

**POST-CABINET PRESS CONFERENCE: TUESDAY, 26 JANUARY 2021  
HANSARD TRANSCRIPT**

**PM:** Kia ora koutou katoa. Good afternoon, everyone. Today, we'll start with a COVID update specifically focusing on latest developments and information coming from Northland. We'll then move to an update on vaccine approval and rollout, following which we'll be very happy to take questions. The current Northland COVID case is a situation that is very obviously unwelcome but also that we have prepared for. The global pandemic continues to rage around the world, and as we have experienced before, from time to time we will be reminded of that pandemic and just what a tricky virus COVID-19 is, even with our very best efforts. What is important is our response to incidents like this and, of course, what we learn from each incident so we can do our best to try and prevent it from ever happening again. On that note, I'll hand over to Minister Hipkins to give you some of the latest.

**Hon Chris Hipkins:** Thank you, Prime Minister. I'm pleased to report there are no new cases in the community to report today. Sixteen people have been identified as potential close contacts of the previously reported case in Northland. Of those, 15 people have already returned their negative tests; one test result is still pending. Contact tracing staff are following up with 357 people who departed the Pullman managed isolation facility between 9 and 24 January. Of that number, 325 have been contacted, they are isolating, and they have been or will be tested. The remaining former guests are being followed up today. A total of 157 staff from the managed isolation facility at the Pullman hotel have been tested, along with 192 guests currently in the facility, with around 30 test results still to come—all of the others have returned negative results. A hundred and eighty-seven people have received push notifications as a result of having scanned into one of the locations of interest. At this time, 154 people have been identified as "casual plus" contacts, either as a result of push notification or because of a conversation that they have had with Healthline as a result of media publicity. They are all isolating, pending test results. The investigation into the source is still continuing, and that includes the review of CCTV footage and so on to try and identify how the transmission between the two people may have occurred.

We have had a number of calls to Healthline asking for the definitions of "casual" contact and "casual plus" contact—sorry, "close" contact and "casual" or "casual plus" contacts. I want to share that now. A close contact is someone who's more likely to be at higher risk of being infected because they have spent time in close proximity to a confirmed case during the case's infectious period. A casual or a casual plus contact is someone who's had only limited exposure to the confirmed case, usually because they have been in the same location as the person of interest at the same time. So that is the distinction. So the close contacts are the ones that we focus urgently on; casual and casual plus contacts are much lower risk, but there's still some risk, so we do work hard to try and identify those and ensure that they are tested. I can confirm that yesterday more than 1,500 people were tested at community testing centres around the Northland region, and the Northland DHB informs us that, on a testing per thousand basis, Māori were tested on a far greater proportion than any other ethnicity during that time.

We are experiencing delays in testing. I want to remind people: if you are not a close contact, a casual or a "casual plus" contact, and you're not showing symptoms, please don't line up for testing, because it's preventing the people who are more at risk and who we do need to get tested from being able to access those tests. If in any doubt about whether or not you should seek a test, please call Healthline. If you're not showing symptoms, if you're not on that identified list of people who may be more at risk, call Healthline if you have questions or want any further information.

That's about all I have to update—oh, we have seen a significant increase in COVID Tracer app usage, as you might expect, including new people signing up for the app who have not

been using the app before, and I'm hoping—I just haven't got the exact numbers, and I'll release those as soon as we have the confirmed numbers of that.

**PM:** Thank you, Minister Hipkins. Now, Minister Hipkins and Dr Ashley Bloomfield will continue to provide updates, but can I add my voice to theirs in reminding people again to scan in everywhere they go but to also turn on the Bluetooth tracer function as well. It's come to my awareness over the summer break that some people, unfortunately, are under the misapprehension that if they turn on the Bluetooth function, they no longer need to scan. That is not the case. The Bluetooth function will enable your phone to identify if someone else with the Bluetooth function is in close proximity who may, in future, test positive. And that's how we can ascertain whether or not you're a close contact. The tracer function allows us to find out where you have been. So they are two different functions. We want them both to be working optimally. So please do both. Scan everywhere you go. And so that was just another chance for me to clarify that little piece of information.

Fittingly, today Minister Hipkins and I also have a vaccine update to share, but first I'll quickly outline some of the further activity for the week ahead. As you will know, the issue of climate change is a priority for this Government and an area where we are working also very closely with our Green Party colleagues. On Thursday, Ministers—particularly including Transport Minister Michael Wood—and representatives from the Greens and I will be in Auckland, alongside business, to give an update on transport-related initiatives as it relates to climate change. As you'll know, we are expecting advice from the Climate Commission shortly, which we will take some time to consider, of course, before we see those final results around the Climate Commission's recommendations fully presented and published, but I fully expect that their draft recommendations to us will underscore the need for us to ramp up our activity well beyond the foundations we laid in our first term in office.

Now, back to today. At our first Cabinet meeting for 2021, Ministers received an update on the COVID-19 immunisation strategy and programme. I am pleased to be able to say that we are continuing to make swift progress as we prepare to vaccinate New Zealanders against the virus while also maintaining our very strong commitment to ensuring vaccines are safe and effective. We can do both in a timely way, and we are. As part of this, next Tuesday, Medsafe will seek advice and recommendations from the Medicines Assessment Advisory Committee around the Pfizer vaccine. The ministerial expert advisory committee will then review Medsafe's assessment, and, depending on feedback, Medsafe could then be in the position to grant provisional approval as soon as the following day, which would be Wednesday, 3 February. In the event Medsafe may require further information from the pharmaceutical companies, or if for any reason there may be a delay in their time line, we still expect our regulatory approval process to be complete before vaccines are ready to be dispatched to New Zealand. This means we expect there won't be any hold up, and we'll be able to take delivery of our first batch of vaccines as soon as Pfizer is able to send them.

Our first focus will be vaccinating our border and managed isolation and quarantine workforce and their close contacts. Once the vaccine arrives in New Zealand, we expect to be able to complete vaccinating this group within two to three weeks. We will then, as vaccines arrive, move progressively through priority groups, with a mass vaccination campaign likely to begin from mid-year. That will be the start of New Zealand's largest ever vaccination campaign, and that will take some time. But, of course, as we've said, the most important thing is when we finish, not when we start. Immunising our border staff, for instance, will provide a line of defence to them personally but may not necessarily stop lines of transmission, which is why those controls will still be so necessary. Also, New Zealand will only truly feel like it has returned to normal when there is a certain level of normality in the rest of the world too. But, given the risks in the world around us and the uncertainty of the global rollout of a vaccine, we can expect our borders to be impacted for much of this year.

For travel to restart we need one of two things: we either need the confidence that being vaccinated means you don't pass COVID-19 on to others, and we don't know that yet, or we need enough of our population to be vaccinated and protected that people can safely re-enter New Zealand. Both possibilities will take some time. In the meantime, we will continue to

pursue travel bubbles with Australia and the Pacific, but the rest of the world simply poses too great a risk to our health and our economy to take the risk at this stage. Our team of 5 million worked too hard last year for us to risk any of the gains that we have made—health gains that see us going about our daily lives pretty much as normal and economic gains which saw the economy bounce back strongly from the initial shock. We need to remain unified. We showed last year how good we are at that, and that's exactly what we intend and need to do for 2021.

Finally, before I take questions, I want to note the signing ceremony that is taking place virtually as I speak to make the China - New Zealand free-trade agreement upgrade official. I know trade Minister Damien O'Connor is sharing more details about this, but I want to echo his sentiment that China remains one of our most important trading partners and to share his acknowledgment of this modernisation of the free-trade agreement we share. For this to take place during the global economic crisis brought about by COVID makes it particularly important.

We're now happy to take questions.

**Media:** Prime Minister, what was your reaction when Scott Morrison called last night, and how frustrating is it?

**PM:** I certainly expressed disappointment that that decision had been made. I conveyed the confidence that we have in our systems but also just acknowledged that, if we are to enter into a trans-Tasman bubble, we will need to be able to give people confidence that we won't see closures at the borders that happen with very short notice over incidents that we believe can be well managed domestically. You know, we're seeing the impacts of that decision on travellers. We need to have some confidence, if we're in a trans-Tasman travel arrangement, that we won't see decisions that impact people when it may not be necessary.

**Media:** Has he overreacted?

**PM:** Look, ultimately it is a decision for Australia, and I need to acknowledge that, but I certainly shared my view that this was a situation that was well under control, that we have had experiences in New Zealand with these situations in the past, and that, actually, if we're going to run a trans-Tasman arrangement, we need to be able to manage situations like this.

**Media:** Do you still believe that a two-way trans-Tasman bubble can be achieved in the first quarter?

**PM:** Look, we are continuing to pursue it, but what we will need to establish is a way that we can have that arrangement but without seeing such disruption over events that may happen from time to time. Look, it does look increasingly difficult at a country-by-country level—we haven't ruled out the possibility of state by state—but, again, I know many people will have been frustrated by the impact that has been had on their travel.

**Media:** Is there feeling that that is a threat to opening that bubble?

**PM:** No; no, not at all. I mean, actually, you know, what we've demonstrated with the Cook Islands is an ability to progress these arrangements where on both sides you've got a pretty common approach to COVID. One of the challenges is that not every state has the same approach as New Zealand, and so that difference in the way different states are managing does add a level of complication.

**Media:** Has there been any discussion or would you give consideration to blocking or restricting people coming from countries like the UK or South Africa to New Zealand, given the new variants, as other countries like the US are potentially looking at?

**PM:** Well, actually, I think here we need to be really clear: from what I've seen, no country that I've found has ever barred their citizens from being able to return to their country of citizenship, because, if you do that, you're, essentially, leaving your own people stateless. What many countries are doing now, though, is playing catch-up with the policy that New

Zealand's had for a long time, which is to say that only permanent residents and citizens, generally without exemption, are able to enter into the country.

**Media:** You've already put, obviously, the pre-testing and that sort of thing in, but would you consider stronger measures—I don't know, a longer quarantine or, you know, being much more specific about who can come here—if it comes to that, because of these variants?

**PM:** Yeah, and so the first thing I think we should acknowledge: you know, as you've heard scientists talk about, viruses mutate, and this is why we will need to, in the long run, have an approach to COVID much like the management—once we have that mass vaccination programme—much like we do with the flu, where we're continuing a rolling vaccination campaign based on the fact that it will change, because that's what a virus does. Secondly, in terms of additional restrictions, you've already seen we've widened the use of N95 masks, we've added pre-departure testing, we've got new protocols around people leaving their rooms pre-testing—we are constantly looking at what we can do to create further restrictions and protocols to protect people, both in our facilities but also in our wider population. But you would be hard-pressed to find anyone with more stringent measures than we have at our border.

**Media:** Has there been any update on the ventilation or the Pullman about how the infection was transferred?

**Hon Chris Hipkins:** At this point, we still don't have an update on the specifics of how it was transferred. I think, as I set out yesterday, the two cases of concern were in rooms that were more or less opposite one another in the hallway. The advice that I've had so far is that ventilation, whilst possible, is still one of the less likely potential avenues of transmission between the two people; it's more likely to have been via a surface or via them, you know, being in the same place within a short space of one another, rather than through, say, air conditioning transferring it between rooms. But work is being undertaken at the Pullman as we speak, looking exactly at those issues around ventilation. There's a full infection prevention and control audit happening there; that started this morning. That's the next of the regular reviews that we do, but it's been brought forward just to speed that up to give that extra level of comfort.

**Media:** Minister, have you seen the reports out of Germany around the AstraZeneca vaccine, which we've also ordered, suggesting that German Government sources say that it's extremely ineffective for over-65s, and do those worry you?

**Hon Chris Hipkins:** Look, we've bought a portfolio of vaccines, because, of course, all of these vaccines are new in their development, and at the time we were taking decisions around which vaccines to purchase, we made sure that we had a diversified portfolio so that, as the evidence base becomes more robust about which of their vaccines are more effective for which population groups, we will have options.

**Media:** Do you regret not negotiating a pre-purchase agreement for Moderna? That seems to be one of the more successful vaccines.

**PM:** Keeping in mind Moderna is an mRNA vaccine, we were always looking to have a diverse portfolio so that, if we found there was—you know, that one particular vaccine was more effective for certain population groups than others, that we had that range. Pfizer sits within that same category; so Pfizer fulfils that mRNA category of vaccine and also, of course, has been often talked about as being a highly effective vaccine.

**Media:** Is it possible that you'd buy more Pfizer, then, given you've only got enough Pfizer to cover 750—

**PM:** Keep in mind the COVAX Facility is also another mechanism where we'll meet up to 50 percent of our population immunisation needs through that facility, and that will be on top of—and COVAX, of course, are negotiating directly with different pharmaceutical companies. So that may produce additional options for us, on top of what we already have. Sorry, Minister, anything—

**Hon Chris Hipkins:** Look, just bear in mind that our pre-purchase agreements are just that: they're pre-purchase agreements. We will have other options. Through COVAX, we've got other options, and even through our purchase agreement, we potentially have other options to add, you know, extra shipments in as production ramps up, and so on. So what we have announced is not necessarily the totality of what we will receive.

**Media:** The Australian Government's been frustrated for a while, I think, by the fact that New Zealand is not letting Australians come to New Zealand on the same basis as New Zealanders can go to Australia at the moment, and yesterday's action could be seen in that light, given that we are, basically, having the same kind of outbreak as was seen in Brisbane and other places. Did the Prime Minister of Australia raise that with you, and has he been pressing you at all—

**PM:** Well, actually, you know, one of what I would say is that the issue for—the complexity for New Zealand is that, unlike Australia dealing with just New Zealand, we're dealing with the different approach of multiple states. And there are states that are demonstrating a very similar approach to COVID that New Zealand is, and I would say Queensland is one; Western Australia, obviously, very stringent as well. New South Wales has tended to take a different approach. New South Wales is also a state where we do have, in the past, certainly, a high number of passengers—both inward and outward flows. And so, for us, it's really that scenario planning: how would the trans-Tasman bubble be affected if you had an outbreak in one state where borders were not closed domestically, which still may lead to crossover between states coming then into New Zealand? So that's one of the considerations for us, and that has complicated things for us. We have, and I very openly will say, taken a conservative approach, and I stand by that decision—there's too much at risk—but we will keep pursuing whether or not, within our conservative approach, it's possible.

**Media:** So, within that, is there an option being considered more actively than, say, at the end of last year to have a shorter period of quarantine for people coming from Australia? And secondly, why are we still putting people who are coming from Australia in the same quarantine hotels as people coming from other countries, who are clearly a greater source of risk?

**PM:** Yep. So I'll let Minister Hipkins pick up on the second point, because there's a lot of difficult logistics that sit around that. Around shortened quarantine periods, you're right to point out that it is something that we considered, given the risk profile of Australia. What you would still need to do though is, if you were to do that, you'd have to have separate flights, and Australia is a transit route. So that's one additional factor. You would want to have separate facilities. And, in amongst the conversation, we were already talking about whether or not we could move to a trans-Tasman arrangement in its totality. So that overtook some of that other work. So, speaking very frankly, we considered it. It looked like it was going to take quite a bit to arrange and that we may be in the position of a trans-Tasman bubble anyway.

**Hon Chris Hipkins:** Just in terms of the overall allocation of space within our managed isolation facilities, I think one of the key risks that we have to manage here is that getting to New Zealand from anywhere in the world at the moment is a complex web of travel for anybody, and it's a bit of a melting pot out there in terms of COVID-19, because you'll have—any plane landing in New Zealand is likely to have passengers on it from a variety of different locations. We do try and keep people from the same plane in the same facilities, as much as we can, but that's a complex exercise. So, look, we're always looking at how we can refine that better, how we understand the risk of different flights coming in more, so that we can respond to that, but it's not cut and dry. There's no very simple answers here.

**Media:** So is the possibility of flights that are only from Australia and aren't transit flights alive?

**Hon Chris Hipkins:** I think, as the Prime Minister's indicated, you know, once we can get to sort of a greater distinction between green flights and red flights—the sooner we can do that the better. There's still issues around the airport—making sure that we're treating green

flights very differently to red flights at the airport in terms of the land side part of processing those passengers. We've been working with Auckland International Airport around that so that, at such time as we're ready to hit the go-live button our green flights, we will be able to completely separate them from the red flights.

**Media:** Have you received advice yet on whether it's wise to restrict the movements of returnees after that day-12 test?

**Hon Chris Hipkins:** No, I haven't had that yet.

**PM:** Keeping in mind: on release, they are all given advice on what they need to keep an eye out for—keeping track of their movements—and so that really is drilled into people as well.

**Media:** So it's unlikely that you will be, say, limiting someone—

**PM:** No, no, not—I don't want to pre-empt any advice, but I just wanted to make sure that people were aware that that is part of their information pack on departure as well.

**Media:** Do you have any concerns, Minister, about, in MIQ or in the MIQ space, reports that people were being put on buses—people from different flights—and then taken on those buses to exercise in a space away from the MIQ hotel? Sort of that inter-mixing of those bubbles and rooms.

**Hon Chris Hipkins:** A lot of effort does go—I mean, I've looked at this at various points before. If people have a specific concern they want to raise about that, I'm very happy to look at it. People are distanced in the use of transportation whilst they're in MIQ. In some cases, it is a question of it's safer to put them on a bus, distanced from other people—they wear masks, they're washing their hands, they're doing all of those things—and take them somewhere where there is more space, well-ventilated exercise space, rather than trying to arrange something close. In a lot of our managed isolation facilities, we have managed to find facilities where there might be, say, an unused car parking building—where we've been able to use that as exercise space, or those out closer to the airport do tend to have an outdoor area, which we've been able to utilise. But there are a few where we just haven't been able to get an exercise regime that's close to where people are staying.

**Media:** Can you rule out a delay to the vaccine rollout?

**PM:** Can I rule out a delay? I mean, look, what I would say is you will see that we've spoken in very general terms about our expectation of when we will receive our vaccine, because, at this stage, pharmaceutical companies—a lot is changing for them. So what I can give you an absolute assurance around: New Zealand will have its house in order. So we will be ready to receive but, ultimately, we will be in the hands of pharmaceutical companies' delivery time lines.

**Media:** Why were you matching Australia, and are we a victim of our own success in a way?

**PM:** So, look, I think that New Zealanders are grateful for the position we have, but there's no doubt that pharmaceutical companies will be looking at the relative position of countries like Australia and New Zealand, relative to other places, where people are dying every day, in large numbers—and so, yes, that will have an effect. With New Zealand, relative to Australia, though, I still have an expectation that we'll be on very similar time lines. So there's nothing to suggest, at this stage, we won't be; a few days difference in our regulatory approval process, but not by much and not in such a way that will hold up delivery of vaccine.

**Media:** Why weren't we in sync with announcing the Pfizer approval? Why not work together with Australia?

**PM:** We were working—we were very much working together, and that has been the case all the way through. You'll see they announced yesterday, and we've just flagged today that our expectation is that we'll be in a position around 3 February. We do have different

processes. So while we've been working together, we do still have our own process in New Zealand. But they're broadly in line.

**Media:** Why didn't we announce the sign-off together?

**PM:** As I say, we do have our own process. So, while we've been working together, sharing information and so on, we have a process that uses that independent advisory group and so on. We are going to keep with the process we have because it doesn't risk delay for vaccine receipt or roll-out, and it means New Zealanders can have confidence in the vaccines they receive.

**Media:** How are the pharmaceutical companies prioritising different countries? Is it a case of who pays the most or the greatest need?

**PM:** No—well, look, obviously we have an advanced purchase arrangement, and it's not necessarily the case that I'll know the other terms and conditions of other countries. Some vaccines, we know, are working on a non-profit basis, but, in terms of those commercial arrangements, I just couldn't tell you. But what we do know is that they have been factoring in the needs of countries, and that is totally understandable. Do you have something further on that?

**Hon Chris Hipkins:** No, look, we're ready to go, as the Prime Minister's indicated, when we get vaccines. I do want to be really clear here: it's likely that we will get our early shipments in smaller numbers and then that will ramp up as the year progresses. That works with our timetable, which is that we are going to be really focused on those higher risk people first—so our border workers, their close contacts, those who are involved in the testing process, for example; we are well geared up and ready to do that, once the approvals have come through, just as soon as the vaccines arrive in the country. And then we will be looking to ramp up as the year progresses.

**Media:** On going up to Waitangi, what would need to change in the current situation with the Northland case for you to cancel those plans?

**PM:** Look, there's been no change in our alert level system, and that's really the guidance that we put out to regions and the country about whether or not there may need to be any effect on large-scale events and gatherings. And so I just keep pointing people to that system; there's been no change. Ultimately, organisers will make their own decisions around how they'll operate, but we continue to just encourage everyone across New Zealand: keep scanning, keep washing your hands, get a test if you're sick.

**Media:** Why do you keep saying that we're broadly in line with Australia when they are about a month ahead of us—

**PM:** In what regard?

**Media:** —in their planned rollout of vaccines? And also, Minister, have you had any response from Pfizer yet on your request to have an early vax for the border workers?

**Hon Chris Hipkins:** We're still in discussions with Pfizer about a delivery schedule for the vaccines that we have ordered in the first quarter. Those discussions are ongoing; they're useful, they're productive. I'm optimistic, but I'm not going to go out there—I think, as I've said before—and put a timetable on this until I am absolutely certain of when I think we're going to get the delivery. What I'm saying is: if our delivery came earlier than the timetable we've set out, then we will make sure we're ready to go earlier. I am expecting our first shipments of the Pfizer vaccine to arrive at broadly the same time as the first shipments that arrive in Australia.

**PM:** Yeah, so that's why we keep saying "broadly in line." Australia has not received the vaccine yet; New Zealand hasn't either. There's nothing to suggest, though, that we will be receiving them with great distance between receipt of those products.

**Media:** So Scott Morrison keeps saying they're going to start in February, and ours starts in April; there's quite a difference.

**PM:** We've said first quarter, and we haven't changed that. We haven't given specificity beyond that because we want to know that, when we share with New Zealanders an exact date, we have confidence that that is when it will arrive. You will have seen multiple articles across Europe, across the UK and Italy, in particular, around whether or not they're receiving vaccines at the rate that they expected. We don't want to give a date that changes; we want to have something specific that we know we can have some trust and confidence in. And so that's why we continue to speak in broad terms until we have something that we can give specifically. Audrey, though, what I'd say on us relative to Australia, I've seen no suggestion why we would receive it in any different time line to them. So that's why we have that expectation.

**Media:** Have you had a call with Joe Biden, or scheduled a call with Joe Biden, since his inauguration?

**PM:** No, nor have I sought one. You know, we had a good conversation pre his inauguration. The offer was made for ongoing contact between our officials, particularly on COVID where we could share information or ideas or anything around research and evidence that may be of use with one another. Those channels continue, particularly with the CDC, but I expect some time in the future we'll touch base again.

**Media:** Are you expecting the vaccination campaign to really get going mid-year? When would you expect it to finish, and what percentage of people would need to be vaccinated for you to feel comfortable opening the borders again?

**PM:** We've talked about a mass vaccination campaign likely starting around mid-year, but there will be vaccinations, obviously, from the moment they arrive on a rolling basis based on when we receive and then dispatched against those priority groups. But we talk about mass vaccination from mid-year. In terms of when it will finish, some of that will come down to the delivery date and when we receive vaccine, and some of it, of course, will come down to the willingness of New Zealanders to be a part of that, what will be the largest vaccination campaign in New Zealand's history. So we need to do it together, and so our success will be dependent on New Zealanders banding together to participate in that roll out. In terms of how many need to be vaccinated, that depends on the efficacy of the vaccines. Some of that information we're still receiving, but if you take Pfizer as an example, roughly 90 percent, they're saying, they believe, effective. So that would mean—you can do the maths—if you need to have roughly herd immunity around the 60, 70 percent mark, you then make a calculation based on how effective the vaccine is as to how many need to be vaccinated.

**Media:** Are you willing to move on the legal loophole that is allowing waste companies to illegally dump waste into our water systems other than the three waters changes?

**PM:** Oh, look, no one thinks it's acceptable if companies are openly and willingly degrading our waterways. That's not OK. And so I think the point that Minister Mahuta was making was that, when people were saying councils weren't doing enough, she was pointing out that there are other mechanisms we're using to get a water regulator in place to help resolve some of those underlying issues. We should—

**Media:** But that's not for another two years?

**PM:** Exactly.

**Media:** And it's a relatively straightforward, as I understand it, legal fix.

**PM:** If I could just finish, though, Jane?

**Media:** Sure.

**PM:** No one was suggesting we need to wait for that time in order for activity. So I've just been speaking with the team about getting a bit more information about what options exist in the meantime, because no one wants to see our waterways openly being degraded.

**Media:** So are you putting those companies on notice in terms of the moral obligation but also potential legal channels coming down the line?

**PM:** They should know that I'm looking at what the options are, but actually, I think New Zealand would put anyone on notice. You know, it's 2021—everyone knows the importance of our shared collective resource of our waterways. We are doing everything we can alongside our primary producers, our councils, those in urban environments to do their bit. Everyone needs to do their bit, though.

**Media:** How worried is the Government, and by extension yourself, about people that are a bit sceptical of a vaccine and will decide not to take it? How worried is the Government about that?

**PM:** Interesting you use the word "sceptical" because, actually, that seems to be what we've always dealt with vaccination campaigns, is not so much an anti-vax movement; that exists in all countries but tends to be actually a smaller group. It's what you will have heard Dr Bloomfield call before "vaccine hesitancy". Now, on the upside, vaccine hesitancy is something that can be overcome. That just indicates people want to have confidence. So they want to know that we've gone through our processes, and that's why it's important that we do. They want to know New Zealand has taken a look at it against our needs, and we are. They want as much information as possible, and so that's why the vaccine campaign will be so important. We need to reach into those communities where they might be a bit hesitant and give them that reassurance.

**Media:** So is there going to be a bit of an educational campaign for New Zealanders?

**PM:** Yeah, I think it's our duty. It's our duty to make sure that every member of the team of 5 million knows that we've done our homework on their behalf and that this is about looking after one another.

**Media:** There are reports that the Pfizer and BioNTech is slightly less protective against the South African variant, and now the company executives are saying they could adjust, I guess, the formula over a six-week period. What would the Medsafe protocols be for an authorised vaccine that's then getting newly updated retroactively?

**PM:** Couple of answers on that. Look, I won't get into—the Minister may, but I won't get into—too much detail about what we're seeing around efficacy against different variants. Every scientist or health adviser I've asked have said it is very early days to make too many assumptions around what impact variants may have. The point they keep making, though, is we fully expected variants. That is why you see, for instance with the flu, ongoing vaccination campaigns and ongoing development of vaccines. So that will be part of what we then adapt to around COVID. Vaccines will continue to develop. They will continue to make sure that they are responding to what we see the virus doing over time. And so that's why this will be the first vaccination campaign against a rolling campaign to keep everyone safe.

**Media:** What is the update in approving any sort of update that the pharmaceutical companies are doing? Does it go back to zero with Medsafe?

**PM:** You're making an assumption, though, and this is what I'm saying: it's too early to say. We've been given—the advice to us: it is too early to say simply that vaccine is ineffective in this regard. So I'm not sure that that's a conclusion that anyone's made yet.

**Hon Chris Hipkins:** Look, I think, as the Prime Minister has just pointed out, the flu vaccine, which arrives in the country every year, often different shipments of the flu jab will be updated from the previous one based on, you know, development abroad and developments abroad, and we have processes that adapt and respond to that.

**Media:** Will you consider National's idea of introducing emergency legislation similar to that used post-Christchurch to deal with the housing crisis?

**PM:** I think the point that's being made is: what can we learn from Christchurch? And there particularly some of the work that was done around land supply was one of those critical learnings that we've picked up on. You know, that is why we've already put in place that significant national policy statement, which says to all councils across New Zealand: you have to free up land supply to make sure we have enough housing for our population. And

so we've already moved on that; that was in direct response to the learnings we had out of things like Christchurch. Otherwise, you know, there are elements of the letter, I have to say, I disagree with—the claim that public housing doesn't make a difference. The Leader of the Opposition doesn't think we need to do anything on the demand side; I disagree. However, you know, this is a persistent issue in New Zealand. So I'll take the offer in good faith, go and see whether or not there's anything further, but we already have said we will work together on Resource Management Act reform.

**Media:** So you could introduce emergency legislation to deal with—

**PM:** No, what I'm saying is the thing that she's saying we should do, we've already done. But I take the offer in good faith. We want to fix the housing crisis. It's been a persistent issue across multiple Governments, over multiple decades. If there are any extra silver bullets that are being suggested here we haven't already picked up on, I'll engage in good faith. But I'm very pleased for the offer to work on the RMA.

**Media:** Prime Minister, the NPS doesn't go into full effect until 2024—

**PM:** Actually, I'll correct you there, Henry. The first flush of that, the expectation is that full stocktake in July.

**Media:** The stuff around intensification is not going to happen until at least 2022—

**PM:** The release of land-supply stocktake is July. So in terms of the—

**Media:** But clearly this emergency legislation is a lot faster than what the NPS is doing, because the full effect of the NPS, the big major stuff you're architecting, is not going into effect for several years. This is talking about this year. Do you see any—

**PM:** And we're having a slight disagreement as to whether or not we'll see any effect of it this year. My argument is that we will.

**Media:** We're seeing some big queues again today up at those testing stations up in Northland. Are there plans to put more resources into that?

**Hon Chris Hipkins:** Look, we have been increasing the number of testing sites that are available. There is uneven demand across different testing sites, and obviously working to respond to that to make sure that we can provide testing. But the biggest constraint there is that there are still people who are seeking testing who don't necessarily need to be getting a test—because they're not showing symptoms; because they're not in that at-risk category—and what that is doing is slowing down the people who we need to get tests from being able to access them. But please, my message—you know, this happens when we see a surge in testing. It's happened every other time we've seen a surge in testing. And, whilst we work very hard across the four DHBs working in the upper North Island to share resources and to get testing people and equipment to where they can make the biggest difference, we cannot guarantee that there won't be some delays.

**Media:** And is that a significant percentage of people turning up who don't need to be there?

**Hon Chris Hipkins:** Yes, there—if you look at it, there will be a significant number of people in those queues who perhaps don't meet any of those criteria.

**Media:** Do you think you can you tell me, with those close contacts—the 15 close contacts who have tested negative—do they just go about their daily lives now or are they encouraged to, sort of, keep self-isolating for the—

**Hon Chris Hipkins:** That will be based on a discussion they have with public health officials. So, when they've had their test results, public health will have been talking to them about what the risk is for them, because it will be different; it will depend on when the date of the contact was, it will depend on what the nature of the contact was. And, if there is still a risk, then they may be asked to isolate further and have another test. But, again, that's all dealt with on a case by case basis. You can't set hard and fast rules around that.

**PM:** OK, last question.

**Media:** Te Tai Tokerau border control have come out and said that they're looking at setting up iwi checkpoints—roading checkpoints. Is this something the Government supports?

**PM:** Look, as I've said, we remain at alert level 1. And so, in that regard, people are still able to move freely around the country, and so people still need to be able to do that. There's no legal basis for anyone to be stopped. So, when it comes to any community-based concerns about whether or not we need to provide information for people who are moving in and out around Northland, the only thing I ask is that iwi, in those cases, work closely with police, because we need to make sure that anything that is happening in those areas still is legal.

**Media:** And Northland are about to observe two long weekends. Are you concerned at all about holidaymakers making their way up to the North?

**PM:** No, not at this stage. Look, if there was anything to give us concern about that, we would certainly give notice around that. We would look at whether or not the alert levels needed to change. Nothing at this stage leads us to believe that we need to do that. So we continue to provide any advice that any organisers of major events in Northland might need, but at this stage none of our general advice has changed. Just wash your hands, record everywhere that you're going, and definitely stay home if you're sick and get a test.

**Media:** What's the time frame for your—

**PM:** That was meant to be my last question—no, I'm going to stick with it, as I mean to continue for the rest of the year.

**conclusion of press conference**