











# COVID-19 Response Weekly Report

17 December 2021

### RESTRICTED

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### DECEDICATED

# 1. Status Summary

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

### Border

3	Agency	Last Week		Agency Comment
vaccination	МоН	•	•	<ul> <li>Update on Testing and Supply operations</li> <li>30,649 tests were processed on 14 December with a rolling 7-day average of 25,893. On 7 December 2021, 76.7 percent of tests were processed within 24 hours and 95.5 percent of tests were processed within 30 hours. As of 15 December 2021 laboratory baseline capacity across the network was 42,868 tests per day with a surge capacity of 62,370 tests per day. At the end of December 2021, the forecast baseline capacity was 58,768 tests per day and surge capacity of 78,080 tests per day. The numbers indicate that building laboratory testing capacity is progressing well.</li> <li>Boundary testing compliance</li> <li>From 6 September 2021 to 14 December 2021, at the land boundary, over 2 million vehicles have been stopped at the checkpoints on Auckland's northern and southern boundaries, with only 0.9 percent of vehicles turned around.</li> <li>On 14 December 2021, at the air boundary, of 90 passengers originating in Auckland, eight were refused travel for not having evidence of a test.</li> <li>With the change to the boundary settings in Auckland the checkpoints were removed from midnight on 14 December 2021. Spot checks will be in place at both the north and south exits of Auckland, and Waikato Police District is ready to do the same.</li> </ul>
workforce	MBIE	•	•	<ul> <li>Staff Testing</li> <li>Compliance reporting is at 90%, (with no change from last week), for staff who worked in the week of 6-12 December 2021. 10% of workers on site in the week of 6-12 December are showing in the BWTR as overdue (546 workers).</li> <li>We are following up with all workers who are overdue for tests to make sure they understand the new requirements.</li> <li>As of 13 December, 4,131 MIQ workers have opted-in to saliva testing (up 152 from this time last week).</li> <li>Vaccinations</li> <li>The BWTR shows, of the workforce on site for the week of 6-12 December, 96.6% have had two doses of the vaccine, 2 0% had one dose and 1.5% have vaccination status 'unknown'.</li> <li>Vaccination assurance follow-ups for those with an 'unknown' status in BWTR reported last week did not identify any breaches of the Vaccination Order.</li> <li>Vaccination boosters were available from 29 November for anyone who had their primary course of the vaccination at least 6 months ago. We are encouraging workers through our regular communications channels to get their booster shot if eligible. There are 1,737 MIQF border workers who have had a booster dose.</li> <li>There were no vaccine exemptions granted last week.</li> <li>This indicator is at amber as testing compliance is down due to recent Required Testing Order changes (as previously reported). We will continue to educate workers on the new requirements and will move to green when compliance returns to expected levels.</li> </ul>
Nine	MFAT	•		The Government of Niue has announced that the previously signalled reduction from 14 to 10 days in the time required in managed isolation on arrival in Niue will begin from 10 January 2022.
Islands	МоН	•	•	<ul> <li>The revised cabinet paper proposing the expansion of the low-risk Pacific pathway (LRPP) is being reviewed by the Social Wellbeing Committee on 15 December 2021 and will be reviewed by cabinet on Monday 20 December 2021. It has not yet been confirmed whether the expansion to five new jurisdictions will commence aligned with Step 1 (16 January 2022) or Step 2 (13 February 2022).</li> <li>Discussions have commenced about revisions required to the existing QFT arrangements to reflect the establishment of Reconnecting New Zealand, New Zealand's changed domestic situation and the low risk these countries currently pose to New Zealand.</li> <li>Response planning is being refreshed in coordination with other government agencies, and with the Cook Islands government.</li> <li>The Cook Islands border is due to open to New Zealand tourists from 13 January 2022.</li> </ul>
- Pacific	MFAT			<ul> <li>The SWC considered advice on simplifying and expanding the low-risk Pacific pathway on 15 December. We understand Ministers supported the option to expand the pathway to Solomon Islands, Kiribati, Tuvalu, Nauru and American Samoa from 13 February 2022 to align with Step 2 of Reconnecting New Zealanders. Cabinet will be asked to confirm this decision on 20 December.</li> <li>If Cabinet confirms this decision, officials will begin engagement with additional partner governments in the week 20 December, including seeking commitments to the repatriation of RSE workers.</li> <li>Separately, COVID-19 Ministers have approved a shift to a self-declaration model for the 14-day in-country eligibility check for travellers from Samoa, Tonga, Tokelau and Vanuatu. Officials are informing partner governments of the change in the week of 13 December.</li> </ul>

### Managed Isolation and Quarantine and Return to the Community

Agency		This Week	Agency Comment		
MBIE		•	retion Systems  Ventilation remediation work has been completed at 28 of our 33 facilities, with 17 of 28 of those facilities fully signed off.  Vork is underway to install air filtration unit's in all quarantine rooms prior to Christmas.		
MBIE upcoming border setting changes. Increased pressure on the laboratory system continues, which is leading to delays in results.  DHBs are wanting to offer staff permanent contracts to provide more security to staff and alleviate concerns about the short-term nature of MIQ.		•	<ul> <li>This is the final week of operation for the pilot.</li> <li>There are currently 8 participants self-isolating in Auckland and 2 in Christchurch.</li> <li>69 participants have exited their self-isolation to date. The final participants will exit from Christchurch on Thursday 16th December and from Auckland on Saturday 18th December.</li> </ul>		
		<ul> <li>The difficulty in recruiting and retaining health workforce continues to have implications for the MIQ system.</li> <li>The current border settings and MIQ practices mean MBIE are in a strong position with regards to protecting NZ from the Omicron variant. There is still some uncertainty whether or not the Omicron variant will impact upcoming border setting changes.</li> <li>Increased pressure on the laboratory system continues, which is leading to delays in results.</li> </ul>			
MBIE	•	•	<ul> <li>P2/N95 Mask Implementation</li> <li>All MIQ facilities will have been visited in the first round of fit testing by 24 December. The total number of tests that have been completed by FaceFit is 1,558, with a further 390 tests having been completed prior to 11 November taking the total number of workers tested to date to 1948.</li> <li>So far, we have had 256 workers fail their FaceFit fit test. 24 of these were for reasons that their face shape prevents the mask from creating a sufficient seal, and 232 because the worker has a beard which interferes with the mask's ability to create an adequate seal. We will be working with employers in the new year to attempt to find alternatives for the 24 workers. Bearded workers are able to continue to work in returnee facing zones and have been reminded how to properly fit check. If they shave, they are encouraged to attend a fit test at the next opportunity.</li> <li>We are planning for an additional round of Fit Testing to be provided by FaceFit in January, to capture those workers who were not available to be tested when testers were onsite during November and December.</li> <li>Engagement continues with employers about the approach to ongoing BAU fit testing, where PCBUs complete testing for their workers. MBIE will support their testing by providing trainers to train testers; access to Porta Count Machines and consumables; supplementary testing where required; and offering guidance.</li> <li>It is expected that the first of the train the trainers will successfully complete their competency assessment this week, a further four will be assessed in the second week of January, and the remaining 2 will complete by the end of January.</li> </ul>		

# Community Protection Agency Last This

As at 9.00am 15 December 2021:     there have been 9,963 community cases associated with the Delta Community Outbreak. Of these, 5,583 are active cases.     there are 90 cases linked to the Delta Community outbreak who are currently in hospital.     there are 6,963 open contacts.      Saliva Testing     As of 15 December 2021:	Agency	Week	Week	
- Of the 3,758 active workers who are undertaking saliva testing, approximately 87 percent are compliant in meeting their testing requirements.  • Amendments to the Required Testing Order will come into effect on 16 December 2021, which means that border workers and unvaccinated education workers (until 1 January 2022) will be required to have one O	or surveillance and	Week	Week	<ul> <li>there have been 9,963 community cases associated with the Delta Community Outbreak. Of these, 5,583 are active cases.</li> <li>there are 90 cases linked to the Delta Community outbreak who are currently in hospital.</li> <li>there are 6,963 open contacts.</li> <li>Saliva Testing</li> <li>As of 15 December 2021:         <ul> <li>7,038 border workers have opted into saliva testing. This represents 32.3 percent of active border workers.</li> <li>Of the 3,758 active workers who are undertaking saliva testing, approximately 87 percent are compliant in meeting their testing requirements.</li> </ul> </li> <li>Amendments to the Required Testing Order will come into effect on 16 December 2021, which means that border workers and unvaccinated education workers (until 1 January 2022) will be required to have one COVID-19 test, using saliva as a sample, per testing cycle. Currently, they are required to have two tests per testing cycle. This reflects the revised Ministry position on COVID-19 testing using saliva as a sample, to recognise it as</li> </ul>

### Vaccination

Agency	Last Week	A 100 CO	Agency Comment on Status of Focus Area
МоН	•	•	<ul> <li>As at 11.59 pm on 14 December 2021:         <ul> <li>7,918,777 vaccinations have been delivered, including 3,766,864 people who are fully vaccinated.</li> <li>94 percent of the eligible population has now received at least one dose. 90 percent of the eligible population is now fully vaccinated.</li> <li>2,610 doses of AstraZeneca have been administered.</li> <li>174,719 booster doses have been administered.</li> <li>4,261,042 My Vaccine Passes have been issued.</li> </ul> </li> <li>19 DHBs have hit or passed 90 percent first doses, and Northland is on 88 percent.</li> <li>Seven DHBs (Waitemata, Auckland, Counties Manukau, Capital &amp; Coast, Hutt Valley, Canterbury, and Southern) have all reached 90 percent fully vaccinated.</li> <li>Medsafe is reviewing Pfizer's application for vaccines for 5-11-year-olds. If approved, rollout to this age group is likely to commence from mid-to-late January 2022.</li> <li>Booster campaigns for residents in aged residential care facilities have commenced, with most DHBs expecting to complete administration between December 2021 and February 2022.</li> <li>All DHBs continue to focus on vaccinating hesitant and under-vaccinated populations, using a combination of small, targeted events and initiatives, mobile vaccine clinics, and onboarding additional Primary Care and community pharmacies as vaccination sites.</li> </ul>

### Resurgence Planning and Response

9	Agency	Last Week		Agency Comment on Status of Focus Area		
COVIID-19 Management Planning	DPMC	•	•	The COVID-19 National Management Approach Q1 has been released to agencies. A summer Guide for COVID-19 Duty Ministers and National Response Leadership Team is underway. Monitoring and system alignment and planning for decision making architecture under the COVID Protection Framework (CPF) is underway.		
Readiness Planning	DPMC	•	•	A summer readiness national workshop was held on 15 December 2021 to align NRG agencies with the process for the summer and plans for known issues.  A virtual meeting was held on Friday 10 December 2021 with RLG Chairs and RPSCs to review the regional advice checklist that was provided as part of the first CPF review cycle. The session was an opportunity to hear from the regions what went well, any challenges they faced, and also to provide insights from the NRG back to the group to inform the next cycle of CPF checklist reporting.  A regional summer pack is under development and will be shared with regions in the next week. This will contain a range of information that seeks to guide regions in management of COVID-19, over the summer period.		

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### Resurgence Planning and Response (continued)

	Agency	Last Week	This Week	Agency Comment on Status of Focus Area
Readiness Planning	МоН	•	•	<ul> <li>At 11 59pm on 2 December 2021 New Zealand moved to the COVID-19 Protection Framework (traffic lights system).</li> <li>From 11.59pm on Thursday, 30 December, all regions currently at the Red setting will move to Orange, except Northland. Northland will remain at Red while efforts focus to increase vaccination rates.</li> <li>These settings will be reviewed again on 17 January 2022, after which the settings will then be reviewed on a fortnightly basis.</li> <li>Modelling and insights requirements to support this work continue to iterate as assessments identify more opportunities for granularity of information. In addition, the Ministry has identified opportunities to further strengthen and streamline its internal processes for undertaking its assessment, including working closely with district health boards to support their self-assessment of capacity and demand within their geographical areas, which feeds into the Ministry's assessment.</li> <li>Omicron Variant of Concern</li> <li>Based on current limited evidence Omicron appears to have a growth advantage over Delta. It is spreading faster than the Delta variant in South Africa where Delta circulation was low, but also appears to spread more quickly than the Delta variant in other countries where the incidence of Delta is high, such as in the United Kingdom. However, it remains uncertain whether the rapid growth rate of Omicron is related to immune evasion, increased transmissibility, or a combination of both.</li> <li>The World Health Organisation has noted that there are still limited data on the clinical severity of Omicron. While preliminary findings from South Africa suggest it may be less severe than Delta, and all cases reported in the European Union to date have been mild or asymptomatic, it remains unclear to what extent Omicron may be inherently less virulent.</li> <li>Many characteristics of Omicron are still unclear. More robust data are required to determines</li> <li>if Omicron presents with different</li></ul>
DPMC  • Key activities are supporting the ramp up of the care in the communities framework and operations nation-wide, changes in the Auckland boundaries and supporting multiple regic communities. COVID-19 is being managed in the community with 10 of the 12 public health units are activated with cases withing their communities.  • The first cycle of the new CPF decision making cadence was completed and changes will be implemented at 11.59pm 30 December.  • Auckland boundary checkpoints have been reduced and new Northland checkpoints are in place.		The first cycle of the new CPF decision making cadence was completed and changes will be implemented at 11.59pm 30 December.		
Domestic response	MBIE	The first cycle of the new CPF decision making cadence was completed and changes will be implemented at 11.59pm 30 December.  Auckland boundary checkpoints have been reduced and new Northland checkpoints are in place.  MIQ's Response to the Delta Outbreak: Community cases  There are three quarantine facilities in Auckland and with a high number of community cases self-isolating at home, the pressure on quarantine rooms has eased with over 300 rooms available over the last two wee Future demand for quarantine rooms is difficult to predict due to uncertainty about the forecasted cases that will require MIQ, the impact of the Omicron variant and those who will be under community care.  The Amohia in Hamilton is a community isolation and quarantine facility. It is being used as a quarantine facility and for a small number of community cases who are unable to isolate at home.  Quarantine facilities in Christchurch have a small number of community cases, further work is underway to look at options for additional quarantine capacity.  MBIE continues to consider options for increased quarantine capacity in Auckland, Central Region and Christchurch as positive cases continue to appear throughout New Zealand.		<ul> <li>There are three quarantine facilities in Auckland and with a high number of community cases self-isolating at home, the pressure on quarantine rooms has eased with over 300 rooms available over the last two weeks. Future demand for quarantine rooms is difficult to predict due to uncertainty about the forecasted cases that will require MIQ, the impact of the Omicron variant and those who will be under community care.</li> <li>The Amohia in Hamilton is a community isolation and quarantine facility. It is being used as a quarantine facility and for a small number of community cases who are unable to isolate at home.</li> <li>Quarantine facilities in Christchurch have a small number of community cases, further work is underway to look at options for additional quarantine capacity.</li> </ul>

# 2. COVID-19 Insights

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

### 2.1.1 COVID-19 False Information Landscape Update

### Introduction

The Insights and Reporting Team in DPMC's COVID-19 Group have analysed data around the false information landscape in the move to the COVID Protection Framework (CPF). This report provides updated insights around key influences, themes, methods, platforms and behavioural consequences surrounding false information in New Zealand and the responses to it, building on insights from the September report.

### **Volume of False Information Increasing**

The volume of false information disseminated about COVID-19 in New Zealand is higher than at any point in the pandemic, with surges following key government announcements. Data received from CERT NZ shows the highest ever increase in false information reports by members of the public was following the announcement of the vaccine pass system in late-November. In the two-week period that followed the announcement from 21 November to 5 December, 278 pieces of false information were reported, in comparison to 39 reports in the prior two-week period. However, not all announcements generated the same level of reporting activity, with reporting levels remaining relatively low for the announcements of the vaccine mandate, and the COVID-19 Protection Framework (CPF) in October. Other entities that monitor false information activity across social media channels have also reported a similar increase in activity since the start of the Delta outbreak in late-August, with levels peaking after significant government announcements.

### **False Information Influencers**

The majority of false information in New Zealand appears to be produced by a relatively small number of influential groups and individuals, many of whom leverage large followings from social media. CERT NZ data shows the anti-vaccine and anti-lockdown group Voices For Freedom NZ (VFF) were responsible for material that generated approximately 378 false information reports from the public (49 percent of the reports), distributing flyers, pamphlets and digital content from September to December 2021.<sup>5</sup> VFF have tens of thousands of followers across multiple social media platforms. <sup>6 7 8 9</sup> International anti-vaccine and conspiracy group The White Rose was responsible for material that generated 61 false information reports by the public (7 percent of the reports), distributing stickers and flyers about vaccine deaths around the Christchurch area. <sup>10</sup> The White Rose has over 50,000 followers on their Telegram page and have been endorsed by Plan B, an anti-lockdown group led by a University of Auckland academic. <sup>11 12</sup> Of note, social media followers may be overinflated by use of bots and false accounts, which are used to increase the size, reach, and influence of popular accounts.

Doctors who are against COVID-19 vaccination are likely to be considered credible sources of false information for the unvaccinated. Though a large majority of doctors support the COVID-19 vaccination, at least 50 doctors (less than 1 percent of all registered doctors in New Zealand) are reported to be supporting the anti-vaccination group New Zealand Doctors Speaking Out with Science (NZDSOS). <sup>13</sup> <sup>14</sup> While their numbers may be small, the influence of doctors who do not support the COVID-19 vaccine may be disproportionately influential. A recent survey shows that for vaccine hesitant people, doctors are the second most trusted source of COVID-19 information, after family members. <sup>15</sup> Additionally, many groups spreading false information online often attempt to bolster their credibility by relying on 'expertise' from doctors who are against COVID-19 vaccinations. Following the discovery a Canterbury doctor falsifying vaccination exemptions to the public, there are concerns that other doctors may engage in similar efforts to undermine vaccination records or spread false information about vaccine safety online. <sup>16</sup> <sup>17</sup> <sup>18</sup> This is a particular concern in rural communities such as Tāneatua and Colville, both of which have low vaccination rates, vaccine-sceptical GPs working in the regions, and limited alternatives for GPs in either area. <sup>19</sup>

### **Key Themes of False Information**

COVID-19 false information narratives continue to adapt, shifting to reflect changes in public health mandates implemented by the New Zealand Government. During the vaccine rollout in mid-2021, much of the false information narrative centred around suspicions of the safety of COVID-19 vaccination.<sup>20</sup> <sup>21</sup> These include claims that the vaccine causes significant side effects, does not meet safety requirements, and causes death. <sup>22</sup> Though still vaccination related, many themes around false information from September to December 2021, have pivoted to from anti-vaccination to anti-mandate narratives, coinciding with recent government announcements. These including false information which is against vaccinating children under 12, vaccine mandates for key sector workers, and the rollout of the vaccine passport under the CPF. <sup>23</sup> <sup>24</sup>

Overt narratives around COVID-19 false information are a vector for alt-right groups to push underlying themes including anti-government sentiment and extremism. Many false information influencers exploit the uncertainty, frustration and fatigue associated with COVID-19 mandates to push their own agendas through online platforms. <sup>25</sup> False information around COVID-19 mandates are interwoven with more extreme content including government corruption, mistrust of authorities, white supremacy, misogyny, racism, and homophobia. <sup>27</sup> <sup>28</sup> <sup>29</sup> \$9(2)(ba)(i)

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### **Methods of Disseminating False Information**

The use of memes to spread false information through digital platforms has been increasing, with their content becoming increasingly targeted, extreme and violent.<sup>31</sup> \$9(2)(ba)(i)

32 s9(2)(g)(i)

Meme-based content is more likely to be shared across social media platforms, and its use by influential people increases the dissemination potential of false information. <sup>33</sup> The satirical nature of meme-based content also has the potential to normalise extreme views to a wide audience under the pretence of humour. <sup>34</sup>

A significant amount of false information appropriates Ministry of Health COVID-19 branding to subvert wider public health messaging. Reporting to CERT NZ regarding COVID-19 false information has identified a considerable amount of material that uses the COVID-19 government branding to promote false messages around anti-vaccination, vaccine mandates, and requirements around vaccine passes. <sup>35</sup> Though materials have been identified in both paper and digital formats, there has been a large number of these materials on display at various businesses across New Zealand. <sup>36</sup> <sup>37</sup>

### Platforms of False Information

False information continues to be spread across mainstream social media platforms including *Facebook, Twitter*, and *Instagram*. <sup>38</sup> <sup>39</sup> Despite enhanced guidelines around demonetizing and removing accounts that promote false information, its presence across these platforms persists. <sup>40</sup> <sup>41</sup> Many channels and accounts continue to operate through use of covert language, closed groups, private pages, and/or through promoting temporary content through 'stories', or content that only lasts a finite period before removal from public view. <sup>42</sup> <sup>43</sup> s9(2)(ba)(i)

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Algorithms from mainstream social media have the potential to increase exposure of COVID-19 false information. <sup>46</sup> Social media algorithms are known to tailor content based on previous user interactions, promoting material that a user is more likely to engage with, regardless if the engagement is positive or negative. <sup>47</sup> <sup>48</sup> For those that follow or engage with accounts that promote false information around COVID-19, the algorithm will locate and present similar content and advertisements to encourage engagement on the platform. <sup>49</sup> Social media has the potential to immerse users into a pool of false information, unaware that its presentation is heavily distorted by an algorithm that reinforces pre-existing views. <sup>50</sup> This may be particularly

problematic for vaccine-hesitant groups, who may be presented with additional false information as a result of looking for anti-vaccine content.

There is an increasing number of false information influencers moving towards less regulated social media platforms including *Telegram* and *Odysee*. <sup>51 52</sup> *Telegram* is an encrypted messaging application that allows for largely unregulated group-based chat rooms, or 'channels' where users can anonymously discuss topics and share media. <sup>53</sup> TPM is monitoring several New Zealand-based channels on *Telegram* that regularly disseminate false information and have a collective following in the tens of thousands. <sup>54 55</sup> *Odysee* is a social media platform similar to *YouTube* that allows channels to publish videos without strict regulations. Anti-vaccine and mandate group VFF currently has over 34,000 followers on *Telegram*, as well as hundreds of videos and 7,200 subscribers on *Odysee*. <sup>56 57</sup>

### **False Information Fuelling Social Discord**

As the CPF rollout continues, false information is likely fuelling social discord that is translating into escalating anti-vaccine, anti-mandate and anti-government behaviours. Under the CPF, divisions between vaccinated and unvaccinated groups are becoming more apparent, as the latter face significant restrictions from certain venues. <sup>58</sup> PR Research on sentiment also indicates that only 10 percent of unvaccinated New Zealanders would be motivated to COVID-19 vaccine as a result of the restrictions place from the traffic light system. <sup>60</sup> This division has and will likely continue to drive an increase in behaviours that show dissatisfaction with COVID-19 public health mandates and the wider government. <sup>61</sup> Anti-vaccine and anti-restriction protests led by highly influential groups like the Freedom and Rights Coalition have been growing in volume and frequency since September. <sup>62</sup> <sup>63</sup> <sup>64</sup> Politicians and public health figures have recently been targeted with physical threats and harassment by anti-vaccine groups and individuals. <sup>65</sup> <sup>66</sup> Businesses enforcing vaccine passes and other mandates under the CPF are also facing instances of physical threats and abuse from non-compliant unvaccinated individuals. <sup>67</sup> <sup>68</sup>

### **Responses to False Information**

DPMC has brought together the National Assessments Bureau, the Ministry of Health's Disinformation Assessment and Response Team (DART) \$9(2)(g)(i) into a virtual triaging and reporting cell for false information regarding COVID-19. Its purpose will be to provide a structure for collating, synthesising and reporting information to the Prime Minister, other relevant Ministers and senior officials on the impact of false information on public safety and the associated effect of COVID-19 response measures on social cohesion. The first report to Ministers is expected before Christmas and will likely become fortnightly from February 2022. These reports will provide information on the false information environment around the COVID-19 response and ensure visibility of emerging risks. The cell will report to the Interagency Coordination Group, which is convened by DPMC to support efforts to build resilience to false information.

DPMC's COVID-19 Group is working jointly with the Ministry of Health on providing guidance to the health sector, businesses, community leaders and the public on how to best respond to COVID-19 false information. This includes a targeted digital campaign to support the vaccine rollout. Māori-led approaches are also being considered to counter false information tailored to Māori communities.

Government is working with technology providers, media and other organisations to promote credible information about COVID-19 and address the spread of false information.

NZ Police are working to support victims of online false information where a criminal threshold has not been exceeded but which involve threats to initiate civil proceedings against persons.

Thank you to the following teams that assisted with this report: The Disinformation Assessment and Response Team at the Ministry of Health, the National Assessments Bureau, the Department of Internal Affairs, the New Zealand Police, and the Communications Team at the DPMC

# 3. Ministry of Health



### 3.1 Policy/Programme Updates

### 3.1.1 Health System Preparedness Programme: Update

This item provides an update about the health system preparedness programme.

### Care in the Community

The Managing COVID-19 Care in the Community Framework was distributed to the sector on 3 December 2021. This framework provides direction for organisations and providers who are caring for people who have tested positive for COVID-19 (and their whānau/household), and who are isolating in the community. The Framework will be updated regularly to reflect the programme's growth, and the next version will be provided to the sector before Christmas 2021.

The COVID-19 Care in the Community team hosted a webinar to share their recent work to the health and wellbeing sector.

We continue to work with the Ministry of Social Development (MSD) and the Northern Region Health Coordination Centre to ensure current providers are aligned with the updated approach for Care in the Community. Through the National Contract Tracing System, the Ministry of Health can now refer to MSD when someone who has tested positive for COVID-19 indicates they have a welfare need. This enables MSD to respond quickly and responsively to each individual's circumstances. On 8 December 2021, the programme held a training session with MSD, the Ministry of Health and the health sector on the integrated health and welfare response and process.

A memorandum of understanding between the Ministry of Health and MSD was signed on 9 December 2021, including agreement on data sharing, consent, and privacy.

### Guidance on isolating in apartments and isolating in temporary accommodation

The Ministry of Health is updating the Isolating in Apartments guidelines and developing advice on Isolating in Temporary Accommodation – motels, holiday parks, camping grounds. The timelines for both guidelines are:

- the week of 13 December 2021 review of guidelines by Legal and Communications and Engagement teams, and final amendments made and signed off by the Director-General.
- 20 December 2021 stakeholders will be provided with final versions of guidelines. These will also be published on the Ministry of Health's website.

### DHB resurgence plans and regional plans

We have completed desktop reviews of the resurgence plans of six DHBs (Lakes DHB, Hauora Tairāwhiti DHB, Southern DHB, Bay of Plenty DHB, MidCentral DHB, and Northland DHB). In addition, resurgence plans of four additional DHBs (Taranaki DHB, Whanganui DHB, Waikato DHB, West Coast DHB) were conducted in the week beginning 13 December 2021. A summary report of the resurgence review findings has been provided to all DHBs.

Based on the findings from the reviews the team has created a checklist for DHBs to assess and confirm their preparedness for COVID-19 resurgence. DHB CEOs have been asked to confirm that the key components to planning that have been identified through the reviews, are in place in their DHB by the end of the year.

### Workforce

The workforce team has several pieces of work underway:

- The Hands Up database (a database of potential (surge) health workforce created in 2020), webpage was updated and relaunched on 3 December 2021. Messaging has gone out to health-related education and training providers and student associations to promote registration on the Hands Up database.
- We are working with cross-Ministry initiatives setting up ICU nurse surge workforce uplift programmes.
- We are working with the Health System Preparedness Programme Care in the Community and the Care Coordination Hubs to have oversight over workforce needs.
- A workshop has been held within the Ministry of Health last week which explored potential options for short to medium term workforce initiatives. The initiatives are now further developed and will be reported back on in the New Year.
- The team continues to manage mandatory vaccination employment issues.

### **Next steps**

The programme is feeding into the DPMC summer messaging for the public.

3.1.2 COVID-19 Vaccine and Immunisation Programme

As at 11.59 pm on 14 December 2021, 7,918,777 vaccinations have been delivered, including 3,954,873 first doses and 3,766,864 second doses. 2,610 of the doses administered are AstraZeneca vaccines.

22,321 immunocompromised people have received their third primary dose.

174,719 booster doses have been administered.

94 percent of the eligible population has now received at least one dose, and 90 percent of the eligible population are fully vaccinated. Of those fully vaccinated, 11.4 percent are Māori and 6.6 percent are Pasifika.

492,873 Māori have received their first dose of the COVID-19 vaccine, which represents 12.4 percent of the total population who have received their first dose as at 14 December 2021.

772 sites were active on 14 December 2021.

### **Driving uptake**

Nineteen DHBs have hit or passed 90 percent first doses. The remaining DHB, Northland, is at 88 percent. Seven DHBs (Waitemata, Auckland, Counties Manukau, Capital & Coast, Hutt Valley, Canterbury, and Southern) have reached 90 percent second doses.

The Ministry of Health continues to support the DHBs with lower vaccination rates. This includes daily meetings to review progress, resolve issues, and present new strategies to support uptake.

With most DHBs having achieved the target of 90 percent first doses, their focus is on improving uptake among Māori and other vulnerable communities, reaching 90 percent second doses, administering boosters, and preparing for vaccination of 5 to 11-year-olds.

All DHBs continue to operate vaccination drives throughout the regions supported by promotional campaigns, radio and social media promotions, as well as social and community initiatives.

### Sharing personal information about unvaccinated individuals

On 6 December 2021, the High Court released its decision regarding the sharing of individual data on Māori in Te Ika-ā-Maui. The Court directed the Ministry of Health to both complete its decision-making processes for the provision of datasets in areas where it has not yet agreed to share data with the Whānau Ora Commissioning Agency and to review its decision to provide data in relation to those Māori in Te Ika-a-Māui who have only had a first dose.

Prior to the Court's decision, the Ministry of Health reached agreement with Whanau Ora to share individual Māori health data for nine North Island DHB regions - Waikato, Tāmaki Makaurau (Auckland, Waitemata, Counties Manukau DHBs), Taranaki, Tairawhiti, Midcentral, Capital & Coast and Hutt Valley DHB regions, with data-sharing agreements in place.

On 9 December 2021, the Ministry of Health communicated its agreement to share individual level Māori data to Whānau Ora for the Bay of Plenty, Hawke's Bay, Lakes, Northland, Wairarapa and Whanganui areas. Note, the Ministry of Health is working with Whānau Ora and Whānau Tahi to finalise data sharing agreements for these areas, after which the datasets will be shared.

In relation to providing further data to Whānau Ora to support the roll-out of booster shots and the vaccination of children next year, the Ministry of Health would expect that Whānau Ora would request the information at the appropriate time. The request will be considered by the Ministry of Health at that time, informed by the Court decisions and existing approvals for disclosure of information.

### 5 to 11-year-olds

Medsafe has granted provisional approval for use of the Pfizer COVID-19 vaccine in New Zealand for 5 to 11-year-olds.

The COVID-19 Vaccine Technical Advisory Group (CV TAG) is engaged in reviewing preliminary advice, subject to approval from Medsafe, in anticipation of Cabinet considering a "decision to use". The Ministry of Health is working with Pfizer to confirm the delivery schedule for supply of the Pfizer Paediatric product.

The Ministry of Health is preparing an implementation plan for the paediatric rollout, including planning with DHBs and Hauora providers. Pending regulatory approval, the roll-out is expected to begin in January 2022, as announced by Minister Hipkins on 1 December 2021. As part of the roll-out we will look to ensure equitable outcomes, focus on areas with low vaccination rates, and provide a broad range of sites and settings.

### **Equity**

All DHBs are focused on vaccinating hesitant and under-vaccinated populations and engagement with Māori Health providers, iwi, and Primary Care providers is ongoing.

First dose rates for Maori and Pacific peoples continue to increase, with Maori now over 86 percent first doses and Pasifika over 94 percent. DHBs with lower vaccination rates are finding effective ways to reach their remaining unvaccinated populations. For example, Lakes DHB has held a series of 'Vax Vegas' events aimed at increasing uptake among rangatahi. These events have seen an increase in uptake within the under-35 Maori population.

As DHBs reach their 90 percent first dose target, they are shifting their focus to achieve 90 percent first doses across all communities within their region as well as achieving their 90 percent fully vaccinated target.

The Social Wellbeing agency has performed data analysis to identify those disability groups with the lowest rates of vaccination. This analysis will assist with planning for more targeted outreach to increase uptake among these groups.

DHBs have worked with government and community partners to provide bespoke vaccination services to people who live in transitional housing/homeless communities and for people who are supported by Mental Health, Addiction, and Intellectual Disability Services. Where possible, trusted health providers for these communities have been onboarded as vaccination clinics.

### **Aged Residential Care Boosters**

Administration of booster doses for residents in aged residential care (ARC) is underway, and the DHBs have plans in place to complete their campaigns as soon as possible after the residents have become eligible to receive their boosters. For most DHBs, this is expected to be completed between December 2021 and February 2022. Where possible, primary care and pharmacy providers with existing relationships with ARC facilities are administering vaccinations to residents.

Waikato DHB expects to complete their booster campaign to ARC residents in March 2022 as they continue to prioritise first doses for Māori ahead of the opening of the Auckland borders. The Ministry of Health will work with Waikato DHB to see if this date can be brought forward once it has confirmed vaccination provider availability.

### General practice and pharmacy rollout

As at 12 December 2021, there are now over 1,166 primary care sites onboarded as vaccination sites, providing approximately 68 percent of all vaccine doses administered last week.

Focus remains on supporting the increase of primary care sites in districts with low vaccine uptake and high priority populations.

### **Technology**

As at 11:59pm on 14 December 2021, 4,261,042 My COVID Passes have been issued. The assisted service channels continue to see very high volumes of calls and changes have been made to the call lines to increase capacity both technologically and in the call centres.

The high demand has created a backlog of requests from people needing individual assistance to obtain their vaccine pass which were unable to be completed prior to 3 December 2021. This includes people who need to add their international vaccinations to their New Zealand record, people who need their name changed, and people whose records have errors which need to be corrected.

We issued temporary exemption emails the morning of 15 December 2021 to approximately 26,000 people with service requests for overseas vaccinations or requiring an update to a COVID Immunisation Register record. We are considering the impact that this will have on people over the holiday period, particularly those that are currently in the queue for overseas vaccinations and the length of the exemption to ensure that this is in line with our ability to process people within the 14-day period. A large number of staff from the Ministry of Health and the wider public service are working to rapidly resolve the backlog of requests.

In-person My Vaccine Pass support is now available at all vaccination centres, including Māori health providers, DHBs, general practices and pharmacies. This will help to remove barriers for people who may not have access to a My Health Account or may require support to do so.

### 3.1.3 Increasing Returnee Throughput

On 1 December 2021 the Ministry of Health provided you with a briefing paper setting out the risks to increasing returnee throughput from a health system perspective [HR20212590 refers]. The Ministry of Health recommended that throughput of returnees through managed isolation and quarantine facilities not be increased at this time given the health workforce capacity, clinical risks and lab capacity risks associated with increased throughput.

On 7 December 2021 you requested the Ministry of Health and Managed Isolation and Quarantine (MIQ) to provide further, joint advice on options to increase throughput of returnees.

Following this request, we have worked closely with the Ministry of Business, Innovation and Employment to determine what increase in throughput could be safely managed. As a result of this work, MIQ will release 1,000 additional managed isolation rooms for the period 17 December 2021 to 16 January 2022. This has resulted in managed isolation and quarantine's next lobby release on 16 December 2021 including 1,000 vouchers for December 2021 and 980 vouchers for January 2022.

### 3.1.4 Technical Advisory Group: update

### **COVID-19 TAG**

The COVID-19 Technical Advisory Group (COVID-19 TAG) did not meet in the week commencing 14 December 2021. The next COVID-19 TAG meeting is scheduled for 28 January 2022 and an update will be provided in a future Weekly Report.

### **CV TAG**

The COVID-19 Vaccine Technical Advisory Group (CV TAG) met on Tuesday 14 December 2021 and discussed the following items.

- CV TAG draft recommendations on vaccination in 5-11-year-olds
- timing of boosters
- changes to exemption criteria
- vaccination after previous SARS-CoV-2 infection
- exemptions for ME/CFS

The next CV TAG meeting is scheduled for 18 January 2022 and an update will be provided in a future Weekly Report.

### **Therapeutics TAG**

The COVID-19 Therapeutics Technical Advisory Group (Therapeutics TAG) did not meet in the week commencing 14 December 2021. The next Therapeutics TAG meeting is scheduled for 14 January 2022 and an update will be provided in a future Weekly Report.

### **CT ΤΔG**

COVID-19 Testing Technical Advisory Group (CT TAG) did not meet in the week commencing 14 December 2021. The next CT TAG meeting has not been scheduled as of yet.

# 3.1.5 Upcoming Communications Issues and Activities

### As at 14 December 2021

Date	Activity	Lead agency	Comms material	Ministerial Involvement
14/12/21	Health System Preparedness: An update to the COVID Care in the Community Framework.	МоН	Website, health stakeholders.	No
14/12/21	Removal of web content about requirements to cross Auckland Alert Level boundary.	MoH/DPMC	Updated web content and emails to any outstanding applicants.	No
14/12/21	Testing requirements for leaving  Auckland – further advice on antigen test.	MoH/DPMC	Talking points, key messages, communications, website, stakeholder comms.	Yes
14/12/21 ongoing	Delta Auckland outbreak: daily communications and support for the health sector and public, including cases throughout regions in North island, Nelson and Canterbury.  Locations of interest and updated health advice.	МоН	Communications, key messages, website, stakeholder engagement.	Optional
15/12/21	Announcement of new MIQ arrangements, based on updated Office of the Director of Public Health advice.	МоН	PM announcement, website materials.	Yes, with PM
ТВС	Announcement of new COVID-19 infringement regime (fines).	МоН	Ministerial announcement TBC Web materials already published, as came into force 4 December 2021.	Yes (TBC)

# 3.2 Upcoming Publications

Title	Date	Context	ELT contact
Publication: Ethical Principles for a Pandemic	December 2021	The National Ethics Advisory Committee's publication considers the ethical issues that may arise during any pandemic. The emphasis is on using shared ethical principles so people can care for themselves, their whānau and their neighbours, and make decisions. This is updated from the 2007 version.	Clare Perry, Deputy Director- General, Health System Improvement and Innovation, \$9(2)(a)
Publication: COVID-19 Māori Protection Plan	20 December 2021	This plan provides an updated framework that is informed by Te Tiriti o Waitangi to protect, prevent, and mitigate the impacts of COVID-19 on whānau, hapū, iwi and hapori Māori. The plan sets out strategic actions to guide health and disability system action for Māori through the next three to 12 months of the COVID-19 response in the context of new variants, the shift to the COVID-19 Protection Framework, and the long tail of the impact of COVID-19 on the health and wellbeing of Māori. The plan has been informed by insights and feedback from a broad range of stakeholders since the start of the COVID-19 response in March 2020.	John Whaanga, Deputy Director-General, Māori Health, \$9(2)(a)

# 4. Managed Isolation and Quarantine Weekly Report



### 4.1 Items to Note/Updates

### 4.1.1 MIQ's response to the Delta outbreak

The number of community cases coming into Auckland's quarantine facilities continues to reduce due to a decrease in referrals from Auckland Regional Public Health Services (ARPHS) and a decrease in community cases. This has resulted in nearly 400 quarantine rooms being available over the last two weeks with most cases self-isolating and supported by care in the community.

In Hamilton, the Amohia continues to accommodate a small number of community cases, while a number of cases continue to self-isolate at home in the region. Positive cases have continued to appear across New Zealand and these cases are supported by care in the community where quarantine facilities are unavailable.

With the number of positive cases appearing across New Zealand this week, MIQ continues to investigate options across the regions (where we have facilities) for additional quarantine capacity to support community cases if required; this includes dual options and full quarantine facilities. All options will need to consider the impact of policy decisions regarding the Omicron Variant of Concern (Omicron VOC) as well as the impact on availability for border returnees.

We have not seen a significant impact on capacity with the addition of the nine very high risk countries (in response to the Omicron VOC), they are still required to stay in an isolation facility for 14 days. To date, since 21 November we have planned for 123 arrivals and 65 of those have arrived in New Zealand.

We continue to see a very small number of positive cases from across the border and they have been moved to quarantine facilities; this has not impacted our capacity.

### 4.1.2 Reducing the Fee Waiver Backlog

When Quarantine-Free Travel commenced in April 2021, applications for emergency allocations and exemptions dropped by more than 50%. Due to low work volumes, a significant number of staff from the National Operations team were returned to home agencies or found other opportunities outside of MIQ.

With the cessation of QFT, work volumes and demand for MIQ increased rapidly again. To ensure that these urgent emergency allocations and exemptions were processed while the team was scaled back up, the team which normally processes fee waiver applications was diverted to those functions. This has meant a growing backlog of fee waiver applications, which in turn is impacting MIQ's ability to collect a number of overdue invoices.

The backlog currently sits at 4013 applications which have not yet been triaged. A significant number of these will not be progressed. Up to a third are likely to be assessed as being not liable or exempt from fees rather than entitled to a waiver. We also find that a number of applicants do not progress their applications when asked for further supporting evidence. There are an additional 1,108 applications where we are waiting for information from the customer, a large number of which are unlikely to respond, due to past experience.

We are allocating additional resource to work on the backlog however progress will be slower over the Christmas period due to a reduced number of staff on duty over the holidays to allow people to take leave. We will report on progress and a likely timeframe for resolution in the week of 10 January.

### 4.1.3 Isolation of Deportees Under the Medium Risk Pathway

The Australian Border Service has agreed to pause all deportations from Australia until after New Zealand enters the medium risk pathway on 16 January 2021 when vaccinated returnees from Australia will self-isolate at home rather than enter MIQ. Under the current MIQ system, deportees complete managed isolation at the Ramada hotel, and are unlikely to have an appropriate self-isolation plan.

Deportees are a high-needs group with several vulnerabilities (which may be increased without appropriate support to self-isolate), including their limited social connections in New Zealand, risks associated with

reoffending, welfare requirements, high levels of drug and alcohol use and/or restrictions on alcohol use. MIQ is working with officials from the Department of Corrections and the New Zealand Police to find an appropriate self-isolation solution for this group under the medium risk pathway.

A small number of deportees remain unvaccinated and will continue to go through MIQ.

### 4.1.4 MIQ's Role in Supporting COVID-19 Care in the Community

The Ministry of Health is the lead agency for the COVID Care in the Community response including determining the best place for COVID-positive people to isolate. The Ministry of Social Development is leading the welfare response where there are no suitable accommodation options for someone who is unable to isolate at home. Key elements of the welfare response include:

- A Regional Accommodation Subfunction Group comprising key agencies such as health (MOH, PHU, DHB), welfare (HUD, MSD, OT, KO)
- A National Accommodation Response Support Team representing the same agencies and providing a point of escalation where appropriate accommodation cannot be sourced
- Accommodation DCE Group that sets and maintains oversight of a national accommodation strategy.

MIQ is represented at all three levels of the welfare response and has been working with both MOH and MSD to assist with securing alternative accommodation in regions where there is no MIQ facility and where the DHB has been unable to secure accommodation. MBIE, through its Service Delivery group, has secured \$5 million for a Mobile Community Isolation Reserve (MCIR) to be deployed to regions where resourcing issues have been identified and all other accommodation options have been exhausted.

### 4.2 Policy Update

### 4.2.1 Approach for Vouchers Following the Implementation of the Medium-Risk Pathway

MBIE has been developing options to manage the voucher process for eligible travellers for Step 1 of the Medium-Risk Pathway.

There are approximately 770 rooms that may no longer be required, assuming that these voucher-holders are eligible Step 1 travellers.

MBIE is planning to maximise voucher releases to ensure that there is maximum room utilisation across the transition to the Medium-Risk Pathway. MBIE will confirm this approach closer to the date, in case of any new developments. MBIE will seek a decision from you on cancelling vouchers for eligible Step 1 travellers once the Medium-Risk Pathway arrangements have been confirmed in early January 2022.

### 4.2.2 Time-sensitive travel allocation policy update (TST)

TST applications for the March/April window opened on Monday 13 December and will close on 14 January. MBIE anticipates that there will be low numbers of applicants. MBIE will provide you with advice on the future of the TST allocation in mid-January.

### 4.3 Operational Update

### 4.3.1 Capacity Update – As at 15 December

A total of 66,961 rooms since early March have been released for the period of June through to the end of March 2022.

From early March to present, 169,196 returnees have secured a date to return home during the period of March 2021 through to the end of March 2022.

The next room release is planned for the morning of 16 December and a total of 3341 rooms will be released from December through to the end of March.

### 4.3.2 Self-Isolation Pilot (for approved applicants arriving in NZ between 30 October – 8 December)

This is the final week of operations for the pilot. There have been no arrivals since 8 December. There are currently 8 participants self-isolating in Auckland and 2 in Christchurch.

69 participants have exited their self-isolation to date. The final participants will exit from Christchurch on Thursday 16 December and from Auckland on Saturday 18 December. There have been no incidents in the past week.

The third report back on the Pilot evaluation will be sent on 22 December. It will provide insight into the protocols and participant experience of self-isolation. A final overall summary report back will be delivered on 14 January 2022.

### 4.3.3 MIAS Lobby Release: Travel Documentation Verification

As mentioned in last week's report, on Thursday 9 December MIAS released the 'Travel Documentation Verification' feature (aka ID Verification), which restricts MIAS bookings to only those with the legal right to enter New Zealand. In order to proceed to the room booking section of MIAS, the passenger's passport or visa is checked against DIA or INZ data to ensure they are a citizen or have a valid visa to enter New Zealand.

So far just over 4000 passengers have been successfully verified (86% of attempts), 545 have not passed verification (11.5%), and 118 are not currently eligible to enter NZ (2.5%). These numbers do not include people who are not impacted by this change – those without the current right to enter New Zealand. Prior to attempting verification, users indicate if they hold a current visa/passport to enter New Zealand, and those who don't, do not proceed on to the verification stage.

There has been no media coverage of this change, and very little social media attention.

This week's room release is scheduled for the morning of Thursday 16 December.

### Room Release dates over the Christmas/Summer period:

Please note that these dates may change due to changing circumstances.

Date	Time		
21 December	12PM		
No release for the week starting .	27 December (Christmas break)		
6 January	1PM		
12 January	11AM		
18 January	2PM		
25 January	9AM		

### 4.3.4 MIQ's Role in Afghanistan Evacuation

A total of 921 evacuees from Afghanistan have arrived in New Zealand. The table below shows the MIQ status of the Afghanistan evacuation programme as at 10am Wednesday 15 December:

TOTAL Returnees in MI currently	120	
TOTAL Departed Returnees	801 (excludes births after arrival)	
TOTAL Further Expected Arrivals (prior to Christmas)	27 (estimated)	

The final forecast arrivals before the end of 2021 are expected over the period 20-24 December. Arrangements have been made to manage the arrival of any emergency cases between Christmas and 10 January 2022 through the emergency allocation system. The latest MFAT reporting shows approx. 120 eligible travellers s6(a) in early 2022 and a further 350 eligible travellers s6(a)

Another 300-400

eligible but undocumented travellers are believed to remain in Afghanistan. MFAT has advised that cases related to the recent judicial review will not be treated as part of the Afghan Emergency Resettlement, but the 100 (approx.) visas granted by the Associate Minister of Immigration will be.

The Nesuto post-MIF transition accommodation remains close to capacity, but the impending departure of some people to community housing and the transition of other families to the YMCA means that capacity will

increase by approximately 100 people by Christmas. The provision of cultural and health support for both MIQ and RMS patrons remains stretched, with some staff being stood down over Christmas.

### 4.3.5 Ventilation

Remediation work completed (total number of facilities = 33)	Facilities yet to complete remediation	% of rooms complete within the portfolio of facilities fully signed off
28 completed (17 of which	5	49% (3096 rooms)
are fully signed off)		30

MBIE are tracking to complete remediation work for all but two facilities this year and expect to have a further two facilities fully signed off (bringing the total to 19). Remediation work at the final two facilities is expected to be completed by the end of January 2022.

The re-test results for the Novotel Christchurch Airport have been reviewed and accepted by the VRAG. VRAG have advised that the seven rooms that have not met MIQ preferred conditions should be taken out of circulation. Project Sponsor signoff for the facility will now be progressed. The fire damper work required for code of compliance continues and remains on-track to be completed around 16 December as planned.

### 4.3.6 Air Filtration Units (AFU)

There are around 811 AFUs in stock (to be shared between MBIE and MOH) and the lead-time to get MIQ's units to the facilities is around 2-4 days (depending on location)

AFU's have been to dispatched this week for quarantine rooms at Sudima Rotorua (51) Sudima Christchurch (28) Commodore Christchurch (54).

As part of MBIE's contingency planning for more quarantine facilities across regions, MBIE are confirming the number of AFU's required for the Grand Mercure Wellington should the facility be re-designated for quarantine only.

MBIE are working to confirm the need for additional AFUs at Distinction Hamilton as only 60 of 110 quarantine rooms have AFU's installed.

### 4.3.7 Vaccination of Frontline Staff

For workers on site for the week 6-12 December, BWTR shows that 96.6% had two doses of the vaccine, 2.0% had one dose and the remaining 1.5% (77 workers) had vaccine status 'unknown'.

Of the 77 workers with an 'unknown' vaccination status, 26 still require an NHI match. The Workforce Testing Team is investigating the remaining 51 workers, to confirm vaccination status.

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

Of the 101 workers who were NHI-matched but showing vaccination status 'unknown' in the 29 November – 5 December 2021 weekly report:

- 93 have been confirmed as being compliant with the Vaccination Order;
- 5 appear to be vaccinated and have been passed to the Ministry of Health as potential NHI issues;
- 2 has been vaccinated overseas (just waiting for BWTR to be updated);
- 1 has a Ministerial exemption (vaccinated overseas); and

Vaccination boosters were available from 29 November for anyone who had their primary course of the vaccination at least 6 months ago. MBIE are encouraging workers through our regular communications channels to get their booster shot if eligible. As of today, there are 1,737 MIQF border workers who have had a booster dose.

### 4.3.8 Staff Testing

Reporting from BWTR shows that 5,292 people undertook work in our facilities last week, and the table below shows how many of those workers were compliant with the Testing Order, were overdue for a test or still needed to be NHI-matched.

Compliance remained the same as last week at 90%.

Workers on site 6-12 Dec 2021	Workers on nasal testing regime	Workers on saliva testing regime	Total	Percentage of total NHI- matched workers on site
Compliant NHI-matched workers	2342	2376	4718	90%
Overdue NHI-matched workers	263	283	546	10%
Need NHI-match	28	0	28	
Workers on site	2.633	2.659	5.292	

Of the 546 overdue, 368 of those are less than 4 days overdue, 151 are 4-10 days overdue and 27 are 11+ days overdue. The Workforce Testing and Vaccination team will be following up with these workers to make sure they get tested as required.

We will continue to follow up with workers overdue for tests to make sure they understand the new requirements.

Of the 28 that still need a NHI-match, 12 were created in BWTR in the last 7 days.

In the report for the week 29 November – 5 December, 30 workers were previously reported as '11+ days overdue'. Follow up revealed: 11 of those workers have a swab confirmed; 4 have been instructed to be swabbed; 11 have been contacted and we are awaiting a response, 2 have been escalated to MOH, 1 is an incorrect sign-in and 1 is no longer employed.

### 4.3.9 Saliva Testing

As at 13 December, 4131 MIQ workers are opted-in to saliva testing across all active MIQF sites (an increase of 152 from last week).

### 4.4 Current Judicial Review and OPCAT cases

### 4.4.1 Judicial Reviews

The final pregnancy related judicial review was struck out on 14 December. The only outstanding issue in relation to all cases is costs.

### 4.4.2 OPCAT

MBIE have provided our response to The Crowne Plaza Christchurch final report. MBIE have received the Sudima Christchurch Airport final report which contained no recommendations. MBIE have received the provisional report for the Grand Millennium Auckland, with our response due by Friday 17 December. MBIE have received a request for information regarding complaints that MBIE received between 1 June 2021 and 30 November 2021 in MIQF. MBIE have seen a significant increase in information requests by OPCAT both following up from inspections and more broad information requests at a national level.

### 4.5 Invoicing

The table below shows the number of invoices issued up to 12 December 2021.

Invoices have various repayment terms depending on whether they are a sports group (10 days), critical worker (30 days) or standard returnee/maritime crew/aircrew (90 days).

Grouping	Invoices issued (net of credit notes)	Paid	Issued not due	Issued over due	Invoices issued (\$)	Paid (\$)	Issued not due (\$)	Issued overdue (\$)	90+ days over due	90+ days overdue (\$)
Groups /Temp Visa	6,671	3,884	1077	1,710	\$63,194,138	48,112,413	5,848,838	9,232,887	316	\$1,768,701
Maritime	584	454	55	75	\$2,968,932	\$2,395,443	\$158,427	\$415,061	16	\$41,286
Aircrew	230	217	3	10	\$2,182,956	\$1,838,601	\$225,859	\$118,497	8	\$101,437
Other	29,975	18341	3580	8054	\$102,354,937	\$65,558,347	\$10,383,041	\$26,413,549	3519	\$11,266,007
Total	37,460	22,896	4,715	9,849	\$170,700,963	\$117,904,805	\$16,616,166	\$36,179,993	3,859	\$13,177,431

\*Groups has only previously included sports groups, critical workers and critical Health Workers. However, going forward this now includes temporary visa holders as this aligns more to the categorisation of Critical workers i.e. same fee charging structure.

Note: the '90+ days Overdue' column represents the number of invoices from the 'Issued overdue' column that have been outstanding for 90+ days.

### 4.5.1 Debtor Statement Issue

As reported last week, there was an issue with MIQ statements being emailed to returnees in error. The MIQ Debt Officer team has been triaging emails that have been received because of the Statement Issue and the resulting retraction email. An investigation has been completed to address the issue and controls have been implemented so that this issue cannot occur again.

### 4.5.2 Fees Collection

Invoicing is now up to returnees leaving MIQ on 9 November. MBIE are two weeks behind where MBIE would normally be, due to implementing changes for the self-isolation trial and 7-day MIQ stays.

MBIE are awaiting approval on the treatment of Afghanistan returnees, due 14 December. Aircrew invoicing is awaiting the last set of data to process September/October invoices. MBIE have started invoicing arrivals on small maritime craft and are up to the end of October 2021. Invoicing will be paused over the holiday period from 24 December and will re-start on 5 Jan.

The backlog solution continues to progress, as the process to email returnees from August 2020 has begun with emails sent to returnees up to 28 December 2020. This has led to 1232 invoices sent so far valued at \$4.0m. Due to the low quality of data so far, a significant proportion of emails produced by the system do not have a known email address, though this has improved as we move through the months. MBIE are working through identifying valid email addresses where we can with certainty. Once we have processed up to 24 March 2021, MBIE will need to review the remaining invoices that were not able to be sent.

### 4.5.3 Debt Recovery

Of the now 1,610 invoices worth \$5.178m sent to a debt collection agency:

- \$978k (up \$58k, 19%) has been paid (or will be paid through instalment)
- \$634k is currently awaiting information from customers or has been credited due to an error
- a further \$1,623k (this includes the Gone no address/overseas category) requires more detailed tracing
- \$394k currently have waiver applications under assessment
- the remaining \$1,549k debt continues to be a work in progress.

To assist with collections and in turn improve the debt Recovery % we provide debt at 30+ days outstanding to our partner firm

- 3,302 invoices worth \$12.125m has been passed to our partner and to the week ended 12/12/2021 \$1,814k has now been paid (Up \$233k).
- An additional \$714k of debt is under instalment and is expected to convert to payments received over the coming weeks.

Of the invoices sent, 598 returnees with invoices totalling \$2,068m have now submitted wavier applications. While applications are processed, they appear as outstanding debt.

### 4.5.4 Weekly Average Invoicing and Debt Recovery at 77%

The table below reflects the weekly average of invoicing, from 11 August 2020.

The debt recovery percentage, factoring in all repayments to date against just overdue invoices is tracking at 77% (no change from last week), against the FY22 target of 90%. Against all invoices raised, the debt recovery percentage sits at 69% due with just over \$16.6m of outstanding invoices which have not fallen due yet. There has been a movement in overdue invoices due to the new invoicing process going live over 90 days ago and the increase in invoicing from then onwards increases the outstanding amount as invoicing is brought up to date.

Recent Weeks	Average invoicing per week (\$)
Past week	2,219,210
2-4 weeks	3,436,391
5-8 weeks	3,836,708
9+ weeks	2,122,676

### 4.5.5 Waivers

The table below breaks down the waiver application information between 11 August 2020 and 5 December 2021. The numbers below relate to all waiver applications; waivers can be applied for before, during and after an individual has stayed in managed isolation.

Waiver In Total Fina Applications Progress Completed Har			Approved W	aiver Applications	Declined Waiver Applications			
	Hardship Applications		Financial Hardship	Special Circumstances	Financial Hardship	Special Circumstances		
12196	4914	7282	969	6313	88	5337	881	976

### 4.6 Upcoming Communications Issues and Activities

### 4.6.1 As at 15 December:

Date	Activity	Lead agency Comms material		Ministerial Involvement Y/N
Monday 20 December	Christmas in MIQ	MIQ	Press Release. Chris Scahill is available for interviews.	N
Tuesday 21 December	Lobby Release	MIQ	Proactive comms	N
Tuesday 21 or Wednesday 22 December	Self-Isolation Information and MIQ Budget for 2022	MIQ	Proactive comms	Y
6 January	Lobby Release	MIQ	Proactive comms	N

# 4.7 Large Group Arrivals Update

Summary of approved group arrivals as of 14 December 2021 (to March 2022)

Date of Arrival	Allocation Approved	Final number of rooms allocated	Comments
Dec 2021	60	26 (41 pax)	Arrivals are spread across the month.
6 Dec	13	8 (13 pax)	Numbers per arrival window will increase in 2022 with
10 <u>Dec</u>	4	2 (4 pax)	the aim to reach the quota for the FY 21/22.
Dec tbc	38	19 (38 pax) tbc	
31 Jan – 13 Feb	130	70 tbc	Note that arrivals under the Refugee Quota will not
14 – 27 Mar	120	60 tbc	meet the medium risk pathway requirements as unable
25 Apr – 8 May	130	70 tbc	to confirm vaccination status.
6 Dec	33	12 (33 pax)	The final planned arrival of evacuees for 2021 will be
8 Dec	1	1 (1 pax)	w/b 17 December. Arrivals will then resume from 10
9 Dec	3	3 (3 pax)	January 2022. This stand down period is required due
11 Dec		8 (22 pax)	to scarce resources required to provide the necessary
12 Dec	2	2 (2 pax)	wrap around support during their managed isolation
17-19 Dec	50	40 (50 pax) tbc	stay, and for resettlement. Emergency cases will be
From 10 Jan 2022	962	684 (962 pax) tbc	accommodated during this period.  Expected numbers from January 2022 include 120 to arrive from w/b 10 January, 362 who will make movement \$6(a), a further 300-400 undocumented travellers, and 70-80 as a result of the
		0	INZ judicial review.  Note that Afghanistan Evacuee arrivals will not meet the medium risk pathway requirements as unable to confirm vaccination status.
7 Dec 2021	11	11 (11pax)	
27 Jan	16	16 tbc	
29 Jan	44	44 tbc	
3 Feb	45	45 tbc	
5 Feb	75	75 tbc	
26 Feb*	44	44 tbc	
12 March*	25	25 tbc	
Dec	25	19(23pax)	
Jan			2000 NO AL 1900 MAY
Feb*	90		Arrivals are spread across the month.
	1000	122011000	
9 Dec 2021	35	28 (31 pax)	The team has arrived, and exemption enacted 13 December.  The BlackCaps will depart on day 7 to undertake self-
			isolation at home in line with the new short stay model.
14 Dog	11	11	isolation at nome in line with the new short stay model.
		100000000000000000000000000000000000000	
	1000	Distribution of the second of	
23 Feb*	80	80 tbc	
10 Dec	35	32	The team has arrived and ten of the travellers have been identified as close contacts of a border case. The Medical Officer of Health is providing advice on what this means for the team in terms of training, moving into self-isolation and where they are best to complete their day 9 test.  NZC have provided a self-isolation plan to MoH and have confirmed they will assume all responsibility for the team during this period. MBIE will only be responsible for the transfers and training period at the
	Dec 2021 6 Dec 10 Dec Dec tbc 31 Jan - 13 Feb 14 - 27 Mar 25 Apr - 8 May 6 Dec 8 Dec 9 Dec 11 Dec 12 Dec 17-19 Dec  7 Dec 2021 27 Jan 29 Jan 3 Feb 5 Feb 26 Feb* 12 March* Dec Jan Feb* March*  9 Dec 2021 20 Jan 23 Feb*	Dec 2021   60	Date of Arrival   Approved   Final number of rooms allocated

Group	Date of Arrival	Allocation Approved	Final number of rooms allocated	Comments				
	20 Dec	65	65 (65 pax)					
	10 Jan	170	170 (170 pax)	These arrivals are for the combined US Antarctic				
Antarctic	19 Jan	36	36 tbc	Programme (USAP) as well as the Italian, French				
	4 Feb	13	25 tbc	German and Korean programme.				
Programme	7 Feb	25	7 tbc	German and Korean programme.				
	14 Feb*	12	12					
Cricket: South Africa	4 Feb	35	35 tbc	Engagement with NZC is underway. The team are seeking an exemption to train. Working with MoH and NZC on the implications of South Africa being on the very high-risk countries list – they will be unable to travel direct to NZ from South Africa unless a Ministerial exemption is granted permitting this.				
Netball: Silver Ferns	21 Jan	24	24 (TBC)	No training.				
MILLIONALPO ANCIETTA DE	Dec	20	0 (0 pax)					
Ministerial Travel	Jan	20	tbc					
	Feb	20	tbc					
Sports and Culture	Dec	40	8					
Sports and Culture	Jan	40	2(4 Pax) tbc					
	1-14 Dec	150	42 (62pax)					
	15-31 Dec 21	150	38 (48pax)					
	1-14 Jan 22	150	67 (104pax) tbc					
MoH Allocation	15-31 Jan	150	48 (77pax) tbc	Arrivals are spread across the month.				
	1-14 Feb	150	18 (30pax) tbc					
	15-28 Feb	150	3 (5pax) tbc					
	11- 4 Mar	150	3 (4pax) tbc					
Cricket: Women's C	ricket World Cup							
Officials	Feb	405	tbc	Working through implications of South Africa being a very high-risk country.  Border Ministers agreed an increase to the group allocation to accommodate the other critical CWC attendees in MIQ (approx. 405 pax).				
India	24 Jan	31	tbc	India is seeking a training exemption.				
South Africa	Feb	31	tbc	Control of the Control of Control				
Pakistan	Feb	31	tbc	For the remaining teams, Border Ministers have agreed teams can enter MIQ even if they meet the medium-				
Bangladesh	Feb	31	tbc	risk pathway, and to increase to the group allocation to				
West Indies	Feb	31	tbc	accommodate the Australian and English teams.				
England	Feb	31	tbc	The majority of teams will enter MIQ from the 14th				
Australia	Feb	31	tbc	February onwards. CWC are aware that this may mean these teams cannot train, but this will depend on the outcome of the groups and self-isolation paper which proposes a revised approach to training for teams who meet the medium risk pathway and other criteria				
Cricket: Netherlands Men	7 Mar*	35	Tbc	Engagement with NZC has begun. The team is seeking an exemption to train. Under the medium risk pathway this team will be eligible for self-isolation. NZC are beginning to consider what this means for the team and what it might look like so they can begin planning for their arrival.				

 $<sup>^*</sup>$ These arrivals will fall under the new medium risk pathway.

### Time Sensitive Travel (TST)

Applications for arrivals in March/April 2022 opened on 13 December. Given the recent announcement regarding changes to border settings, we anticipate application numbers will be low.

The following table provides information on the January / February arrival period:

Applications Received	Applications Approved (+family)	Applications Declined (+family)	Referred to MoH	Applications Withdrawn to date** (+family)	Rooms Required
431	276 (32)	2 (1)	34	107 (12)	247

In the month of November 338 travellers were approved for 296 rooms – due to withdrawals\*\*, this translated into 158 actual arrivals requiring 132 rooms.

### 4.8 Emergency Allocation Applications

8113 applications have been processed since 30 October 2020. 216 applications were received in the week ending 12 December 2021 and 156 applications were processed. Of the 156 applications processed in the week ending 12 December 2021, 85% were approved.

Emergency Allocation Applications	Weekly Totals 29 November to 12 December 2021	Year to Date Totals 30 October 2020 to 12 December 2021
Approved	133	4818
Declined	23	3295
Applications processed	156	8113

<sup>\*</sup>These figures only include completed applications, with all supporting evidence, which were received within the required timeframes, which have been decided by a decision marker.

Total Rooms Approved Under Emergency Allocation from 6 December to 12 December	144
Rooms allocated in MIAS	113
Awaiting flight details or MIAS registrations from the applicants to complete the room allocation process	31

<sup>\*\*</sup>Withdrawn applications can happen prior to and post approval for a range of reasons including vouchers being secured via the lobby, or a change of plans.

# 5. Border Executive Board Report



### 5.1 Key Issues Being Considered

### 5.1.1 Border Executive Board

The Border Executive Board met on 15 December 2021.

The Board considered the six monthly update to the passenger and cargo volume scenarios to November 2021. It was noted that these are slightly more pessimistic than the scenarios tabled in May as they reflect tighter travel restrictions. The Board discussed the sensitivity of the scenarios to travel restrictions. Overall, the Board found the scenarios useful and endorsed them being used for performance and planning activities of border and transport agencies. The next full update of the scenarios will be carried out around June/July 2022, but in the meantime, the BEB has asked for a weekly report of actual air passenger volumes against the scenarios.

The Board endorsed the establishment of a Border Forecasting Network. The multi-agency Network aims to provide a consistent source of forecasting and modelling of passenger, vessel, and cargo volumes that can be used by border agencies and members of the Reconnecting New Zealanders Programme. Activity will be qualitative and quantitative. Membership consists of: Transport, Primary Industries, Customs/Joint Border Analytics, MBIE, and DPMC's COVID-19 Insights team.

The Board spent time discussing preparations to re-open the border on 17 January 2022 with a focus on end-to-end compliance with day 0/1 testing. Having sufficient capacity at the airport to enable a high uptake of testing before travellers leave the terminal remains a challenge and is being worked through. The Board supported setting clear expectations with travellers and making compliance as easy as possible. Technology options to support this include utilising the Ministry of Health's electronic system Nau Mai Rā that was used for quarantine free travel. It was agreed that multiple points and forms of communication with travellers will be needed. The Board supported keeping in regular contact with Ministers to align expectations as preparations will be iterative.

The next formal Board meeting is scheduled for 26 January 2022, however, specific meetings are being scheduled through the next week and then from the week of 3 January 2022 in the lead up to the current planned reopening of the border on 17 January 2022.

### 5.1.2 Reconnecting New Zealand: Maritime

On 14 December 2021, Government officials from a number of agencies met with representatives from a variety of cruise lines to discuss the key considerations for reopening New Zealand to cruise lines. The purpose was to provide the cruise industry with an overview of the factors that would need to be considered for reopening, and to hear from the industry on the steps taken by international cruise lines to protect passengers and destination ports from COVID-19, and to start planning for work on options in 2022.

Maritime New Zealand chaired the meeting, supported by Customs, Ministry of Transport, Ministry of Health and the Ministry of Business, Innovation and Employment (Immigration and Tourism).

The meeting was useful and highlighted the range of complex issues that will need to be carefully considered before cruise lines could safely operate in New Zealand again. Officials have been explicit with the industry that the earliest reopening date could be October 2022, and there is considerable work to be done before Government could be assured that cruise lines can operate safely. It was apparent that major international cruise lines have done a lot of work on prevention and protection, but there remain risks that would need to be mitigated before New Zealand could safely reopen.

Maritime New Zealand will lead this stream of work, supported by Customs and other agencies. Customs is chairing a Senior Officials Group overseeing work on reopening and COVID policy for all maritime streams, including commercial, small craft, and cruise. An initial report on the work needed for Reconnecting New Zealand in the maritime environment will be provided to Ministers in early 2022.

# 6. New Zealand Customs Service Weekly Report



### 6.1 Items to Note/Updates

### 6.1.1 Maritime

### **Vessel Valentine**

As reported last week, the roll on/roll off ferry *Valentine* departed from the United Kingdom on 11 November 2021. On 6 December 2021, Customs was advised that there was a crew member on-board with COVID-19 symptoms.

On 14 December 2021, the vessel arrived at the Port of Wellington and all crew members were tested. The crew members, including the individual with symptoms of COVID-19, have all returned negative COVID-19 test results. The vessel has now been deemed as green and meeting low risk indicators.

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

For the period 6 December 2021 to 12 December 2021, there were two infringements issued to passengers whose vaccination documentation showed that their 2nd vaccination was administered less than 14 days before their departure to New Zealand.

- On 7 December 2021, a \$4,000 infringement was issued to a passenger arriving direct from Brisbane.
   The passenger stated they were unaware of the 14 day requirement for the 2nd vaccination.
- On 12 December 2021, a \$4,000 infringement was issued to a passenger arriving from Pakistan via Dubai. The passenger was aware of the 14 day requirement for the 2nd vaccination.

	Date	6 Dec	7 Dec	8 Dec	9 Dec	10 Dec	11 Dec	12 Dec	Week Total	%
	Non-NZ citizens	161	354	98	134	306	428	123	1604	
Primary	Vaccination status verified	103	287	81	111	291	384	93	1350	84.1%
Actions	Exceptions	56	64	15	20	15	37	27	234	14.6%
(Passport	Exemptions	1	0	0	0	0	4	2	7	0.5%
Control)	Referred to Secondary Area	1	3	2	3	0	3	2	13	0.8%
Secondary Area Actions	Compliant	1	2	2	3	0	3	1	11	92.0%
	Non-compliant	0	1	0	0	0	0	1	2	8.0%

### 6.1.3 Pre-Departure Testing

For the period 6 December 2021 to 12 December 2021, there was one warning issued as follows:

 On 10 December 2021 a 3½ year old child arrived from the UK via Los Angeles with no PDT documentation. A warning was issued to the accompanying parent.

	Date	6 Dec	7 Dec	8 Dec	9 Dec	10 Dec	11 Dec	12 Dec	Week Total	%
	Passengers subject to PDT	395	458	356	403	345	509	375	2841	
Primary Actions (Passport Control)	Test Certificate Verified	387	444	343	378	333	489	359	2733	96.2%
	Exemption	8	14	13	23	11	18	16	103	3.7%
	Referred to Secondary Area	0	0	0	2	1	2	0	5	0.2%
Secondary Area Actions	Compliant	0	0	0	2	0	2	0	4	80.0%
	Warned	0	0	0	0	1	0	0	1	20.0%
	Infringement	0	0	0	0	0	0	0	0	0
	Prosecution	0	0	0	0	0	0	0	0	0

### 7. COVID-19 Chief Executives Board

### 7.1 Items to Note/Updates

The COVID-19 Chief Executives Board (CCB) held its final meeting of the year on 14 December, 2021. Discussions encompassed the nature and quantity of legal orders, emerging arrangements for compliance and enforcement, and updates on readiness for the next phase of the response. The next meeting of the CCB will be on 25 January, 2022.

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

### 8.1 Items to Note/Updates

The COVID-19 Independent Continuous Review, Improvement and Advice Group held their last regular meeting of the year on 14 December, 2021. In addition to the standard Reconnecting New Zealanders update and discussion, Sir Ian Taylor spoke to the Group about his experience as a part of the self-isolation pilot and the privately funded #151 Off The Bench trial. The Group also discussed ideas for priorities in the new year. Sir Brian Roche was also interviewed by Kathryn Ryan on Radio New Zealand's Nine to Noon programme on 14 December, 2021.

# 9. Strategic COVID-19 Public Health Advisory Group

### 9.1 Items to Note/Updates

The Strategic COVID-19 Public Health Advisory Group held its last meeting of the year on 15 December, 2021. Participants welcomed Rodney Jones to discuss international trends in the pandemic, with an emphasis on gauging the transmissibility and virulence of the omicron variant. Attention subsequently turned to finalising the latest advice from the Group, which concerns key scenarios for 2022 in vaccination, treatments, public health and social measures, and the evolution of the virus. The next meeting for the Group will be on 26 January, 2022.

### 10. Business Leaders Forum

### 10.1 Items to Note/Updates

The Business Leaders' Forum did not meet this week. The next meeting for the Forum is yet to be confirmed.

# 11. Community Panel

# 11.1 Items to Note/Updates

The Community Panel did not meet this week. The next meeting for the Community Panel will be 2 February, 2022

# 12. Government Modelling Group

# 12.1 Items to Note/Updates

There is no update to report from the Government Modelling Group.



<sup>22</sup> Department of the Prime Minister and Cabinet. COVID-19 Response Group. Insight of Note – COVID-19 False Information, Reports to CERT NZ during the August/September Community Outbreak. 12 September 2021 [IN-CONFIDENCE]

<sup>23</sup> CERT NZ via Ministry of Health. False information reporting data from 15 Sep to 5 December 2021. Received on 8 December 2021. [RESTRICTED]

<sup>24</sup> Ministry of Health. DRAFT Communications approach for managing COVID-19 disinformation, online harm and scams. 10 December 2021. [RESTRICTED]

<sup>25</sup> New Zealand Police, National Intelligence Centre, Social Discord and Its Long-Term Implications, 6 December 2021, [RESTRICTED]

<sup>26</sup> New Zealand Police. National Intelligence Centre. Social Discord and Its Long-Term Implications. 6 December 2021. [RESTRICTED]

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<sup>37</sup> Stuff NZ. COVID-19 signs on cafes welcoming 'vaxed and unvaxed' may look official, but they're not. https://www.stuff.co.nz/national/health/coronavirus/127075707/covid19-signs-on-cafes-welcoming-vaxed-and-unvaxed-may-look-official-but-theyre-not (Accessed 15 December 2021)

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<sup>&</sup>lt;sup>7</sup> Telegram. Voices for Freedom Profile Preview. https://t.me/voicesforfreedom (Accessed 13 December 2021)

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