

Health Report

COVID-19: Border measures travel exemption for International Students

Date due to MO:	27 February 2020	Action required by:	N/A
Security level:	IN CONFIDENCE	Health Report number:	20200326
To:	Ministers with Power to Act – COVID-19 Hon Tracey Martin, Acting Minister of Education		
Copy to:	Hon Chris Hipkins, Minister of Education Hon Jenny Salesa, Minister of Customs		

Ministers with Power to Act	A group of Ministers with Power to Act on New Zealand's response to the novel coronavirus outbreak comprising the Prime Minister, and the Ministers of Foreign Affairs, Tourism, Finance, Education, Health, Immigration, Trade and Export Growth.
-----------------------------	--

Contact for telephone discussion

Name	Position	Telephone
Dr Ashley Bloomfield	Director-General, Ministry of Health	+64 21 926 302
Iona Holsted	Secretary for Education	+64 29 660 0096
Carolyn Tremain	Chief Executive, Ministry of Business, Innovation and Employment	+64 21 681 715

Action for Private Secretaries

Return the signed report to the Ministries of Health, Education, Business Innovation and Employment, and Foreign Affairs and Trade.

Date dispatched to MO:

COVID-19: Border measures travel exemption for International Students

Purpose of report

You have requested advice from officials about whether you could or should implement an exemption from the travel restrictions for tertiary students from China, assurance that we can operationally manage the potential risks, including risks to the health of people in New Zealand and the Pacific, and if so, what the implications are.

Key points

- New Zealand is currently in the 'Keep it Out' phase of national pandemic response procedures. The likelihood of one or more imported cases of COVID-19 infection in New Zealand remains HIGH. Effective border management currently remains the best way to protect New Zealanders from the health effects of a potential outbreak and officials continue to recommend taking a precautionary approach, as epidemiology of the outbreak and scientific knowledge continue to evolve.
- Students from China represent a significant and valuable part of our education system. Just over 40% of students from China (9,800) expected to undertake studies this year are outside the country. s 9(2)(g)(i) [REDACTED]. Small numbers are continuing to arrive in NZ by travelling through third countries, but most won't commence their studies unless there is a change in border measures. Experience tells us that this will have significant and long lasting consequences for learners and institutions.
- The spread of COVID-19 in China has diminished significantly in response to stringent public health measures over the last few weeks, but the number of cases in other countries has increased. Public health officials are preparing for a possible pandemic with scenarios ranging from limited to widespread outbreak in NZ. The consequences of an outbreak in NZ are potentially wide ranging and could have an impact right across the country that far exceed the impact of an outbreak in China alone.
- In response to advice on exemptions on the current travel restrictions for international students from China, officials have considered two questions: 1) could an exemption be implemented with minimal risk to the NZ public?; and 2) should such an exemption be implemented?
- Our advice is you could implement an exemption with minimal risk to the New Zealand public based on an assurance based approach for up to 2,000 PHD and post-graduate students. Students from mainland China outside Wuhan represent a low public health risk, and could be effectively accommodated in self-isolation once they have arrived.
- But we are also advising that, on balance, you should not implement such an exemption because any exemption could require scarce public health resources and represent too great an opportunity cost. Any model would divert resources away from planning and responding

to an outbreak of COVID-19 in NZ (and other public health issues). Moreover, not containing any initial cases and a resulting widespread outbreak would have long lasting and significant economic impacts for New Zealand. Secondary considerations of economic impact, international relationships and public confidence also support this conclusion.


- There is increasing global uncertainty and increasing potential for a global pandemic to be declared and it is possible that advice could be put to Ministers recommending that our existing border restrictions be extended

Proactively Released

Recommendations

Officials recommend that you:

- | | |
|--|--------|
| a) Note that the situation globally is changing rapidly and the risk of a confirmed case in New Zealand is high and it is possible that a pandemic may be declared | Yes/No |
| b) Note that New Zealand could ease the existing border restrictions and allow up to 2,000 PhD and Postgraduate students from China to enter NZ and attend university | Yes/No |
| c) Note that the only workable model for monitoring a cohort of this size would be an assurance, rather than audit, approach | Yes/No |
| d) Note that an assurance approach would still require scarce expert public health resource predominantly in the planning and development phase | Yes/No |
| e) Note that an audit approach would require significant public health resource in the planning, development and delivery phases | Yes/No |
| f) Note that any requirement of audit or assurance by public health professionals would divert scarce health resources away from: <ul style="list-style-type: none"> • Response preparation (currently at the border and wider health sector) • Response to an identified case or outbreak, and • delivering core public health services | Yes/No |
| g) Note that we therefore do not recommend an exemption, given this opportunity cost | Yes/No |
| h) Note the economic impact and public confidence considerations support this conclusion and international relationship considerations have been taken into account and are manageable | Yes/No |
| i) Agree not to implement an exemption to the travel restrictions for international students from China | Yes/No |


Dr Ashley Bloomfield
Director-General
Ministry of Health

Rt Hon Jacinda Ardern
Prime Minister

Rt Hon Winston Peters
Minister of Foreign Affairs

Hon Kelvin Davis
Minister of Tourism

Hon Grant Robertson
Minister of Finance

Hon Tracey Martin
Acting Minister of Education

Hon David Clark
Minister of Health

Hon David Parker
Minister for Trade and Export Growth

Hon Iain Lees-Galloway
Minister of Immigration

Purpose

- 1 This report sets out options for exemptions from travel restrictions for tertiary students and the resources, trade-offs, and assurances required to operationally manage the potential risks, including risks to the health of people in New Zealand and the Pacific.

National Pandemic Response Procedures

- 2 New Zealand is currently in the 'Keep it Out' phase of national pandemic response procedures. There have been no confirmed cases in New Zealand to date, however our risk assessment is that the likelihood of one or more imported cases of COVID-19 infection in New Zealand remains HIGH.
- 3 Effective border management currently remains the best way to protect New Zealanders from the health effects of a potential outbreak and officials continue to recommend taking a precautionary approach, as epidemiology of the outbreak and scientific knowledge continue to evolve.
- 4 The readiness of the public health system to manage the overall threat to public health is increasing. As at 26 February 2020, some public health factors indicate no worsening of the current situation. For example, emerging evidence about the severity of the illness has remained constant and World Health Organization (WHO) advice on travel restrictions has remained the same. There has been a steady increase in the number of deaths, but the number of laboratory confirmed cases has started to slow in mainland China and the number of recovered cases has increased.
- 5 However, other factors signal uncertainty and continual change. The epidemiology of the outbreak is still developing. China has ceased routine testing of milder cases and a significant proportion of people who tested positive on the cruise ship in Japan had no symptoms.
- 6 The increasing cases of community transmission in the Republic of Korea, Italy and Iran are significant changes to the epidemiology. There is also still some uncertainty about the transmissibility of COVID-19. As more case data is being released from mainland China, more accurate assessments on the transmissibility will be made.

Part A – Could we manage a student exemption?

- 7 Approximately 24,500 Chinese nationals held international student visas at the time the travel restrictions were introduced, with 14,500 of these already in New Zealand¹. We estimate that 8,000 tertiary students were intending to travel to New Zealand for study at public institutions, with 6,300 intending to study at universities. The numbers who would be able to travel under a limited border reopening are lower, because this excludes students from Hubei, or whose visa cannot be processed.

¹ The figures in this paper understate the impact of the restrictions as they do not include people intending to study short courses, who can do so holding only a visitor visa.

- 8 In all the scenarios presented in this paper, a mix of reduced willingness to travel, and airline capacity constraints, mean that:
 - 8.1 the actual numbers of students arriving under any exemption would be significantly lower
 - 8.2 those arriving would do so over an extended period of some weeks, and not all immediately following the exemption being introduced.

Universities New Zealand proposal

- 9 China is a critical market for the tertiary sector. The most recent experience of a significant downturn in the international market from China was that it took 8 years to re-establish the international education numbers at the previous levels.
- 10 Universities submitted an initial proposal for how an exemption could work several weeks ago. Since then officials have been working closely with Vice Chancellors through an iterative process to ensure universities could meet the demands of a system that also meets government's assurance needs.
- 11 The Vice Chancellors have demonstrated willingness to meet any requirements that the government considers are necessary from a public health perspective. For example, the universities plan to accommodate exempted students in seven separate facilities (isolated from domestic students). All universities also have onsite health staff (including more than fifty GPs), extensive pandemic management plans, and are also planning campus wide hygiene campaigns.

If exemptions were agreed, we propose an assurance, rather than audit system

- 12 Officials have developed an assurance system that is intended to allow a cohort of Chinese students to travel to New Zealand, enter self-isolation and then enrol for study, on a managed basis. Further details of the assurance system are set out in the appendices.
- 13 The level of support provided to them, and the standard of self-isolation proposed, would be significantly higher than the voluntary self-isolation for the 8,000 other people who have arrived in New Zealand from mainland China since the imposition of travel restrictions. The system would involve three key stages:
 - 13.1 Pre-approval. Tertiary providers would attest to standards of managed self-isolation set by the Ministry of Health; facilities would be assessed and approved by government officials; and details of students in China and intending to travel would be supplied to Immigration Officials.
 - 13.2 Departure and travel to self-isolation. Students would be pre-approved by Immigration, have a pre-departure and on-arrival temperature check, and be escorted directly from the arrival gate to self-isolation in transport arrangements that comply with Ministry of Health Standards.
 - 13.3 Self-isolation and clearance to study. Students would be in a high standard of managed self-isolation, with daily checks and close supervision by

universities. Officials have a high level of confidence in their experience of managing student accommodation, including previous infectious disease outbreaks. After 14 days they would be cleared to study as normal, and move into standard accommodation.

- 14 The universities have a substantive health workforce on their campuses. The table below summarises information provided by the universities.

Universities	Description of health workforce
Auckland	7 GPs, 5 nurses and 6 counsellors available each day, spread across city and Grafton campuses.
AUT	Medical services at city and north campus locations. There is a community health centre on south campus and nursing facilities.
Waikato	3.1 FTE GPs, a nurse practitioner, 2.9 FTE nurses, a nurse practitioner, counselling service, and 2 mental health nurses in Hamilton and 1 nurse at Tauranga campus.
Massey	A medical practice on each of its three campuses.
Victoria	9 FTE GPs and 11.3 FTE nurses.
Lincoln	2.5 FTE GPs, 2.5 FTE nurses, and 1.4 counsellors.
Canterbury	30 staff in total with 11 doctors, 8 nurses and counselling staff.
Otago	10 FTE GPs, 8 FTE nurses and 16 FTE in the mental health and wellbeing team.

- 15 The alternative is an audit system, where government agencies more closely oversee and manage accommodation, transport and contact with students. The Australian model is an audit system, but this is being implemented for a very limited group of high school students. Given the possibly large numbers of students involved in any NZ exemption, and the resources this system would take, establishing and running an audit system would in practice be very slow, and would be unlikely to be possible for more than a small number of students.
- 16 The direct opportunity cost for undertaking auditing functions using expert public health resources would detract from the overall response and preparedness measures for an eventual New Zealand outbreak of COVID-19. Our advice is that this would not deliver benefits that are worth the cost of setting up the system, particularly the diversion of health resources.

Cohort Options for consideration

- 17 Officials have identified five high-level options for cohorts, if Ministers wanted to progress with an option.

Options	Description	Maximum numbers ²	Comment
All tertiary students at public institutions	All universities, polytechnics and wānanga students eligible.	5,400	Significant border re-opening gives confidence internationally and to the education system, likely to result in faster recovery.
	Range of accommodation types including rental, homestays and hostels.		Higher risk profile due to range of accommodation types and overall numbers. Operational challenges managing higher numbers of institutions and students.
University students only	All students self-isolated in 7 dedicated hostel-type facilities.	4,600	As above, but reduced operational challenges as only 8 institutions involved. Privileging university sector risks further lobbying, and may threaten viability of international education of the NZ Institute of Skills and Technology.
Returning students at universities	All students self-isolated in 7 dedicated hostel-type facilities.	3,400	Focuses on those students already with NZ connections. More manageable number reduces operational challenges and risk.
PHD and post-graduate students at universities (Preferred)	All students self-isolated in 7 dedicated hostel-type facilities.	2,000 ^[2]	Preferred option to balance public confidence with sufficient border reopening to support sector to recover. Could be expanded to all degree students if successful.

² These numbers are initial midpoint estimates based on 2019 data and have not been quality assured. They are not driven by known enrolment intentions of affected students. They represent our estimate of the maximum possible students eligible under each option. We expect significantly fewer would actually travel.

^[2] The estimated breakdown is 1,230 in Auckland, 210 in Waikato, 200 in Canterbury, 180 in Wellington, 120 in Massey, and 60 in Otago, based on the regional breakdown of the overall group. The actual distribution will depend on individual student decisions.

Options	Description	Maximum numbers ²	Comment
Health science students only	All students self-isolated in dedicated hostel-type facilities.	5,400	Too small to be of value relative to cost, and to be a valid pilot for a larger exemption. No clear rationale for picking winners in particular disciplines. Would privilege Otago and Auckland universities over others.

- 18 While officials consider an assurance model could be implemented by the universities for most of the options, we consider that the returning students or PHD and post-graduate cohort are both good options because the universities can provide isolated accommodation options for a group of this size and there may be greater public understanding about accommodating these groups of students. There may be a marginally stronger case for PHD and post-graduate students to be more mature about self-isolation arrangements.

Quota option

- 19 Advice was sought on an additional quota option. This option would enable 600 students from China to enter New Zealand. The allocation of quota would be negotiated by Education agencies with Universities New Zealand and individual universities, and would be based on the relative negative impact of the travel restrictions.
- 20 The analysis is similar to the last option that the cost and effort required to implement this is likely to outweigh the benefits – this would be more of an issue for some universities with lower numbers of students from China. Decision making on individual students may seem arbitrary, and lead to greater dissatisfaction.

High level timeframes

- 21 The table below shows the total time from Ministers approving a targeted exemption, to the dates at which students could be confirmed for travel, and then enter normal study. The ranges show the time it would take to process a full cohort, assuming all are willing and able to travel immediately. In practice, capacity constraints mean we expect far few numbers, therefore processing times should be at the low end of the ranges.

Table 3: Timeframes

	All TEI students	Preferred option
Process setup	3	3
Provider approval	3-7	3
Student approval	2-5	1
Days to confirmation student can travel	8-12	7
Booking, processing and travel	4	4
Self-isolation	14	14
Days to commencing normal study	36-40	35

- 22 Officials consider that an assurance system that manages the risk for New Zealanders could be put in place by the universities for all PHD and post-graduate students. The next question is should it be put in place.

PART B: Should exemptions be considered now?

- 23 As soon as the border restrictions can be lifted, they should be, in part or in full. Ministers have agreed to take a precautionary approach, and the consequences of lifting the restrictions too soon are very high for public health. While secondary considerations to health, the potential impacts on public confidence, our economy, and international relationships must also be taken into account.

The global context is dynamic and uncertain

- 24 Any decision must be set in a rapidly evolving global context and the desirability of an exemption today, in a month or in three months' time. There is continued and increasing uncertainty, particularly given developments in recent days, with the potential for further countries to be declared places of concern and added to the border restrictions. The situation is fluid and a considered decision needs to be taken whether – even if feasible – an exemption should be progressed now.
- 25 Because the tertiary sector terms are time-sensitive, there is a limited window in which to implement an exemption and realise any material benefits. This means a decision cannot simply be deferred until there is greater certainty, either in the assurance model or in the wider global context.

Public health considerations are paramount

- 26 While the scale of the outbreak in the original epicentre in Hubei and China is reducing, additional outbreaks and clusters are being identified in other developed countries. We

have seen that they can accelerate and spread fast, despite public health measures to contain the virus (eg Italy, Republic of Korea).

- 27 These recent outbreaks are concerning, because we are seeing local transmission through asymptomatic people and we have not yet reached global agreement on the epidemiology of the virus. This includes the rates of transmission and the severity. The situation is rapidly changing, and there is the potential for a global pandemic to be declared in the short term, and for further places of concern to be identified.

28 s 9(2)(g)(i)

- 29 The risk that relates to this cohort of students of exposure to the virus is the same as New Zealanders that have come from mainland China (outside Hubei). However, any exemption of a student cohort would divert scarce health resources away from our wider preparation for COVID-19. This could limit our ability to respond effectively to an outbreak in New Zealand, while delivering core public health services. Therefore, we do not recommend an exemption for international students from the travel restrictions.

- 30 In addition to public health, there are secondary considerations, including, economic impacts, international relationships and public confidence.

Economic considerations suggest the potential gains are small in the wider context

31 s 9(2)(g)(i)

- 32 Against this, we need to weigh the risks of a COVID-19 incursion into New Zealand. Should COVID-19 reach New Zealand and result in sustained transmission and a widespread outbreak we expect the economic disruption would be more significant and potentially long-lasting. The downside risk of an onshore pandemic would significantly outweigh any benefits in terms of economic value of education exports, particularly if the exemption is for a limited group of students. The marginally increased (but still relatively low) probability of this significant downside risk needs to be set against the higher likelihood of a much smaller economic benefit.

- 33 Officials now consider we are moving to a scenario where the potential overall economic impact is likely to be longer-lasting, and New Zealand is likely to experience a longer period

of slower growth for the remainder of 2020. At this time, the approach to any interventions should continue to be proportionate. Any intervention should take into account our close international partners and should avoid lock-in or setting precedents for interventions that cannot be extended or scaled up across the economy.

International relationships suggest caution

34 6(a)

35 There is some risk an exemption could open up the possibility of onward transmission of COVID-19 to the Pacific. 6(a)

36 Agreeing an exemption for Chinese students would also set a precedent for other countries currently at risk of becoming places of concern (e.g. Republic of Korea and Japan), who would expect similar treatment for a further cohort of several thousand international students.

37 Australia have so far taken a different approach to implementing their exemption for students, a more conservative audit and verification model.

Public confidence needs to be maintained

38 From a public confidence perspective, relying on an assurance based model, rather than audit or mandatory quarantine (like our partners), may raise relationship issues given the asymmetry of response.

39 Part of an assurance system would rely on the establishment of standards and a checklist for providers. These would be based on the guidance for self-isolation developed by the Ministry of Health. Ensuring these standards are understood and a sufficient level of assurance is provided requires expert public health resource to develop. Providers may also need to contact regional Public Health Unit³ staff for checking and testing their understanding of the standards over and above current support. Most of the experienced public health experts who can undertake this work are deployed to the current response and supporting New Zealand to remain in the "Keep it Out" phase.

³ Regional Public Health Units play an important role in New Zealand's health system, particularly in preparation for responding to a pandemic situation. These units also focus on regional environmental health, communicable disease control, tobacco control and health promotion programmes.

- 40 Regardless of how it is implemented, there is some risk that New Zealand's first case of COVID-19 will be that of a tertiary student admitted under this assurance system. If that were the case, the decision to introduce an exemption will come under considerable scrutiny and there is limited extent to which the reputational risks of this could be managed, at home and overseas.
- 41 The isolation measures that are being put in place (and would apply to this cohort) limit the spread if someone is incubating the virus. They do not stop the person entering New Zealand with the virus (currently border measures are limiting this risk). If a case of COVID-19 is confirmed in the tertiary population that enter New Zealand, there may be unfounded public concern about the effectiveness of the self-isolation arrangements. It is important that the public understand and have confidence in effectiveness of isolation measures and other public health advice to limit spread of the disease.

Legal risk

42 s 9(2)(h)

43

44

s 9(2)(h)

45

Communication

- 46 Communications will be required, for Ministers, the Public and key stakeholders. Officials are working on developing detailed communications to support your decision. MFAT will develop a tailored plan to ensure key international relationships are managed effectively, taking account of the direction of Minister's decisions.
- 47 Key messages for the recommended position in this paper are:
- New Zealand remains in the "Keep It Out Phase"
 - Public health is paramount in both advice and decision-making
 - It is the primary factor in considering travel restrictions and any possible exemptions
 - Universities New Zealand proposed measures to accommodate international students, include self-isolation measures
 - There would not be sufficient public health resources to audit such measures
 - It would not be acceptable to compromise public health resources and planning
 - Public confidence in the COVID-19 response must be maintained
 - Assurance rather than audit is the realistic approach in what remains a rapidly evolving and uncertain situation
 - There remains a pathway for individual students to enter New Zealand
 - The model for a staged process to allow a wider cohort entry could be implemented at any time should circumstances change
- 48 Many students yet to arrive have visas that expire by 31 March 2020. If they do not arrive in New Zealand before their visa expires, they will be required to apply for a new visa offshore. This is more time intensive for the student and INZ than an onshore application, including logistical difficulties given the situation in China and the closure of INZ's Beijing office.
- 49 We recommend an approach could be to facilitate this cohort of students to apply for a short-term visa (eg 3 months) to allow them to travel to New Zealand and apply onshore for their substantive visa – as they otherwise would have done absent the travel restrictions. This is essentially achieving the same outcome as a visa extension (which cannot be done under current legislation). The Minister of Immigration would issue a Special Direction that would waive most application requirements and fee for this cohort. While this is not an

approach we recommend using broadly, but would address the situation of this special cohort.

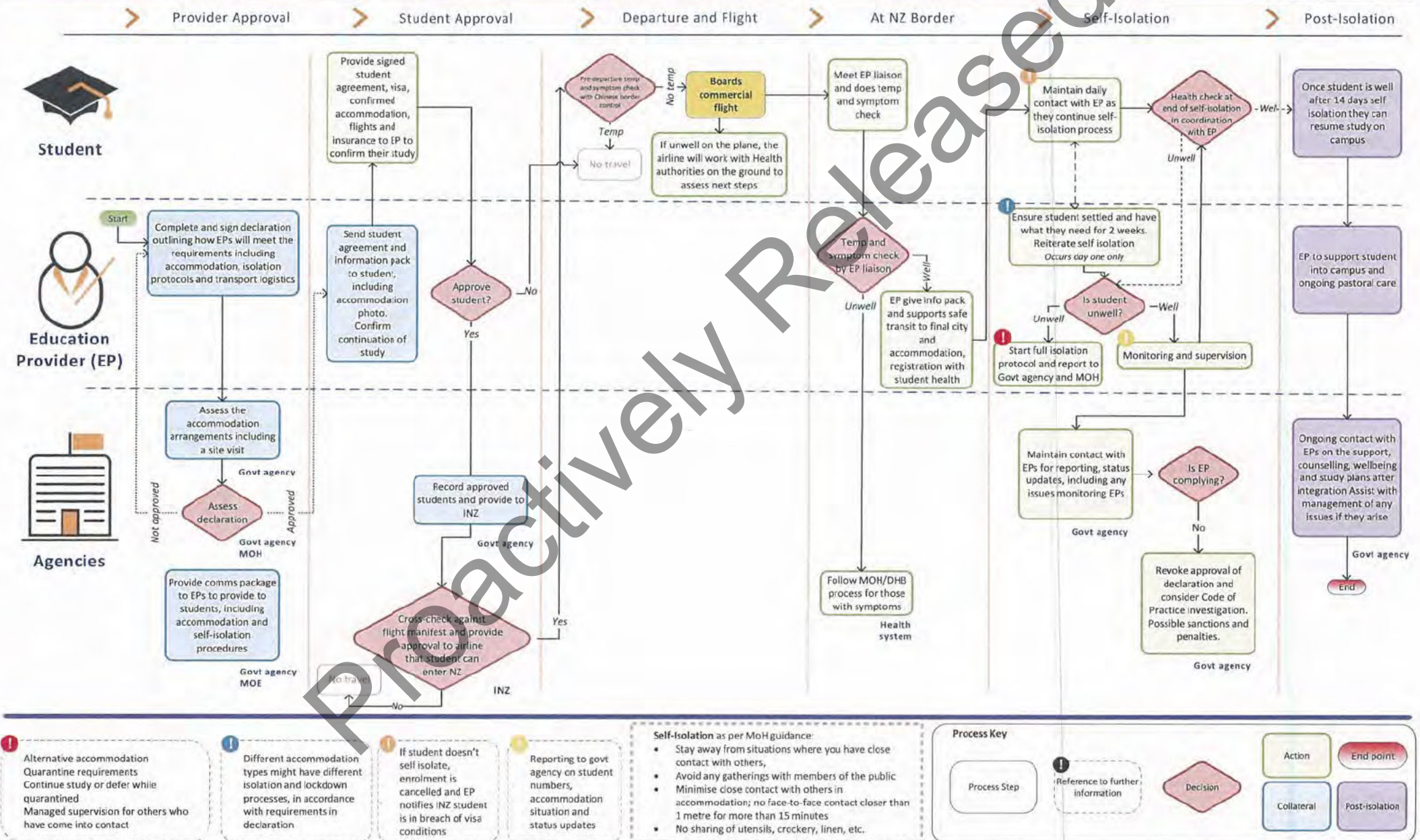
50 Additional messages (for China and around student welfare)

- We commend the rapid containment measures taken by China
- We value the contribution these students make to New Zealand and look forward to welcoming them as soon as we can
- New Zealand will lift restrictions when it is safe to do so
- Where students have been outside of mainland China for 14 days, these restrictions to not apply
- Self-isolation is best practice, but we also need to be able to look after individuals, particularly those from offshore and ensure necessary support
- The welfare of these students is extremely important to us and their families
- We recognise the interruption to their studies and are taking the following steps to mitigate this:
 - For school students, we have made available our online system (Te Kura) enabling all primary and secondary students to continue their education at home and with their families. As soon as restrictions are lifted, they will be able to fully reintegrate
 - For tertiary students, some will be able to resume studies. Where there are fixed term dates, we are working with providers to minimise disruption to studies and a range of other assistance is being considered.
 - We recognise some visas will be expiring during the restriction period – for those students, we will proactively contact them so they can apply for a short term visa which will be expedited to allow them to enter NZ and apply for a substantive visa as is the normal practice
 - Collectively, these measures will support the welfare of these students and allow them to successfully enter, settle and study in NZ as soon as possible

51 Further work is underway to develop communications to support an announcement on an exemption, if you choose to do this.

Travel Exemption for International Students

The below outlines the process to allow a travel exemption for tertiary students from China to return to or commence study in New Zealand



Proactively Released

Appendix 1: Process Map

Proactively Released

Appendix 2: Draft Provider Declaration

Provider application form, to be approved by NZQA and MoH

Provider details (incl key contact, emergency contact) Estimated number of affected students

Pre-departure

- Ensure that students receive information on the following prior to departure:
 - Process for travel exemption
 - Self-isolation processes they will be required to follow on arriving in New Zealand, and consequences if they do not
- Ensure that you have received an updated signed enrolment contract including the following clauses:
 - [breach of self-isolation processes is grounds for termination of enrolment]
 - Permission to share information with agencies for the purpose of exemption to the travel restrictions
- Ensure that students have residential accommodation available for their arrival (either through the provider or privately)
- Ensure that usual Code of Practice requirements around insurance and living costs are met
 - If insurance doesn't cover coronavirus-related medical costs, agree to cover these costs on the student's behalf
 - If the student is unable to meet living expenses (due to altered income circumstances in China), agree to meet basic needs on the student's behalf

Arrival

- Ensure that students are met on arrival and provided with an information pack including the following:
 - Self-isolation processes
 - Emergency contact details and what to do if they feel unwell
- Ensure that students are supported to travel to their designated accommodation and begin self-isolation
- Ensure that students register with Healthline [tbc]

Self-isolation

- Ensure that students are supported through their period of self-isolation, including:
 - Access to supplies for physical wellbeing
 - Pastoral care and mental health support
 - Emergency contact details and what to do if they feel unwell
 - Support for commencing / continuing studies remotely, as appropriate
- Report to Agency X on self-isolation – numbers (new in and out, total), accommodation type, any issues
- If a student becomes unwell, ensure appropriate support (including further isolation if required), and activate COVID-19 plan
- Support students to reintegrate to classes

Form to be signed by Vice-Chancellor and Pro Vice-Chancellor (International) or equivalent

Health Report:

Appendix 3: Immigration Requirements

MBIE has confirmed that the proposed exemption for students can be implemented by Immigration New Zealand (INZ) within urgent timeframes. This relies on:

- NZQA providing a list of named students to INZ, with appropriate details to confirm identity, who they approve as meeting the Health guidelines/criteria. INZ does not have the capacity or capability to perform an audit or assurance role in relation to adequacy of isolation measures for each student relating to COVID-19.
- The named list of approved students to be exempted from the restrictions can be updated on a rolling basis, but names will be required 72 hours prior to any individual boarding a flight to New Zealand.
- If there is a valid visa, students will still need to meet their visa conditions of having health insurance and ability to pay for living costs. Education providers will be asked to act as a sponsor (guarantor) as part of the NZQA managed process of health declarations, where students are not able to meet this visa condition.
- If visas are expired or expiring, there is the ability for a student to apply for a short term student visa to enable them to arrive in New Zealand and apply for their substantive student visa onshore. This would require a Special Direction from the Minister of Immigration, including the waiver of most application information to expedite this process, which he has indicated he would be willing to do.

Appendix 4: Supplementary Guidance for self-isolation in shared accommodation facilities

Purpose:

1. This guidance is designed to ensure that shared accommodation facility providers understand the public health implications, minimum requirements and adequate support for individuals who have been in mainland China (or areas subsequently identified by Ministry of Health as high risk) within the last 14 days to self-isolate.
2. It lays out the minimum requirements to ensure that individuals have adequate health and welfare guidance and assistance and that symptoms or signs of coronavirus infection are monitored and reported as necessary. It also provides guidance on accommodation facility requirements and ethical considerations.
3. It is not a substitute for the "one source of truth" information updated daily on the Ministry of Health Website: <https://www.health.govt.nz/our-work/diseases-and-conditions/novel-coronavirus-covid-19>

Minimum Requirements:

1. Current advice on self-isolation should be followed (<https://www.health.govt.nz/our-work/diseases-and-conditions/novel-coronavirus-covid-19/novel-coronavirus-self-isolation>).
2. Accommodation providers should:
 - a. Provide written information to each individual explaining the procedures that will apply.
 - b. Maintain a complete registry of people in self-isolation with regular check ins.
 - c. Direct and support individuals to follow current public health guidance for infection prevention and control during domestic transport according to Ministry of Health guidelines (see link above).
 - d. Document the proposed housing arrangements for the individuals during the balance of their 14-day period since leaving mainland China – this must be in keeping with Ministry of Health advice about self-isolation. If the standards cannot be met by an accommodation provider, then alternative arrangements should be available.
 - e. Ensure that there are enough health and welfare guidance and assistance staff available to every individual.
 - f. Direct and support individuals to recognise symptoms and report them as appropriate; those who have developed any symptoms should be checked by a health professional (ambulance, primary care or hospital as clinically indicated).
 - g. Put in place communication strategies to ensure individuals are kept informed daily about relevant aspects of their health and welfare.
 - h. Frequently communicate with others living onsite to allay fears and reduce stigma
 - i. Identify a liaison person(s) to lead communication with the Ministry of Health and local health authorities.
3. Please note that individuals who have remained well and symptom free throughout their self-isolation period should have a brief health check (but not testing for COVID-19) upon

completion of their self-isolation. Basic personal protection equipment (PPE) (as per the primary care guidance on the Ministry of Health's website – https://www.health.govt.nz/system/files/documents/pages/ministry-of-health-guidance_on_use_of_ppe_ncov_30jan.docx) is only required if a symptomatic person is being assessed.

s 9(2)(g)(i)

Ethical considerations

There is a high risk of negative perceptions towards people who have been in areas of concern, and a high risk of stigma and discrimination which needs to be prevented or mitigated/managed. The *Getting Through Together* document can provide guidance on how to support individuals at risk of negative perception, stigma or discrimination.

<https://neac.health.govt.nz/system/files/documents/publications/getting-through-together-jul07.pdf>

Careful consideration and care should be given to managing the privacy of individuals in shared accommodation facilities, in case they are identified and harassed by others.

Individuals in self isolation experiencing mental distress can be guided to contact the Need to Talk? 1737 phone line (free call or text) should they wish to talk to a trained counsellor:

<https://1737.org.nz/>

Appendix 5: COVID-19 Recent Developments

- 52 The global situation is continuing to change rapidly with more information and scientific evidence being generated about the epidemiology of the virus.
- 53 There remain no confirmed cases in New Zealand.
- 54 Our risk assessment is that the likelihood of one or more imported cases of COVID-19 infection in New Zealand remains **HIGH**.
- 55 There has been rapid spread in a number of countries over the recent days that is informing our approach and understanding.

Key considerations

- 56 There are three key areas of consideration as part of New Zealand's national pandemic response:
- 56.1 exposure risk
 - 56.2 the number of people entering New Zealand
 - 56.3 transmission risk.

57 s 9(2)(g)(i)

58

59

- 60 New Zealand is currently in the 'Keep it Out' phase of national pandemic response procedures.

Global Developments

- 61 Four new countries (Afghanistan, Bahrain, Iraq and Oman) have reported cases of COVID-19 in the past 24 hours.
- 62 As at 25 February there have been 80,239 confirmed cases globally with 2,700 deaths. This is an increase of 908 confirmed cases and 82 deaths in the past 24 hours.

Italy

- 63 Italy has reported a rapid increase in cases of laboratory-confirmed COVID-19 since 21 February 2020. An initial investigation by Italian authorities has found several clusters of cases in different regions of northern Italy. This is particularly concerning with evidence of local transmission of COVID-19.
- 64 A joint WHO and European Centre for Disease Prevention and Control (ECDC) mission arrived in Italy on 24 February to support Italian authorities on the COVID-19 situation. This support is expected to be in the areas of clinical management, infection prevention and control, surveillance and risk communication. At this stage the focus is on limiting further human-to-human transmission. We expect to understand more as the situation develops.
- 65 Limited local person-to-person transmission of COVID-19 in countries outside of China was expected, however the rapid increase in reported cases in Italy over the past few days is of concern. While the majority of cases (4 out of every 5) experience mild or no symptoms (based on current data) our primary concern is the level of transmission risk.
- 66 Health authorities in Italy are implementing measures to prevent onward transmission, including closing of schools and bars and cancelling of sports events and other mass gatherings in the areas affected. This aligns with the containment strategy currently being implemented globally in an effort to stop the spread of COVID-19.
- 67 Information about the level and nature of the transmission in Italy and other areas with clusters will continue to inform the New Zealand approach.

Iran

- 68 Iranian officials announced yesterday a total of 95 confirmed cases of COVID-19, plus 15 fatalities. This is a 24 hour increase of 50% from 62 confirmed cases. For the first time, Iranian officials have also indicated the current number of suspected cases in Iran is 900. A WHO team was scheduled to arrive in Tehran on 25 February to support the Iranian response to the virus.
- 69 Health authorities in Iran are implementing measures to prevent onward transmission, including border screening, closing of schools and universities and cancelling mass gathering events. In addition, reports indicated seminaries in Qom are closed until further notice.
- 70 Airlines have also begun acting in response to the increased number of cases in Iran, with a number of airlines cancelling flights in and out of the country. Some countries in the region have also enacted border measures to restrict entry from Iran.

Republic of Korea

- 71 The Korean Centre for Disease Control and Prevention announced 25 February 144 new confirmed cases of COVID-19 in the past 24 hours, taking the total to 977 with 10 deaths.

- 72 Republic of Korea (ROK) officials have stressed that the Government is taking concerted and all-out efforts to respond to the COVID-19 outbreak.
- 73 The ROK Government has asked other governments to not impose overly restrictive measures for people travelling to and from the ROK. The Government has expressed its expectation to be informed in advance of any measures being imposed.
- 74 Screening at airports was underway in ROK before the virus was introduced to a group in Daegu. Since that event, the number of cases increased rapidly over the past week from 31 cases to 977 cases. This level of transmission risk is very concerning.
- 75 The government has since focused its resources on containing the spread beyond the group in Daegu. This is across three main areas:
- 75.1 Prioritising testing of those considered high risk
 - 75.2 Testing all people in Daegu presenting common cold symptoms
 - 75.3 Individually contacting a list of people believed to have had contact with members of the group in Daegu.

WHO declaration

- 76 Given the global developments in the past few days, the WHO has been providing information on the publicly declared level of concern related to COVID-19.
- 77 The WHO declared a Public Health Emergency of International Concern – the highest level of alarm – when there were less than 100 cases outside China, and 8 cases of human-to-human transmission. As of 25 February there were 2,459 confirmed cases outside China across 33 countries.
- 78 It is possible that the WHO will describe the epidemic as a pandemic. This will be based on the ongoing assessment of the geographic spread of the virus, the severity of the disease it causes and the impact it has on the whole of society.
- 79 As of 24 February, the WHO did not consider there was an uncontained global spread of the virus however has recognised that the virus has pandemic potential and the concerning increase of new cases.

Next steps

- 80 The Ministry of Health is continuing to gather information about the global situation and is reviewing current border measures every 48 hours.
- 81 The epidemiology and transmission of the virus remains unclear at this stage with local transmission identified in Italy. The WHO risk assessment for the global level remains **HIGH**.
- 82 The COVID-19 Technical Working Group will be meeting on 27 February to consider the current case definition and developing global situation.

Insert other agency logos as required

Appendix 6: Risk mitigating isolation measures that are advised in scenarios with differing levels of risk

Isolation Measure	Risk of exposure <i>Such as where people have been</i>	New Zealand accommodation settings <i>Where they will isolate</i>	Risk of transmission <i>Within the accommodation settings in New Zealand</i>	Guidance/Procedures <i>MoH guidance on how to isolate in each measure</i>	Health resources required / provided <i>Support provided through Health System</i>	Legal framework <i>Public Health Act 1956</i>
Self-Isolation	Low - People that have been in places of concern in the past 14 days have a low risk of contracting the virus	Individuals staying in private residences or similar (such as private homes, flats or homestays)	Low - The risk of transmission in settings where people have access to private residences with established networks of support is low.	Guidance for self-isolation ⁴ Register with Healthline for follow up	Healthline resource for registration and phone advice	Health sector providing support through standard models of care.
Supported Self-Isolation	Low - People that have been in places of concern in the past 14 days have a low risk of contracting the virus	Individuals are supported through shared accommodation facility settings (such as student hostels/halls or hotels).	Medium -The risk of transmission is considered medium in accommodation settings where people are in close proximity or a shared accommodation facility.	Guidance for self-isolation. Supplementary guidance for self-isolation in shared accommodation facilities.	Healthline resource for registration and phone advice. In some circumstances may require assurance from facility management that the guidance can be met effectively. If the guidance cannot be met, additional support through Health resources may be required. Where individuals have no accommodation, additional resources may be required (including cross-government).	Health sector providing support through standard models of care.
Monitored Self-Isolation	High - Individuals who are identified as a close contact with a confirmed COVID-19 case that have a high risk of developing COVID-19 disease	Can vary from private residences to shared accommodation facilities.	Low / medium – As above, this will depend on accommodation settings (private or shared accommodation facilities).	Monitoring and support managed as per standard guidance for close contact management.	This group will be a priority for Health resourcing and will require individual follow up and management through the Health system.	Health sector providing support through standard models of care. Health legislation can be used for this group and this moves into enforced isolation (below)
Enforced Isolation	High - Individuals at high risk of developing COVID-19 disease (e.g. have been in a place of identified outbreak such as Wuhan and/or have had close contact with a confirmed COVID-19 case).	Can vary from private residences to shared accommodation facilities.	Low - Enforced isolation procedures follow very strict requirements regarding proximity and shared accommodation facilities.	Managed as per operating procedures for enforced isolation (e.g. Whangaparaoa)	Intensive Health resourcing required including accommodation facilities, laundry, cleaning, food, and other services.	A Medical Officer of Health can require isolation or quarantine for the 'purpose of preventing the outbreak or spread of any infectious disease'. ⁵

⁴ www.health.govt.nz/our-work/diseases-and-conditions/novel-coronavirus-covid-19/novel-coronavirus-self-isolation

⁵ Health Act 1956 Section 70 'Special powers of medical officer of health'

Proactively Released