

Proactive Release

The following items have been proactively released by the Rt Hon Jacinda Ardern, Prime Minister:

Paper: Managed arrivals to New Zealand

Minute of Decision: Managed Arrivals into New Zealand

Some parts of this information release would not be appropriate to release and, if requested, would be withheld under the Official Information Act 1982 (the Act). Where this is the case, the relevant section of the Act that would apply has been identified. Where information has been withheld, no public interest has been identified that would outweigh the reasons for withholding it.

Key to redaction code:

- 9(2)(h), to maintain legal professional privilege
- 9(2)(j), to enable negotiations to be carried on without prejudice or disadvantage

BUDGET SENSITIVE

Office of the Minister of Customs

Office of the Minister of Health

COVID-19 Ministerial Group

Managed arrivals to New Zealand

Proposal

1. To inform the COVID-19 Ministerial Group of the Director-General of Health's intention to require all travellers entering New Zealand to undergo fourteen days of isolation in managed facilities and to seek agreement to the funding required.

Relation to government priorities

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

Executive Summary

3. Despite strong restrictions on who is able to enter New Zealand and the requirement for those that do to undertake 14 days of self-isolation, the primary source of COVID-19 cases in New Zealand continues to be international arrivals and the close contacts that they are self-isolation with. Accordingly, as we make progress towards containing the spread of COVID-19 amongst the resident population, there is a corresponding need to strengthen the controls placed on those that are arriving from overseas to ensure that new vectors for transmission do not open up.
4. The Director-General of Health intends to issue an Order under Section 70 of the Health Act 1956 to require all arrivals into New Zealand to undertake 14 days of managed isolation or quarantine¹ on arrival. The effect of this is that from 11:59pm on Thursday 9 April, self-isolation at home will no longer be an option for the first 14 days following peoples' entrance to New Zealand.
5. This paper outlines the operational and financial considerations for the Government of that Order being issued. We propose that until a longer-term border management strategy has been developed, the cost of providing managed isolation and quarantine facilities will be met by the Crown. Based on a projected volume of arrivals of approximately 190 people per day, the cost of this is expected to not exceed ^{s9(2)(f)} over the next six months. We are seeking agreement to a tagged contingency

¹ Quarantine facilities enforce a much stricter isolation when compared to managed isolation facilities. Typically, people in quarantine can't leave their rooms and if they do, for example to exercise, they must do so with full PPE to manage the risk of infection. There is also a much stronger Health presence to support those in quarantine compared to those in managed isolation due to their higher high risk of COVID-19. If those in quarantine becoming seriously unwell, they are transferred to a hospital.

of s9(2)(j) that will allow these costs to be drawn on as required by the COVID-19 Ministerial Group.

6. Officials will consider cost recovery and cost sharing approaches (including any legislative change required), particularly for people who are seeking to repatriate after an extended absence, as part of advice on a longer-term border strategy.

Background

7. All arrivals to New Zealand (New Zealanders and specified exemptions) are required to complete a 14-day strict quarantine/isolation period (either in quarantine, managed-isolation or home self-isolation as outlined in paragraph 9). All new arrivals are also required to comply with the Level Four lock-down requirements after the initial 14-day isolation period. The intent of the isolation period is to manage the welfare of individuals and the overall wellbeing of the country by not spreading COVID-19.
8. Our current system for determining whether arrivals complete their 14-day quarantine/isolation period at a managed facility or whether they self-isolate at home was implemented quickly to accommodate large numbers looking to repatriate as New Zealand transitioned into an Alert Level 4 Response. While arrival numbers have stabilised, we recommend strengthening our isolation requirements for arrivals to safeguard against imported cases of COVID-19 with the following considerations in mind:
 - a. As of 7 April, of New Zealand's COVID-19 cases to date, 45% had a history of recent international travel. Most of the remaining cases were in close contact with those imported cases.
 - b. Returning New Zealand citizens and permanent residents pose a greater health risk, as the likelihood of carrying COVID-19 increases due to the virus becoming more widespread offshore.
 - c. As we make positive progress in managing COVID-19 domestically and move to lower alert levels, any imported cases would risk re-introducing domestic transmission.
 - d. s9(2)(h) [REDACTED]
 - e. The border needs to remain open to freight, both to service essential needs now, and to enable economic recovery (and confidence) over time.

Current arrangements

9. Our current border system screens arriving passengers and determines the location of their 14-day isolation period as follows:

Isolation location	Criteria	Approximate numbers currently in 14-day isolation
Quarantine	Those who are “high risk” of COVID-19 (i.e. have been diagnosed with COVID-19; have COVID-19 symptoms; have been tested for COVID-19; or have been in close contact with someone with suspected, probable or confirmed COVID-19 in the last 14 days.)	155
Managed-isolation	Those who do not have suitable plans for self-isolation at home; or do not have a suitable transport plan to their self-isolation location. Those who are non-compliant with guidance from officials.	1000
Self-isolate at home	Those who are not “high risk” and have suitable self-isolation and transport plans.	4000

10. Approximately 35 percent of new arrivals are placed in quarantine or managed-isolation facilities. Some of these people have been permitted to return home to complete their 14-days of isolation, should they be considered “low risk” and have suitable self-isolation and transport plans.
11. For the initial response, 12 hotels and 1,400 campervans have been made available across New Zealand as quarantine or self-isolation facilities. The camper vans are not currently being used. Each hotel has an appointed “site manager” and health and other staff on site providing care and support to people in quarantine and managed isolation. Approved hotels are required to have ready access to hospitals and healthcare workers including mental health supports, the ability to provide welfare support to minimise community contact, enough facilities, a supporting workforce that needs employment (e.g. security guards and service providers), and adequate provision of personal protective equipment for support workers.
12. Although it had been proposed that Police do a compliance check of people completing self-isolation at home within 72 hours of arrival this has proved difficult to operationalise. A move to a managed isolation approach and request to follow up with all people who have returned to NZ and are in self-isolation, would make the 72-hour proposal no longer relevant. It would also enable more targeted, prioritised compliance monitoring in the community.

Recommended new approach

13. While New Zealand's focus is on eliminating or stamping out COVID-19, a key requirement is effective border controls to minimise the possibility of new cases being imported and spread. The Director-General of Health intends to make an order requiring all new arrivals to complete their 14-day isolation period at either quarantine or managed-isolation facilities. This means no one arriving from overseas will be permitted to self-isolate at home, regardless of their health status upon arrival. The Director-General of Health will consider an exemption process for this, such as for those requiring essential travel for medical treatment or for foreign diplomats and their families.

Isolation location		Criteria
Quarantine facilities	No change	Those who are "high risk" of COVID-19
Managed-isolation facilities	Expand	All other arrivals Those with high risk of non-compliance may be placed in facilities with higher security Unaccompanied minors should have a caregiver who travels to the managed-isolation (or quarantine) facility to care for them. (This would be agreed before the unaccompanied minor boards the return flights.)
Self-isolate at home	Reduce	Exemptions on a case-by-case basis: Essential travel for medical care People with significant special needs that cannot be managed in an isolation facility, but could be at home

14. This approach will require a larger number of quarantine and managed isolation facilities. Criteria for additional locations included will be the same as the current criteria outlined in paragraph 11 to keep people from mixing with the local population above. This will also provide efficiencies, in moving from a model with smaller numbers scattered across facilities, to a more centralised approach.
15. Officials are confident that enough facilities to manage an inflow of approximately 190 arrivals per day could be accommodated by 9 April 2020 in the Auckland region, by utilising existing unused capacity in the short term and then bringing new capacity online by 14 April. This new approach can be extended in a staged manner, potentially to centres outside of Auckland² if required, over the coming months should sufficient demand exist.
16. Officials are developing advice on a longer-term border strategy which will include consideration of more sophisticated developments for enabling people flows in the future as New Zealand re-engages with the international community, including pre-screening before boarding flights to New Zealand, a focus on diplomatic engagement with key partner countries to re-establish people to people links and facilitate economic recovery, and the use of technology to support health screening requirements.

² Christchurch airport is better equipped to accommodate long distance flights, but Wellington's hotel capacity could also be drawn on if there is an influx of travellers arriving from Australia.

Conditions for departing quarantine and managed isolation facilities

17. In order to depart a quarantine or managed-isolation facility, people would need to meet the clinical conditions outlined below to ensure they are a low risk for communicating COVID-19. These conditions align with the clinical guidance for health professionals on the Ministry's website which advises that patients should have had a 48-hour period without symptoms before release.

Facility	Conditions for Departure
Managed Isolation	<ol style="list-style-type: none"> 1. Following 14-day isolation, people are permitted to depart if the following criteria are met: <ol style="list-style-type: none"> a) A health check has been undertaken by health staff confirming that person: b) Has a temperature below 38°C c) Has not tested positive with COVID-19 or considered a probable case d) Person does not have symptoms consistent with COVID-19: cough, sore throat, shortness of breath, coryza or anosmia³ e) There is a satisfactory plan for transport to their place they will reside during alert level 4. 2. Plans for self-isolation and transport are to be approved by the Health Lead at each facility.
Quarantine	<p>The health professional responsible for daily monitoring may, at their discretion, allow people to depart if they meet the following conditions:</p> <ol style="list-style-type: none"> 1. Have received a negative COVID-19 test 2. Are not awaiting a new test 3. Are not considered a probable case 4. Have been symptom free for 48 hours 5. Have a satisfactory plan to complete the remainder of their 14 days' isolation 6. Have a satisfactory plan for transport to their place of self-isolation <p>For people who are confirmed or probable cases of COVID-19, they could be permitted by the Health Lead to depart if the following conditions are met:</p> <ol style="list-style-type: none"> 1. at least 10 days have passed since the onset of symptoms; 2. there has been resolution of all symptoms of the acute illness for the previous 48 hours;⁴ 3. Have a satisfactory plan to complete the remainder of their 14 days' isolation; and 4. Have a satisfactory plan for transport to their place of self-isolation.

³ Refer to the latest case definition at <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals#casedefinition>

⁴ Some people may have pre-existing illnesses with chronic respiratory signs or symptoms, such as chronic cough. For these people, the treating medical practitioner should make an assessment as to whether the signs and symptoms of COVID-19 have resolved.

Predicting future people flows as repatriation flights are considered

18. Currently many international passenger airlines have suspended flights to New Zealand. Those still operating, have seen reducing loads of passengers, with inflow averaging 190 passengers per day over the first week of April. Most regular commercial flights will decrease further and stop or move to carrying air cargo as part of the Government's cargo support plan. Qatar Airlines remains flying over April but has much larger numbers outbound than inbound. Some commercial airlines may also seek to operate a few flights to repatriate citizens. For example, Malaysia Airlines is looking to run 5-6 flights in April to move people home and there are several Qantas flights over the next four weeks that will bring people home and return foreign nationals to Australia.
19. According to Statistics New Zealand, there may still be around 22,000 and 25,000 New Zealand Citizens currently temporarily overseas (having departed in the past 12 months and are anticipated to have fewer ties to overseas jurisdictions) who may seek to return. Many of those that can return are likely to have returned, and others will be seeking to return via both regular commercial services and repatriation flights (including commercial options). However, given that the largest numbers of New Zealand nationals are likely to come through repatriation flights over the next few weeks, officials will need to work collaboratively on the timing of repatriation flights to avoid pressures on the capacity for managed isolation /quarantine.
20. Once the hump of repatriation flights are complete world-wide, international passengers numbers are likely to remain low for some months as countries, like New Zealand, will continue to keep in place restrictions to manage the virus. This should start to release pressure on provision of accommodating or quarantining New Zealanders coming home.

Implementation

21. In considering what is achievable, the following key planning assumptions have been factored into this approach:
 - a. the plan to require returning New Zealanders to undergo 14 days of managed isolation is decoupled from the COVID-19 Alert Levels within New Zealand. This is because even at a lower domestic alert levels, the risk of importing cases of COVID-19 may not change.
 - b. The financial requirement is time limited for six months until 10 October 2020 at which point there is expected to be greater clarity around the longer-term border arrangements that are required and whether there is support for cost recovery, including any legislative changes required to enable it.
 - c. Passenger flows for the first week of April which averaged 190 per day are likely to continue for the next six months and repatriation flights can be coordinated in a way that gives ample warning of a surge on any given day
22. A network of up to of up 18 hotels will likely be required to implement the recommended approach:

- a. 16 on a rotational basis which will allow for routine deep cleaning and redundancy for contingencies such as a hotel evacuation, fire for example. Once implemented, all arrivals on a given day will be housed in a single facility to help manage cross contamination.
 - b. One or two for quarantine (there is currently a standalone quarantine facility at the Jet Park in Auckland).
23. With an estimated 190 people arriving per day at a single border point (Auckland) the current system needs to be enhanced to support 2660 people in managed isolation or quarantine at any one time. Should there be a surge in capacity on any given day, this could be accommodated by either using the reserve accommodation such as campervans that are available, contracting additional rooms, or, as a last resort, reconfiguring the number of family occupants sharing a given room.
24. People currently self-isolating after arriving in the country would not be affected by the change to the new approach as their self-isolation period will expire before the Alert Level 4 lock-down ends.

Role co-ordination

25. Roles and responsibilities for border agencies at the border will not change substantially from the status quo with these proposed changes. The main change will be that passengers will be triaged by Public Health Officials once they depart the plan and sorted into two groups based on their health information for either the quarantine facility or the managed isolation facility.
26. Once passengers have been sorted into two groups, they will proceed through the normal border process (immigration, customs and biosecurity) within their groups. They will be met at the end of this process by a site manager (an official from either Aviation Security, Police, New Zealand Defence Force or Health) who will transport the group to their respective isolation location.
27. Each isolation location will be staffed by a group of site managers that may consist of the following officials at any one time:
- a. New Zealand Defence Force Personnel (management responsibilities)
 - b. Public Health Official (3 covering multiple facilities)
 - c. Administrator (MoH contractor)
 - d. CDEM welfare support (across all facilities)
 - e. New Zealand Police
 - f. Registered nurse (on site)
 - g. Doctor (on-call)

Financial Implications

28. The costs of moving to a managed-isolation approach have been calculated based on:

- a. the average per day arrivals for the first week of April of 190⁵ per day continuing over the course of a six-month planning period, and

- b. s9(2)(j)



29. This model anticipates a cost of up to s9(2)(j) in the 183 days until 10 October 2020. However, total expenditure will ultimately be influenced by how many people arrive and may need to be revisited if numbers are significantly higher than forecast. Costs could also be lower than expected if the global situation improves and the Director-General of Health elects to revise the Health Act Notice.

30. We propose to establish a tagged contingency of s9(2)(j) which will allow the costs of the strengthened managed-isolation approach to be met over the next six months with the approval of the COVID-19 Ministerial Group.

Legislative Implications

31. Current isolation requirements are authorized by a Section 70(1)(f) notice issued on 31 March 2020. The Director General of Health intends to issue a new Notice to require all new arrivals to complete their 14-days isolation in quarantine or managed isolation facilities from 11:59pm on Thursday 9 April 2020.

Impact Analysis

32. Given that the proposals in this paper do not change legislation or regulations, and noting the urgency required for the Government's response to COVID-19, a Regulatory Impact Statement has not been prepared. The impacts will primarily fall to the approximately 190 New Zealanders arriving into the country each day and to the Government who is proposed to meet the costs of managed isolation. The benefits of

⁵ The financial model has not used the estimated 22,000 to 25,000 New Zealand Citizens temporarily overseas as a basis for how many New Zealanders might seek to return. This is because in addition to the 22,000 to 25,000 New Zealand Citizens temporarily overseas, a significant number of New Zealanders are resident in Australia and further New Zealanders still have left the country in the time since Statistics New Zealand compiled the 22,000 – 25,000 estimate. Accordingly, planning around anticipated daily arrivals is considered more accurate than planning around the total population that could be abroad.

responding to COVID-19 faster by reducing the primary vector of transmission within New Zealand are expected to outweigh the costs.

Climate Implications of Policy Assessment

33. A Climate Implications of Policy Assessment (CIPA) has not been prepared.

Population Implications

34. The proposals in this paper will primarily impact on New Zealanders' living aboard who wish to return home, and their families. There will be no discrepancy with how the policy is applied to populations within the general cohort of arriving New Zealanders.

Human Rights

35. s9(2)(h) [REDACTED]
- [REDACTED] The medical officer of health, or Director-General exercising the functions of a medical officer of health, will issue a new notice if satisfied that there is sufficient public health rationale and it is compliant with the New Zealand Bill of Rights Act.

Consultation

36. The following agencies have been consulted on the proposals in this Cabinet paper; The Ministries of Health, Foreign Affairs and Trade, Transport, Business Innovation and Employment, Housing and Urgent Development, the New Zealand Treasury, New Zealand Police, The New Zealand Customs Service, the National Crisis Management Centre, the New Zealand Defence Force and the Department of Prime Minister and Cabinet.

Communications

37. The communications approach to the proposals in this paper will be managed by the Prime Minister's Office.
38. Noting that resident New Zealanders are making sacrifices under the Alert Level 4 Response to help eliminate the spread of COVID-19, additional restrictions on those returning to New Zealand are unlikely to be perceived as overly onerous if they are proportionate to the risk. They will only be applicable to the minority of New Zealanders who are returning home and are likely to be justified as a fair "price" of doing so. If COVID-19 is eliminated from New Zealand, incoming travellers would be the highest source of risk for re-introducing the virus – stepping up restrictions to mitigate this risk would not be disproportionate.

Proactive Release

39. The proactive release of this paper will be managed in accordance with the wider suite of Cabinet papers on the Government's COVID-19 response that are due to be released

Recommendations

The Minister of Customs and the Minister of Health recommend that the Group:

- 1 **Note** that all people arriving in New Zealand are required to complete a 14-day isolation period when they arrive, with the exception of air and marine crew.
- 2 **Note** that our current border system screens passengers arriving to New Zealand and determines whether they spend their 14-day isolation period at home (65% of arrivals), or in quarantine or managed-isolation facilities (35% of arrivals).
- 3 **Note** that minimising the risk of imported cases from returning New Zealand citizens and permanent residents remains important, especially with the continued spread of COVID-19 overseas.
- 4 **Note** the Director-General of Health intends to issue a Notice under Section 70 of the Health Act 1956 requiring that all people entering New Zealand from 11:59pm on 9 April 2020 be required to spend their 14-day isolation period in either quarantine or a managed-isolation facility, removing the possibility of completing self-isolation at home.
- 5 **Note** that arrivals assessed as “high risk” of COVID-19 would be placed in quarantine facilities; while all other arrivals being placed in managed-isolation facilities.
- 6 **Note** the Director-General of Health will establish a process for considering any exemptions required, such as for those requiring essential travel for medical treatment or for foreign diplomats and their families.
- 7 **Note** these stricter measures to minimise the risk of imported cases would remain in place until the Director-General of Health is satisfied that the risk of imported cases from overseas has reduced significantly.
- 8 **Note** that operationalising the Director-General of Health’s Notice would require a larger number of quarantine and managed isolation facilities, including in centres outside of Auckland.
- 9 **Note** that the average daily arrivals for the first week of April was 190 people per day and that capacity to manage this can be stood up by 9 April.
- 10 **Agree** to establish the following tagged contingency to provide for the COVID-19 border measures proposed:

IN CONFIDENCE

	\$m – increase/(decrease)				
	2019/20	2020/21	2021/22	2022/23	2023/24 & Outyears
COVID-19 border response – Tagged Contingency	s9(2)(j)	-	-	-	-

- 11 s9(2)(j)
- 12 **Authorise** the COVID-19 Ministerial Group to draw down the tagged contingency funding in recommendation 10 above (establishing any new appropriations as necessary).
- 13 **Agree** that the tagged contingency funding in recommendation 10 above can be drawn down as operating or capital expenditure and can be drawn down into any Vote as required.
- 14 **Agree** that the tagged contingency in recommendation 10 above will expire on 10 October 2020, and at 30 June 2020 the undrawn balance of it will be transferred into the 2020/21 financial year, with no impact on the operating balance and net core Crown debt across the forecast period.
- 15 **Agree** that the tagged contingency in recommendation 10 above will be established as a charge against the COVID-19 Response and Recovery Fund established in the Budget 2020 Cabinet paper, with a corresponding impact on the operating balance and net core Crown debt.
- 16 **Note** that as total cost of providing managed isolation or quarantine facilities for all arrivals to New Zealand will ultimately be impacted by how many people chose to return to New Zealand and the time taken for the global outlook for COVID-19 to improve, it may be necessary to seek further funding in due course.
- 17 **Note** that the New Zealand citizens and permanent residents currently overseas who may seek to return are likely to do so via repatriation flights, as well as by regular commercial services, managing the capacity and timing of repatriation flights will be essential to ensure they do not overwhelm our capacity to provide quarantine and managed-isolation facilities.
- 18 **Note** that officials are developing advice on a longer-term border strategy which will include cost-sharing and recovery approaches and consideration of more sophisticated developments for enabling arrivals in the future to support New Zealand's recovery, including pre-screening, focussed diplomatic engagement with key partner countries and the use of emerging technology.

Authorised for lodgement

Hon Jenny Salesa

Minister of Customs

Date

Hon Dr David Clark

Minister of Health

Date

Proactively Released



Meeting of the COVID-19 Ministerial Group

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.

Managed Arrivals into New Zealand

The group of Ministers with Power to Act on COVID-19 matters [CAB-20-MIN-0130] convened on 9 April 2020 at 10.30am, and in accordance with their Power to Act:

- 1 **noted** that all people arriving in New Zealand are required to complete a 14-day isolation period when they arrive, with the exception of air and marine crew;
- 2 **noted** that the current border system screens passengers arriving into New Zealand and determines whether they spend their 14-day isolation period at home (65 percent of arrivals), or in quarantine or managed-isolation facilities (35 percent of arrivals);
- 3 **noted** that minimising the risk of imported cases from returning New Zealand citizens and permanent residents remains important, especially with the continued spread of COVID-19 overseas;
- 4 **noted** that the Director-General of Health intends to issue a Notice under section 70 of the Health Act 1956 requiring that all people entering New Zealand on flights that have departed from 11:59pm on 9 April 2020 be required to spend their 14-day isolation period in either quarantine or a managed-isolation facility, removing the possibility of completing self-isolation at home;
- 5 **noted** that arrivals assessed as 'high risk' of COVID-19 would be placed in quarantine facilities, with all other arrivals being placed in managed-isolation facilities;
- 6 **noted** that the Director-General of Health will establish a process for considering any exemptions required, such as for those requiring essential travel for medical treatment or for foreign diplomats and their families;
- 7 **noted** that these stricter measures to minimise the risk of imported cases would remain in place until the Director-General of Health is satisfied that the risk of imported cases from overseas has reduced significantly;
- 8 **noted** that operationalising the Director-General of Health's Notice would require a larger number of quarantine and managed isolation facilities, including in centres outside of Auckland;
- 9 **noted** that the average daily arrivals for the first week of April 2020 was 190 people per day, and that capacity to manage this can be stood up by 9 April 2020;

Financial implications

- 10 **authorised** the Minister of Finance, Minister of Health, Minister of Police and Minister of Customs jointly to:
 - 10.1 finalise the details of a tagged contingency sufficient to deliver the COVID-19 border measures programme, based on an appropriate room rate and food per diem, and the cost of the services provided by relevant agencies;
 - 10.2 report back to COVID-19 Ministers on this contingency;
- 11 **authorised** the COVID-19 Ministerial Group to draw down the tagged contingency funding established in paragraph 10 above (establishing any new appropriations as necessary);
- 12 **agreed** that the tagged contingency funding referred to in paragraph 10 above can be drawn down as operating or capital expenditure, and can be drawn down into any Vote as required;
- 13 **agreed** that the tagged contingency referred to in paragraph 10 above will expire on 10 October 2020, and that at 30 June 2020 the undrawn balance of it will be transferred into the 2020/21 financial year, with no impact on the operating balance and net core Crown debt across the forecast period;
- 14 **agreed** that the tagged contingency referred to in paragraph 10 above will be established as a charge against the COVID-19 Response and Recovery Fund established in Budget 2020, with a corresponding impact on the operating balance and net core Crown debt;
- 15 **noted** that as total cost of providing managed isolation or quarantine facilities for all arrivals to New Zealand will ultimately be impacted by how many people chose to return to New Zealand and the time taken for the global outlook for COVID-19 to improve, it may be necessary to seek further funding in due course;

General

- 16 **noted** that:
 - 16.1 the New Zealand citizens and permanent residents currently overseas who may seek to return are likely to do so via repatriation flights, as well as by regular commercial services;
 - 16.2 managing the capacity and timing of repatriation flights will be essential to ensure they do not overwhelm the capacity to provide quarantine and managed-isolation facilities;
- 17 **noted** that officials are developing advice on a longer-term border strategy which will include cost-sharing and recovery approaches and consideration of more sophisticated developments for enabling arrivals in the future to support New Zealand's recovery, including pre-screening, focussed diplomatic engagement with key partner countries, and the use of emerging technology.

Rachel Hayward
for Secretary of the Cabinet

Distribution: (see over)

SENSITIVE

Distribution:

The Cabinet

Hon James Shaw

Copied to officials via email

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