

Phases of the New Zealand Influenza Pandemic Plan as applied to the 2019-nCoV response as at 30 January 2020 – updated as at 2 Feb 2020

Phase of NZIPAP	Requirements for Actions	Key actions taken in 2019-nCoV response	Date	Responsible	Escalation Points
<p><u>Plan For It</u> – “to plan to reduce the health, social and economic impact of a pandemic on New Zealand”</p> <p>No cases in New Zealand</p>	<p>Planning, coordination and reporting, intelligence gathering</p> <p>Strengthen preparedness and prepare to rapidly detect transmission</p>	Regional pandemic plans refreshed	Ongoing	Public Health Unit/DHB	<ul style="list-style-type: none"> - International surveillance shows concerning increases - First case in New Zealand - Changes to global response (especially Australia)* <p>Significant changes to the reproductive rate or fatality rate of disease</p> <p>*this was identified as an escalation point in version 1 of this document; this remains a trigger point despite Australia already escalating their response, as Australia may further change their response as new information is received</p>
		2019-nCoV test available at national level – daily results	Available from 31/1/2020	Environmental Science Research NZ (ESR)	
		Communications with the sector and public	Daily	NHCC Public Information Management Officer, Ministry of Health	
		ILI surveillance underway	BAU	Communicable Diseases Team, Ministry of Health	
		Establishment of Incident Management Team	23/01/2020	Public Health Group, Ministry of Health	
		Establishment of a Technical Advisory Group	24/01/2020	Office of the Director of Public Health and Public Health Group, Ministry of Health	
<p><u>Keep It Out</u> – “to prevent or delay the arrival of the pandemic virus into New Zealand by implementing border management controls, and to prepare for the next phases”</p> <p>No cases in New Zealand</p>	<p>Consider health advice to travellers, activate emergency plans, implement measures to manage at risk travellers, develop technical advice for health care workers and liaise with labs to prepare for testing</p>	Public health presence at border	From 27/01/2020	Community Public Health (Christchurch Airport) and Auckland Regional Public Health Service (Auckland Airport)	<ul style="list-style-type: none"> - First case in New Zealand - Public alarm or perception - Changes to global response (especially Australia)* <p>Requests for exit screening from Pacific neighbours</p> <ul style="list-style-type: none"> - WHO recommending restrictions on travel and trade
		NHCC activated	28/01/2020	Ministry of Health	
		Interagency Pandemic Group and Border Working Group activated	24/01/2020	Ministry of Health convened	
		Rapid isolation of suspected cases	As required	Public Health Unit/DHB	
		Novel coronavirus made notifiable	From 30 Jan	Ministry of Health, diagnosing physician and local Medical Officer of Health to notify	
		Coordinating with other border agencies	Ongoing	NHCC Border Operations Officer, Ministry of Health	
		Escalation of response due to WHO declaration of PHEIC	31/01/2020	NHCC National Incident Coordinator	
<p><u>Stamp It Out</u> – “to control and/or eliminate any clusters that are found in New Zealand”</p> <p>First case identified in New Zealand</p> <p>Clusters of cases in New Zealand</p>	<p>Thorough contact tracing, prepare business continuity plans, border surveillance, monitor Healthline calls, international reporting and ensure clear messaging</p>	Healthline calls monitored	From 30/01/2020	Healthline report to Ministry of Health	<ul style="list-style-type: none"> - Transmission of cases (human to human) in hospitals/healthcare settings - Changes to global response (especially Australia) - WHO recommending restrictions on travel and trade
		Dedicated 0800 line being set up	From 3/02/2020	Healthline	
		Prepared to report cases to WHO using template	As required	Ministry of Health NHCC	
		Communications being updated daily on Ministry of Health website	Daily	Public Information Management Officer, Ministry of Health	
		PHUs initiating plans for pandemic response regarding contact tracing	From 28/01/2020	Local Public Health Units	
<p><u>Manage It</u> – “to reduce the impact of pandemic influenza on New Zealand’s population”</p> <p>Increased and substantial transmission in the general population</p>	<p>Consider issuing epidemic notice, activate recovery plans, ensure staff welfare, liaise internationally, and move from contact tracing to general welfare</p>	Situation overseas being monitored	Ongoing	NHCC Intelligence Officer, Ministry of Health	<ul style="list-style-type: none"> - Transmission of cases in the general population - Changes to global response (especially Australia) - WHO recommending restrictions on travel and trade - Public perception of crisis
		NHCC rostering in place	Ongoing	NHCC Logistics Officer, Ministry of Health	
		Close liaison with Australia	Ongoing	Office of the Director of Public Health, Ministry of Health	
		Communications being updated daily on Ministry of Health website	Daily	Public Information Management, Ministry of Health	

Key Factors to Inform the Escalation of Response

- First case of 2019-nCoV in New Zealand
- Hospital transmission in New Zealand
- Community transmission in New Zealand

- Ease of transmission and severity
 - At this stage, the virus is not considered to be easily transmissible. Transmission is often defined by the basic reproductive ratio (R0), which is the number of cases that one case generates on average during the course of its infectious period. 2019-nCoV has an estimated R0 of 1.4-2.5, based on current evidence. For reference, the R0 of pandemic influenza is 2-3, and the R0 of measles is 12-18. Of the confirmed cases of 2019-nCoV, approximately 20% are reported to be severe. The current fatality is 2-3%.
- Vaccine availability
 - At present no vaccine exists for this novel virus
- Efficacy of treatment
 - At present there is no specific antiviral treatment available for this virus. Patients are managed according to their symptoms.
- Global response
 - Consideration for enhanced border measures within New Zealand will be undertaken if recommended by the WHO and/or if there are changes to responses by other countries (particularly Australia).
 - If exit screening is requested by other countries, consideration will be made to implementing the requests
- Suspected cases in New Zealand will be managed according to the Ministry's advice to health practitioners
 - If a case is confirmed in New Zealand, further consideration will be given to public information management as well as enhanced surveillance, case management, and prevention of secondary transmission. This would also require the National Focal Point to notify the case to WHO.

Proactively Released