdown may need to be expanded to a collection of districts. This reflects the interdependence of

some health services, with several districts relying on one hospital in some regions, and smaller hospitals often relying on larger ones for some services. It is assumed that surrounding areas would be at Red.

- 57 If very localised restrictions are considered more proportionate, other tools are available. For example, health officials can recommend that a facility temporarily close (e.g. a school or rest home). If this recommendation is not complied with, an authorised official may consider issuing a notice under section 70 of the Health Act 1956 requiring that facility to close.
- 58 Because of their bespoke nature, communications about what is expected of people will be crucial for ensuring compliance with localised lockdown restrictions. As with lockdowns under the previous Alert Level Framework, Police would take a targeted, risk-based approach to compliance, and apply the graduated response model. This approach has been successful to date.

When localised lockdowns will be used

- 59 Localised lockdowns will be used to protect health system capacity or to protect vulnerable communities. Outbreaks of variants of concern may necessitate lockdowns, but they may also be needed when new or external factors create risk that can no longer be effectively managed within the three levels of the Framework. For example, a new variant of concern that results in a significant decline in vaccine effectiveness, increased transmission of another disease, or a major event (including a natural disaster) that adversely impacts health system capacity.
- 60 Lockdowns would be used to protect health system capacity where there is a large outbreak in a main provincial centre and local health system capacity is constrained. Restrictions on movement within the area (i.e. a stay at home order) would help to reduce transmission in the area and limit the number of people able to leave their homes to travel out of the area. These local restrictions would also help to deter large volumes of visitors to the area.
- 61 There may be other scenarios where we use lockdowns to protect vulnerable communities with low vaccination rates, even where there is no threat to overall health system capacity. Capacity of the local health system could absorb demand created by the outbreak. However, because of the more severe health impacts associated with lower vaccination rates, we may want to implement restrictions on movement within the area to minimise spread.
- 62 In some instances movement restrictions in and out of the locked down area may be needed to achieve the public health intent of a lockdown. This could occur if there was emerging pressure on health system capacity due to an outbreak in a popular holiday destination. Restrictions on movement into that area could be used ahead of a holiday period (e.g. school holidays) to avoid an influx of visitors (and possible positive cases) placing further strain on the local system.

- 63 In rare situations, pre-emptive cross-boundary restrictions may be an option. For example, if there was an expansive outbreak of a variant of concern in areas near to a vulnerable community with particularly low vaccination rates. Despite there not currently being any community transmission in the vulnerable community, we may want to restrict travel into the area to protect the community from being exposed to the virus. In this case, movement restrictions into the area would be effective in protecting the community, but movement restrictions within the area (stay at home orders) would not necessarily be proportionate in the absence of community transmission.
- 64 Swift or reactive lockdowns will generally not be required under the Framework. The factors likely to necessitate a lockdown (including vaccination coverage, health and disability capacity etc) will be assessed by officials on at least a fortnightly basis to inform Framework level reviews. We will have more foresight of when lockdowns will be needed as a result. Officials have advised that two to four weeks' notice of health systems becoming overwhelmed should be possible in most situations.
- 65 I do not anticipate localised lockdowns would be used frequently. Our vaccination rates are high and the Framework has been designed to manage and minimise harm of COVID-19 in communities. Where lockdowns are used, officials anticipate them being required for shorter periods of time compared to how lockdowns were used under the Alert Level System. Typically, up to ten days will be required to break transmission cycles. Longer periods of lockdown may be required if the lockdown is intended to 'buy time' while communities increase their vaccination (including booster) rates. How lockdowns may disproportionately impact groups, including Māori and businesses, will need to be carefully considered in deciding on their use and duration.

How will localised lockdowns be implemented

- 66 The form and scale of localised lockdowns will be informed by public health advice, regional input and operational practicalities. Officials will engage directly with affected communities and stakeholders in the development and implementation of localised lockdowns. Operationally, lockdowns can be complex to manage depending on the location and what critical assets or services are within the locked down area, for example, an airport.
- 67 I will amend the COVID-19 Public Health Response (Protection Framework) Order 2021 to bring any required lockdown into effect, in consultation with specified Ministers.

Economic supports for localised lockdowns

- 68 If any form of localised lockdown is needed, it will likely be appropriate to provide additional economic support. This may be the case for any wider or localised restrictions that are similar to Alert Levels 3 and 4 lasting for seven or more days.

- 69 Given operational constraints over the Christmas holiday period, if such support is needed during that time, the quickest way to provide support will be through existing schemes such as the Resurgence Support Payment (RSP). Officials have indicated there are constraints to being able to deliver this kind of support quickly. Activating the RSP requires submitting an Order in the Executive Council before Inland Revenue is authorised to make payments.
- 70 The Minister of Finance, Minister of Social Development and Minister of Revenue and their respective agencies will work through design, timelines, and delivery over the next week.
- 71 In the unlikely event that further economic support measures are needed over the holiday period, I propose that Cabinet authorise the COVID-19 Ministerial Group to take the necessary decisions to reactivate the WSS and RSP. I propose that this authorisation be in place from 21 December until 25 January and that it also provides those Ministers with the delegated authority to make any decisions necessary for the effective implementation of these schemes.

Financial implications

- 72 At 6 December, the remaining balance of the COVID-19 Response and Recovery Fund (CRRF) is \$4.3 billion. This figure does not account for decisions made by the Cabinet Social Wellbeing Committee on 8 December to provide an additional \$1.3 billion to support New Zealand's quarantine system [SWC-21-MIN-0214 and SWC-21-MIN-0215 refer]. These decisions are expected to be considered by Cabinet on 13 December 2021.
- 73 On 29 November, Cabinet agreed that, as business will be able to operate at almost full capacity under all levels of the Framework, it is appropriate to move away from the broad-based support that had been provided under the Alert Level system to more targeted support under the Framework [CAB-21-MIN-0504 refers]. Cabinet agreed to:
- 73.1 retain the Leave Support Scheme and the Short-term Absence Payment under all settings of the Framework to support individuals who cannot work while they are isolating or waiting for test results. These payments are expected to cost less than \$5 million per week;
 - 73.2 stop the Wage Subsidy Scheme (WSS) and RSP on the implementation of the Framework in any part of New Zealand;
 - 73.3 a one-off Transition Payment on 10 December 2021 to acknowledge the prolonged period in heightened Alert Levels that Auckland, Waikato and Northland have experienced. This is expected to cost between \$350 to \$490 million; and
 - 73.4 appropriate an additional \$300 million to meet the expected costs of the Transition Payment and changes to remaining RSP payments.

74 Given the uncertainties that come with COVID-19, a flexible and adaptable approach is needed, and the Government will better understand if any further support is needed as more time is spent under the Framework. s9(2)(f)(iv)

[Redacted]

[Redacted]

[Redacted]

Legislative Implications

75 If necessary, as a result of decisions taken today, the Minister for COVID-19 Response will amend the COVID-19 Public Health Response (Protection Framework) Order 2021.

Impact Analysis

76 The Treasury's Regulatory Impact Analysis team has determined that the proposals in this Cabinet paper relating to this review of settings under the new COVID-19 Protection Framework are exempt from the requirement to provide a Regulatory Impact Statement on the grounds that they are intended to manage, mitigate, or alleviate the short-term impacts of a declared emergency event of the COVID-19 pandemic, and the implementation of the policy is required urgently to be effective (making complete, robust and timely impact analysis unfeasible).

Human Rights

77 s9(2)(h)

[Redacted]

[Redacted]

[Redacted]

80 s9(2)(h) [Redacted]

[Redacted]

[Redacted]

Te Tiriti o Waitangi Analysis

83 The Crown’s obligations to Māori under the Treaty of Waitangi require active protection of tāonga, including people. Decisions must be informed by good faith engagement with, and appropriate knowledge of, the views of iwi and other representatives of potentially vulnerable Māori communities. Treaty principles require the Crown to do what is reasonable in the circumstances.

84 In the context of the Framework, this involves considering what will support a national response that is co-ordinated, orderly, and proportionate, considering the Crown’s obligation to actively protect Māori interests. The Crown should also look for opportunities to enable for-Māori by-Māori responses.

85 Current vaccination rates are lower for Māori compared to the average across New Zealand. Lower vaccination rates coupled with a disproportionate burden of disease mean Māori communities are at a greater risk of illness and death as we transition into the Framework.

86 For areas with lower Māori vaccination rates, being at Orange rather than Red could put vulnerable Māori communities at greater risk of COVID-19 infection. Even with vaccination or testing requirements in place to cross the Auckland Alert Level boundary from 15 December, there is an increased likelihood of the virus spreading throughout the country once the boundary opens. It is positive that first dose Māori vaccination rates have rapidly increased over the past two weeks in the most vulnerable areas (those areas we initially moved to Red due to their lower vaccination rates, particularly for Māori).

- 87 Building trust through effective engagement with (particularly vulnerable) Māori communities should also lie at the heart of any ongoing strategy to boost vaccination rates. This is because people who do not trust the source of information (e.g. the need to get vaccinated) are unlikely to follow the advice from it.
- 88 Additional funding is being provided to Māori health providers, and DHBs are continuing their push to increase vaccination rates. It is important that this funding is held by Māori organisations to design solutions for and with Māori communities, in partnership with local DHBs, Māori health providers and other organisations.

Population and economic impacts

- 89 The population and economic impacts are outlined in earlier sections of this paper and in Appendix 4.

Next steps

- 90 Ministers with Power to Act will next review the Framework settings in the week of 17 January 2022 informed by a Ministry of Health assessment on 17 January 2022.
- 91 DPMC will undertake a preliminary review of Framework policy settings, including the use of MVPs under the Framework, in the new year. This will identify any necessary changes to policy settings [CAB-21-MIN-0438 and CAB-21-MIN-0509 refer].

Consultation

- 92 This paper was prepared by the COVID-19 Group within DPMC. The Ministry of Health reviewed the paper and provided specific input. Crown Law advised on the Bill of Rights implications.
- 93 The following agencies were consulted: Crown Law, Customs, Police, Te Arawhiti, Te Puni Kōkiri, Treasury, and the Ministries of Business, Innovation and Employment, Transport and Social Development.

Communications and proactive release

- 94 The Prime Minister will communicate the decisions set out in this paper after Cabinet agreement. I intend to proactively release this paper after Cabinet consideration subject to redaction as appropriate under the Official Information Act 1982.

Recommendations

The Minister for COVID-19 Response recommends that Cabinet:

- 1 note on Monday 29 November Cabinet confirmed the decision to transition all New Zealand to the COVID-19 Protection Framework at 11.59pm Thursday 2 December 2021, with parts of the North Island moving to Red and the rest of the country moving to Orange [CAB-21-MIN-0509 refers];
- 2 note as at 9am Friday 10 December, there were 6,630 active community cases associated with the current outbreak, 56 people are in hospital due to COVID-19 including four in intensive care or high dependency units, and the seven-day rolling average of cases has reduced from 187 at our last review on 29 November to 103;
- 3 note that vaccination rates in the districts at Red (excluding Auckland and Northland) have increased rapidly over the past two weeks, with at least 85 percent of their populations now at least partially vaccinated, however, these areas still have the lowest overall vaccination rates in the country with Māori vaccination rates still lower than for the rest of the country;
- 4 note the Ministry of Health's COVID-19 Protection Framework health assessment, based on vaccination rates, case rates, health capacity and other factors, recommends that Auckland and Northland stay at the Red setting of the Framework and the rest of the country be at Orange;
- 5 note Ministers could also consider, in light of the relatively lower vaccination rates, especially amongst Māori, that additional areas to what the Ministry of Health recommend could also remain at Red as a transitional measure to provide additional protection to communities in those areas;
- 6 agree to:
EITHER
 - 6.1 keep Auckland and Northland at the Red setting of the Framework and all other regions move to the Orange setting of the Framework (recommended by the Director-General of Health);OR
 - 6.2 keep Auckland and Northland at the Red level of the Framework, along with:
 - 6.2.1 Taupō and Rotorua Lakes Districts; and/or
 - 6.2.2 Kawerau, Whakatane, Ōpōtiki Districts; and/or
 - 6.2.3 Gisborne District; and/or
 - 6.2.4 Wairoa; and/or

6.2.5 Rangitikei, Whanganui and Ruapehu Districts; and

6.2.6 all other regions not at Red remain at Orange;

7 note that the next scheduled review of the settings is in the week commencing 17 January 2022;

8 note Ministers are being provided with a summer guidance pack this week to support decision-making over the holiday period, should Framework-related decision be required;

Localised lockdowns

9 note that as part of the Framework, we have preserved the ability to use localised lockdowns where necessary to suppress transmission and protect vulnerable communities;

10 note localised lockdowns can include any or all of the following restrictive measures as appropriate to the scenario:

10.1 movement within the area (stay at home order);

10.2 access to businesses or services;

10.3 opening of businesses or services; and

10.4 in rare circumstances, movement in, out or through the area (cross-boundary restrictions);

Additional economic support measures

11 note that in the unlikely event that additional economic support measures are required over the 2021/22 Christmas holiday period, for example for a localised lockdown, the quickest way to provide support will be through existing measures like the Wage Subsidy Scheme (WSS) and the Resurgence Support Payment (RSP);

12 note the Minister of Finance, Minister of Social Development and Minister of Revenue will work with officials on the timeline for making support available, acknowledging that there are resource constraints during this period

13 authorise the COVID-19 Ministerial group to take the necessary decisions to reactivate the WSS and RSP if needed between 21 December 2021 and 25 January 2022;

14 note that the costs of this support would be met in the first instance from a balance of approximately \$420 million remaining in the existing Business Support Subsidy COVID-19 appropriation in Vote Social Development and from a balance of approximately \$300 million remaining in the RSP appropriation;

- 15 authorise the COVID-19 Ministerial group to jointly approve further funding from the COVID-19 Response and Recovery Fund to meet the costs of introducing the WSS and RSP over the Christmas holiday period if these costs are estimated to exceed the balance of appropriated funding described in recommendation 15 above;
- 16 note activating the RSP requires submitting an Order in Council to the Executive Council before Inland Revenue is authorised to make payments; and
- 17 invite the Minister of Finance, the Minister for Social Development and Employment, and the Minister for Revenue to continue discussions on the potential nature, design, and delivery of any economic support over the holiday period; and
- 18 agree that the Prime Minister will announce today's decisions.

Hon Chris Hipkins
Minister for COVID-19 Response

Appendix 1 – Comparison of Red and Orange restrictions

ORANGE	RED (Differences from Orange in bold)
<ul style="list-style-type: none"> •Wear a face covering on flights, public transport, taxis, shops and public venues (mandatory) • You can visit public places like libraries and shops (with limits based on the size of venue) • Go to workplaces • Go to education places (with health measures in place) 	<ul style="list-style-type: none"> • Wear a face covering on flights, public transport, taxis, shops, education (Year 4 and up including tertiary) and public venues (mandatory) • You can visit public places like libraries and museums (with limits based on the size of the venue) • Go to workplaces. Where appropriate staff may work from home • Go to education places like schools and ECE (with health measures and controls in place)
<p>My Vaccine Pass Allows you to go to the following with no limits:</p> <ul style="list-style-type: none"> • Cafes, restaurants and bars • Gatherings like weddings and funerals, and gatherings at home • Close-proximity businesses like your hairdresser • The gym or other member-based businesses like dance or martial art studios 	<p>My Vaccine Pass Allows you to go to the following with up to 100 people based on the size of the venue:</p> <ul style="list-style-type: none"> • Cafes, restaurants and bars • Gatherings like weddings and funerals, and gatherings at home. For gatherings at home, you can have up to 100 regardless of the size of the house. • Indoor and outdoor events • Close-proximity businesses like your hairdresser • The gym or other member-based businesses like dance or martial art studios. • You can also attend tertiary education in person
<p>Without My Vaccine Pass</p> <ul style="list-style-type: none"> • Only allowed contactless pickups at cafes, restaurants and bars • Small gatherings can be up to 50 people, based on the size of the venue. If held at home, maximum 50 regardless of the size of the house • Cannot attend indoor or outdoor events • Outdoor community gatherings with uncontrolled access have a maximum of 50 people • Cannot go to the gym or other member-based businesses like dance or martial art studios • Cannot visit close-proximity businesses like hairdressers. 	<p>Without My Vaccine Pass</p> <ul style="list-style-type: none"> • Only allowed contactless pickups at cafes, restaurants and bars • Small gatherings can be up to 25 people, based on the size of the venue. If held at home, maximum of 25 people regardless of the size of the house • Cannot attend indoor or outdoor events • Outdoor community gatherings with uncontrolled access have a maximum of 25 people • Only distance learning for tertiary education

Appendix 2 – Vaccination rates and projections as at 5 December 2021 by DHB

DHB	Mid-point				Worst-case			
	13 th Dec	15 th Dec	25 th Dec	31 st Dec	13 th Dec	15 th Dec	25 th Dec	31 st Dec
New Zealand	89%	89%	Complete	Complete	88%	88%	89%	90%
Auckland	Complete				Complete			
Bay of Plenty	84%	84%	86%	88%	83%	84%	84%	86%
Canterbury	Complete				Complete			
Capital and Coast	Complete				Complete			
Counties Manukau	89%	90%	Complete	Complete	89%	89%	89%	Complete
Hawkes Bay	85%	86%	88%	89%	85%	85%	85%	86%
Hutt Valley	89%	89%	Complete	Complete	89%	89%	89%	Complete
Lakes	81%	82%	85%	86%	83%	83%	84%	85%
Midcentral	87%	87%	89%	Complete	86%	86%	87%	88%
Nelson Marlborough	87%	88%	89%	90%	87%	87%	87%	88%
Northland	80%	81%	83%	84%	79%	79%	79%	81%
South Canterbury	87%	88%	89%	90%	87%	87%	87%	88%
Southern	Complete				90%	90%	90%	Complete
Tairāwhiti	79%	80%	83%	85%	82%	83%	83%	84%
Taranaki	85%	85%	87%	89%	84%	84%	85%	86%
Waikato	87%	88%	89%	Complete	86%	86%	87%	88%
Wairarapa	86%	87%	90%	Complete	87%	87%	87%	88%
Waitematā	Complete				Complete			
West Coast	83%	83%	86%	87%	83%	83%	83%	84%
Whanganui	81%	82%	84%	85%	81%	81%	82%	83%

Appendix 3 – Change in vaccination rates since 23 November, by district council area

This table is ordered by Māori second dose coverage as at 7 December. Gisborne, Rangitikei and Wairoa Districts are slightly above the average second dose rate for Māori but below the overall second dose coverage. Whakatane, Ruapehu, Kawerau, Ōpōtiki and Whanganui Districts are below average on both the Māori and overall second dose coverage.

District	Second Dose Coverage (as at 7 December)	Māori Second Dose Coverage (as at 7 December)	Change in Second Dose Coverage (since 23 November)	Change in Māori Second Dose Coverage (since 23 November)
Whakatane District	76%	63%	7%	9%
Ruapehu District	76%	64%	7%	9%
Kawerau District	73%	65%	8%	12%
Ōpōtiki District	76%	67%	7%	9%
Whanganui District	83%	67%	6%	9%
Taupō Lakes District	85%	70%	5%	11%
Rotorua Lakes District	84%	72%	7%	11%
Gisborne District	82%	73%	8%	10%
Rangitikei District	84%	74%	6%	8%
Wairoa District	80%	75%	8%	9%
National Average	89%	73%	5%	8%

Appendix 4 – Detailed assessment of the proposals against the non-health factors

- 1 The following section assesses the proposed settings against the non-health factors agreed by Cabinet. Over time we will better understand the impact of our transition to the Framework. At this stage, some vulnerable populations are concerned about the robustness of the Framework in protecting them and minimising harm in communities.

Impacts on at risk populations and iwi

- 2 Māori remain concerned about the efficacy of the Framework in protecting vulnerable communities, including Māori. Feedback from National Iwi Chairs on Friday 3 December reiterated calls to strengthen travel restrictions out of Auckland from 15 December. In particular, Iwi Chairs recommended that the restrictions on travellers leaving Auckland should be tightened to require evidence of both a negative test and full vaccination. The rationale is that vaccinated people can still transmit the virus to vulnerable communities and having a negative test may mitigate this risk. Current testing capacity, even with the introduction of wider rapid antigen testing, would not support this dual requirement. Preventing unvaccinated people, even if tested, from travelling out of Auckland would not be justified on the basis of the advice received from the Director-General. Cabinet's decision to require people to be vaccinated or tested when travelling out of Auckland seeks to ensure vulnerable communities, such as Māori, are sufficiently protected while at the same time enabling people to travel where the public health advice supports this.
- 3 Vaccination continues to be the focus for many Māori health and social service providers. These providers are reportedly fatigued and finding it difficult to pivot to provide additional health and welfare support required under the Framework. The need for clear, relatable and continuous messaging needs to continue underpinning all levels of the Framework, so people understand what is expected of them under the Framework and how they can access support when needed. DPMC and Te Puni Kōkiri will work on options to communicate information about the Framework to Māori through channels that are more relevant to Māori.
- 4 A significant focus for Pacific communities has been on the implications of the Framework on church attendance. In particular, what rules apply to churches and how unvaccinated Pacific peoples can be supported to get fully vaccinated. The Ministry for Pacific Peoples has tailored its engagement and communications to address calls from Pacific communities for clearer messaging about the Framework, My Vaccine Pass and vaccine hesitancy. This has included practical advice and information in Pacific languages, and bespoke social media for young Pacific peoples to support improved youth vaccination rates.
- 5 Vaccination rates continue to be particularly low amongst the working age beneficiaries (51 percent fully vaccinated, as at 16 November), compared to rates for the overall New Zealand population. Despite targeted efforts by the

Ministry of Youth Development, there also continues to be challenges in lifting young people’s vaccination rates. In Northland, many tertiary students are unable to attend on-site lessons because they are unvaccinated. This is particularly problematic when layered with limited access to devices to enable remote learning and internet.

- 6 Older people are particularly anxious about rising case numbers and transmission across the country when restrictions on Aucklanders leaving their region lift. More generally, some disabled people continue to be too scared to leave their homes, even for life critical services. The Ministry of Social Development and DPMC are working together to develop tailored information for the disability community, in alternate formats, about the Framework and the protection it provides. Broad dissemination of translated information about the Framework will also be a focus over coming weeks to support ethnic communities’ understanding of the new environment.
- 7 Improving access to My Vaccine Passes for ethnic communities is also being worked on by officials – particularly international students who do not have required identification or who may have been vaccinated overseas.

Economic impacts from the Framework

- 8 The following table shows the anticipated economic impact of the CPF relative to forecast activity with no public health restrictions. These are initial estimates, and the Treasury will continue to update and refine these estimates as data becomes available on economic activity under the CPF.

Estimated weekly economic impact of CPF restriction scenarios relative to forecast activity with no public health restrictions¹

Restrictions	Impact range	Approximate midpoint
All of New Zealand at Green	0% - 2% of national GDP	\$100 million
All of New Zealand at Orange	1% - 3% of national GDP	\$140 million
Northland and Auckland at Red All other regions at Orange	2% - 3% of national GDP	\$160 million
Northland, Auckland, Bay of Plenty, Gisborne, and Manawatu-Whanganui at Red All other regions at Orange	2% - 3% of national GDP	\$170 million
All of New Zealand at Red	2% - 3% of national GDP	\$190 million

- 9 Under the Framework, most businesses will be able to operate relatively normally, and the initial estimates above suggest that the aggregate economic

¹ These estimates do not incorporate the potential impact from any local or regional lockdowns, and assume entire regions are at the stated CPF setting. Data currently available does not allow for estimates of the economic impact of sub-regional restrictions.

impact of the CPF is likely to be much lower than the impacts of Alert Levels 3 and 4 restrictions.

- 10 In addition to the estimated economic impact of public health restrictions, the Treasury estimates that the impact of maintaining restrictions on the New Zealand border, in the context of COVID-19 globally, is approximately 2% of GDP over any given period.
- 11 The Treasury estimates that keeping current CPF settings in place would result in a total economic impact of around \$350 million between 13 December 2021 and 17 January 2022, compared to a scenario where all of New Zealand is at Green.
- 12 The Treasury estimates that placing Northland and Auckland at Red and the rest of New Zealand at Orange would result in a total economic impact of around \$350 million between 13 December 2021 and 17 January 2022, compared to a scenario where all of New Zealand is at Green.
- 13 While we do not yet have high frequency economic indicator data for the period since New Zealand moved to the CPF, data for the week ended 28 November 2021 continues to demonstrate the relative economic impact of Alert Level restrictions:
 - 13.1 Electronic card spending in Auckland was 6.4% below the same week in 2019. This was a significant increase from the first week of November, when spending was down by 31.3%. Spending for New Zealand as a whole had recovered to be in line 2019 levels.
 - 13.2 Heavy traffic volumes were higher than the week prior to the Delta outbreak in all major centres, including in Auckland where it was 2.1% higher. Light traffic has been slower to recover, down 20.2% in Auckland and slightly below pre-Delta levels in most other centres.

Public attitudes and compliance

- 14 There have been fewer queries to Unite Against COVID social media channels since transitioning to the Framework than anticipated. Most queries related to MVPs and vaccine mandates, particularly whether businesses could choose to require MVPs and how passes will be verified. Between Wednesday 24 November and 1 December, nearly half of the calls received by MBIE call centres (business.govt.nz and AlertLevel4 Services) related to queries about the Framework and how it applies to business.
- 15 New Zealand Police advise that between 22 September and 9 December, Police had carried out 30,895 pandemic-related activities. A total of 8,869 online breach notifications have been received and 1,361 pandemic-related infringements issued. Breach of stay at home orders and physical distancing requirements at Alert Level 3 have been the biggest contributors to this statistic to date. Since 22 September, 71 people have been prosecuted for COVID-19 offences, most often protest activity or other intentional behaviour

in breach of restrictions. Since transitioning to the Framework, reports of non-compliance have been low.

- 16 Regional Leadership Groups (RLGs) noted that some businesses are reportedly operating outside of the Framework instead of choosing to operate with a My Vaccine Pass requirement. In a number of cases these are being reported to WorkSafe, who are referring to Police where appropriate.

Operational considerations

- 17 Maintaining the status quo Framework settings does not present operational challenges, beyond those previously identified in relation to ongoing enforcement of requirements such as use of face coverings and vaccination certificates. Minimal change is advantageous as New Zealanders continue to develop their understanding of the new environment we are now operating in, including living with community transmission of COVID-19. Auckland is still adjusting to front line services and contracts transitioning from being managed by the Ministry of Health to the Ministry of Social Development (MSD). Focus is being placed on ensuring a seamless transition without impacting affected families. There would also not be operational implications of shifting some areas currently at Red to Orange, however any lowered levels may exacerbate anxiety and safety concerns for these communities.
- 18 The **National Management Approach** is being finalised for circulation to agencies and replaces the National Response plan to provide an overview of the minimisation and protection strategy and how it is given effect through the COVID-19 Protection Framework. This document provides a summary of the risk mitigation tools available to individuals, communities and government to minimise impacts of COVID-19 on the health system and individuals. The document provides roles and responsibilities across the system and the decision-making processes.
- 19 Engagement with RLGs demonstrated concern about **business earning potential** over summer. In particular, the impact on enduring economic benefits typically generated over the summer months following the cancellation or delay of major events (including Rhythm and Vines) and holiday accommodation more generally. RLGs were also concerned about rising unemployment as businesses make hard decisions around unvaccinated staff or reduce staffing levels due to diminishing forecast revenue.
- 20 **Housing capacity** was also noted as a concern by RLGs. Some accommodation types will pose a barrier to safe self-isolation for some people. These households will require additional support to keep themselves, their whānau, and the community safe. This applies mostly to individuals living in emergency and temporary accommodation and some high-density complexes. It particularly impacts Māori and Pacific Peoples due to their overrepresentation in homelessness, overcrowding, and housing deprivation statistics. The summer holidays will also bring the challenge of housing

people who are in a different island to their home and cannot fly or take the ferry home because they have COVID-19.

- 21 The availability of alternative accommodation remains a key risk to our COVID-19 response. Accessing housing is one of New Zealand's long-term challenges and issues have been amplified by COVID-19. While some portable solutions such as campervans may be the only option in some regions, agencies will only progress them if they meet the property suitability requirements set out by the Ministry of Health. Regional accommodation groups will work with health colleagues to understand ongoing challenges and to develop different approaches where necessary. Persistent or critical issues will be escalated to the national level for response.
- 22 The Minister of Housing and the Minister for Social Development and Employment are scheduled to bring a paper to Cabinet on 20 December providing an update on the implementation of the housing and welfare-system approaches under the COVID-19 Protection Framework.
- 23 On Friday 3 December, MSD, other government agencies and partners started supporting people who were self-isolating and who contacted MSD for **welfare support**. As at 2pm Thursday 9 December, 446 calls had been received through the dedicated 0800 number that people receive as part of their self-isolation pack. The majority of the issues raised were able to be resolved during the call. A significant proportion of these were related to food support. The majority of calls have come from Auckland, followed by Tauranga. On 10 December, the Ministry of Health-led National Contact Tracing System will be stood up and the MSD coordinated welfare system approach will start receiving referrals through that system. Reporting on welfare referrals from the Ministry of Health will be available from Wednesday 15 December.
- 24 Police has worked with local iwi to plan for the establishment of **checkpoints** at the Northern Auckland boundary from December 15. This partnership approach is enabled by the current settings, where movement is restricted for people leaving Auckland, under the COVID-19 Protection Framework Order. There is ongoing concern about the possibility of other iwi implementing similar checkpoints to restrict movement into their communities.
- 25 Police has engaged with iwi on the requirements of the COVID-19 Protection Framework and recognises iwi and hapū concerns around protecting vulnerable communities. Significant discussion is taking place with iwi outside of Northland to provide reassurance to the community. However, Police has also advised that any checkpoints beyond the Auckland boundary area will be illegal, and that Police will take action as required to enable freedom of movement.
- 26 On 9 December, the Tairāwhiti Regional Leadership Group (Rau Tipu Rau Ora) wrote to the Director-General of Health asking that he makes an Order to enable Police-led checkpoints to be established at the boundary of the region to check people are either vaccinated or have evidence of a negative COVID-

19 test. The group, which includes the four iwi of Tairāwhiti, is concerned about the ability of the Tairāwhiti health system to cope with a population inflated by returning whānau and tourists over summer, lower vaccination rates in some small towns and suburbs, and under-developed social-care systems for isolating households likely leading to isolation breaches. Such an approach has not previously been considered as a necessary or proportionate response to the public health risk posed under the Framework. This request reflects the issue of iwi wanting to protect their rohe by preventing unvaccinated people from elsewhere (and in some cases anyone) from entering their rohe.

- 27 Applications for Business for Travel Documents (BTD) have decreased over recent weeks, reflecting decisions to largely lift Auckland boundary restrictions from Wednesday 15 December. As at Monday 6 December, 56,384 applications for BTDs had been received by MBIE. A total of 13,386 applications have been approved, 39,755 declined and 3,243 pending. The majority of applications were approved for transport, logistics and vehicle services (13,975), followed by primary industry and food supply (6,373) and utilities and communications (4,348).



Cabinet

Minute of Decision

This document contains information for the New Zealand Cabinet. It must be treated in confidence and handled in accordance with any security classification, or other endorsement. The information can only be released, including under the Official Information Act 1982, by persons with the appropriate authority.

COVID-19 Protection Framework: 13 December 2021 Review of Settings for New Zealand

Portfolio COVID-19 Response

On 13 December 2021, Cabinet:

Background

- 1 **noted** on 29 November 2021 Cabinet confirmed the decision to transition all New Zealand to the COVID-19 Protection Framework (Protection Framework) at 11.59 pm, Thursday, 2 December 2021, with parts of the North Island moving to Red and the rest of the country moving to Orange [CAB-21-MIN-0509];

Current situation review

- 2 **noted** that as at 9 am, Friday, 10 December 2021, there were 6,630 active community cases associated with the current outbreak, 56 people are in hospital due to COVID-19, including four in intensive care or high dependency units, and the seven-day rolling average of cases has reduced from 187 at the last review on 29 November to 103;
- 3 **noted** that vaccination rates in the districts at Red (excluding Auckland and Northland) have increased rapidly over the past two weeks, with at least 85 percent of their populations now at least partially vaccinated, however, these areas still have the lowest overall vaccination rates in the country with Māori vaccination rates still lower than for the rest of the country;
- 4 **noted** that the Ministry of Health's Protection Framework health assessment, based on vaccination rates, case rates, health capacity and other factors, recommends that Auckland and Northland stay at the Red setting of the Protection Framework and that the rest of the country be at Orange;
- 5 **noted** that Ministers could also consider, in light of the relatively lower vaccination rates, especially amongst Māori, that additional areas to what the Ministry of Health recommend could also remain at Red as a transitional measure to provide additional protection to communities in those areas;
- 6 **agreed to:**
 - 6.1 keep Auckland at the Red level of the Protection Framework until 11.59 pm on 30 December 2021, along with:
 - 6.1.1 Taupō and Rotorua Lakes Districts;

- 6.1.2 Kawerau, Whakatane, Ōpōtiki Districts;
- 6.1.3 Gisborne District;
- 6.1.4 Wairoa;
- 6.1.5 Rangitikei, Whanganui and Ruapehu Districts; and

6.2 **agreed** that Auckland and the other Red areas in paragraph 6.1 above move to the Orange level of the Protection Framework from 11.59 pm on 30 December 2021, **subject to** the case numbers continuing to track as expected;

6.3 **agreed** to keep Northland at the Red level of the Protection Framework;

6.4 **agreed** that all other regions remain at the Orange level;

7 **noted** that the next scheduled review of the Protection Framework settings will be in the week commencing 17 January 2022, which will be considered by the COVID-19 Ministerial group;

8 **noted** that Ministers will be provided with a summer guidance pack in the week of 13 December 2021 to support decision-making over the holiday period, should Protection Framework-related decisions be required;

Localised lockdowns

9 **noted** that as part of the Protection Framework, the government have preserved the ability to use localised lockdowns where necessary to suppress transmission and protect vulnerable communities;

10 **noted** that localised lockdowns can include any or all of the following restrictive measures as appropriate to the scenario:

- 10.1 movement within the area (stay at home order);
- 10.2 access to businesses or services;
- 10.3 opening of businesses or services; and
- 10.4 in rare circumstances, movement in, out or through the area (cross- boundary restrictions);

Additional economic support measures

11 **noted** that in the unlikely event that additional economic support measures are required over the 2021/22 Christmas holiday period, for example for a localised lockdown, the quickest way to provide support will be through existing measures like the Wage Subsidy Scheme (WSS) and/or the Resurgence Support Payment (RSP);

12 **noted** that the Minister of Finance, Minister of Social Development, and Minister of Revenue will work with officials on the timeline for making support available, acknowledging that there are resource constraints during this period;

13 **authorised** the COVID-19 Ministerial group to take the necessary decisions to reactivate the WSS and/or RSP if needed between 21 December 2021 and 25 January 2022;

- 14 **noted** that the costs of this support would be met in the first instance from a balance of approximately \$420 million remaining in the existing Business Support Subsidy COVID-19 appropriation in Vote Social Development and from a balance of approximately \$300 million remaining in the RSP appropriation;
- 15 **authorised** the COVID-19 Ministerial group to jointly approve further funding from the COVID-19 Response and Recovery Fund to meet the costs of introducing the WSS and/or RSP over the Christmas holiday period if these costs are estimated to exceed the balance of appropriated funding described in paragraph 14 above;
- 16 **noted** that activating the RSP requires submitting an Order in Council to the Executive Council before Inland Revenue is authorised to make payments;
- 17 **invited** the Minister of Finance, the Minister for Social Development and Employment, and the Minister for Revenue to continue discussions on the potential nature, design, and delivery of any economic support over the holiday period;
- 18 **agreed** that the Prime Minister will announce today's decisions.

Michael Webster
Secretary of the Cabinet