

**ALL OF GOVERNMENT PRESS CONFERENCE: WEDNESDAY, 28 JULY
HANSARD TRANSCRIPT**

PM: Kia ora koutou katoa. Can I begin by just apologising—we would, as usual practice, have a sign language interpreter with us. Unfortunately, our usual provider was unable to provide an interpreter today. We will make sure that we have a transcript available as soon as possible at the conclusion of this press conference. I'm going to give a few comments, then I will hand over to Dr Bloomfield, and then will be available for questions.

Today we are at Te Awa vaccination centre here in Hamilton. Te Awa is the largest vaccination centre in the Waikato, with up to a thousand people able to be vaccinated here each day. A collaboration between the Waikato DHB and Tainui, it's open seven days a week and will be a focal point for the scaled-up roll-out of the vaccination programme locally. It represents the types of local partnerships we are fostering across the country as we enter a new phase of our campaign to get all eligible New Zealanders vaccinated so we can all be protected from COVID, and to ensure we can all enjoy the opportunities that having a highly vaccinated population provides. Can I say thank you to the team here from the DHB and Tainui for the establishment of this centre, which, after only a few days of operation, I hear is going extremely well.

So far, over 1.7 million doses of the Pfizer vaccine have been administered in New Zealand, and 699,479 people have been fully vaccinated. That's a good start, but from today our programme significantly expands as we enter a new phase in our roll-out. Over the last week, there has been a 40 percent increase in the number of vaccines administered—204,943 in the past seven days, with that number set to keep rising. Yesterday, 350,000 vaccine doses landed in the country, bringing total deliveries for July to 1 million, with 1.5 million more due to arrive in August. That's more than double the number of doses we received in the first half of the year.

There are currently 676 vaccination sites operating around the country, including GPs and pharmacies, and more of those are planned to come on board in the coming weeks. You'll be aware that our new call centre for bookings has now been operating for the past five days. In that time, they have received over 75,000 calls, contributing to the 256,299 bookings made in that time, most of which have been online. Already, just today, there have been more than 15,200 bookings made. The great news is that we now have 842,000 future vaccination bookings in our system, which—along with those over 65 already vaccinated—means 70 percent of all New Zealanders aged over 65 have either already been vaccinated or are now scheduled to be.

So it is time to start moving to our next group of eligible people for vaccination, to keep up the momentum of our vaccine roll-out. From today, those aged 60-plus will start receiving communications to go to bookmyvaccine.org.nz to book their vaccination appointment. It is simple, only takes a few minutes, and means you can have the peace of mind of confirming your place to be vaccinated. Alternatively, you can call 0800 28 29 26 between 8 a.m. and 8 p.m., seven days a week, to make your booking. It helps if you have either your NHI number or your booking code, but neither is essential.

While all those aged over 60 years of age are now eligible, where you are in the country will depend on just how quickly you're able to be booked in. But I can assure that, no matter what, there is a vaccine for everyone, and everyone who is eligible will be able to be vaccinated this year. My ask of the team of 5 million is simple: get vaccinated. You don't need to look far to see why this is so important. The Delta variant is spreading around the world. Even nations with high rates of vaccination are seeing daily cases in the tens of thousands, and hospitalisations and deaths. In New Zealand, whilst we've avoided the worst of COVID, we are not out of the woods yet. For the vaccine to be as effective as possible, we need everyone to have it. In order to safely shift our wall of defence from our borders to the individual armour that the vaccine provides, it relies on high rates of vaccination.

As we can see overseas, outbreaks can occur even when a majority of people are vaccinated. We need high numbers to achieve the greatest security. In 2020, our collective efforts put New Zealand in a strong position. We had fewer deaths and a more open economy than nearly anywhere in the world. We saved lives and livelihoods. And now in the second half of this year, the opportunity to seize the benefits of that strong position we have all built is in our hands again. The vaccines are here, and more are arriving. Our national booking systems are up and running, and more and more vaccination sites are coming on board. The only thing we are asking you to do is to book and show up. I'll now pass to Dr Bloomfield, and then we'll open for questions.

Dr Ashley Bloomfield: Thank you, Prime Minister. Kia ora koutou katoa. First, I would like to just confirm today that there are no positive COVID-19 cases in the community, and just the one case in managed isolation to report in recent returnees. I don't want to under-emphasise the significance of that daily result of no cases in the community. It is not to be taken for granted—we have seen in Australia, not just in New South Wales but in a number of states an approach that is very similar to New Zealand's. It is not straightforward keeping this virus outside of the country, and the fact that we are once again able to report no cases in the community reflects a lot of very hard work going on by our teams, particularly our workforce in the border and in managed isolation, and I just want to thank and commend them.

Secondly, just two or three quick comments on the vaccination programme. First, every week I chair our internal steering group in the Ministry of Health on a two-hour meeting that is overseeing the roll-out of the vaccination programme. It is a complex programme. We have enormous focus on it to make sure that we are going to deliver this for all New Zealanders and for all groups of New Zealanders, including Māori and Pacific. And I want to just acknowledge the work that is going on across the system to not only deliver this programme but to keep the country COVID-19 - free, and to continue to provide a full range of healthcare services for New Zealanders in the middle of what is always a challenging time of year—that is, winter.

The second comment on the vaccine programme is, as the PM has said, as it scales up there is an increasing number of providers coming on board, and that includes a much greater number of general practices and pharmacies than we anticipated at the outset. And last week there were 180 new sites brought onto the programme, and the number of GPs and pharmacies that come on board will continue to increase. And I just want to acknowledge the interactions we've had with primary care and with pharmacy, and their willingness to support this programme, again, while they are under a lot of pressure through winter.

And finally, just a brief update on the results from New Plymouth. We had those two positive waste water results last week. All the testing subsequently, including 24-hour samples over the weekend, not just in New Plymouth but in a range of sites around Taranaki, have returned negative. We will keep monitoring daily, and I do want to thank the more than 1,000 people in New Plymouth over the last week who have come forward and been swabbed and tested. All those tests so far have come back negative. Additional testing capacity remains in place in New Plymouth, just to provide us with the assurance we need that there is no community transmission there. And, of course, a reminder to anyone in New Zealand, if you have symptoms consistent with COVID-19, then you should ring Healthline and go and get a test. And high rates of testing through winter will help provide us with the assurance that we need to keep COVID-19 out of our communities. Thanks, Prime Minister.

PM: Thanks, Dr Bloomfield. Thank you. We are now open to questions.

Media: Just regarding Friday's mass vax event, in order to fill 10,000 slots you had to put out invites to almost ten times that number. Does that make you fear for other future mass events?

PM: No—no, not at all. This is our first mass vaccination event, and so we've really been running it as a trial. Part of that trial is finding the best way to reach people. Not everyone, necessarily, is going to respond to something they receive through their mailbox.

We are thinking about different ways that we can communicate a mass vaccination event. But the important thing is we are now a little over-subscribed for the event, which was intentional. And this will help us learn for future events.

Media: Was it a cultural fail?

PM: No, no—as I say, this is our first mass vaccination event. We've got over 15,000 people booked for the event. We'll learn from this one, as we intend to, to then see what worked well, what do we need to do differently to attract in those that we really want to make sure we're targeting. But it is a first, and so we always intended to learn as we go. But we're certainly not writing off an event that hasn't even happened yet.

Media: So what lessons have been learnt? What has failed? What would you do better next time?

PM: If you wouldn't mind, I'd rather give that report once the event's taken place.

Media: Has there been any kind of weekly vaccination target set now that we're getting into group 4?

PM: We do have, against DHB plans. I'd need, perhaps, Dr Bloomfield to talk a little bit to where we're sitting there, but we've sat consistently 4 to 5 percent over and above the plans that we've set for ourselves in terms of the roll-out. And I do want to acknowledge the DHBs across the country have been doing an enormous amount of work to outstrip even the expectations they've set for themselves. What we saw in the reporting today was a day, yesterday, a record day—38?

Dr Ashley Bloomfield: Over 38.

PM: Over 38,000 vaccines delivered in one day. That's a record for us. That's what we want to continue to see as we scale up across the country, as we open more sites, and as we see more people book.

Media: So the floodgates haven't opened to everyone today to come and get a vaccine?

PM: Just like many other countries, where we've observed their vaccine roll-out, we've adopted an approach of opening up to age groups. And that's just simply to ensure that in a timely way we're bringing people through our vaccine system. So that's the approach we adopted some time ago. We're opening up to the 60-plus, so my message to you is: if you haven't already received an invitation, jump online, call the 0800 number, and slot yourself into a booking.

Media: Are mass events popular with people?

PM: Well, I'll tell you after we've had one.

Media: Do you happen to have any plans for future mass events already?

PM: Well, mass vaccination events are just one part of our strategy. We also, for instance, have, under planning, workplace vaccination. We've also been working alongside community providers. We've seen a number of really successful events. Marae. We're talking to schools about potential future use. We want to be where Kiwis are and where it's most convenient. Right now, we're in a shopping mall. So our intent is to go to places where Kiwis are, make it easy and convenient as possible, and we're willing to try a range of options.

Media: What do you say to those people in group 3 who may have spent a long time waiting for their invitation, a long time to get a booking, who may now see people in group 4 immediately coming in, getting a booking quite quickly, to get their vaccines, while they might still be waiting for their first jab?

PM: So for those in group 3, obviously we've got 70 percent of those people now either vaccinated or booked. So they've been able to be prioritised. There's over a million people in group 3. That next tranche of the 60-plus, so that four-year age bracket, is more like 160,000 people, so a much smaller group. So we've given that window for that group 3 and the 65-

plus to be vaccinated. No one will miss out by bringing in that next small cohort to start booking. We need to maintain the momentum of the vaccine roll-out.

Media: Are you concerned that the DHB-by-DHB approach to vaccination could create some confusion around messaging? We've heard today about someone who is aged 40, who's been able to go to an Auckland vaccination centre, roll up, and get a vaccination.

PM: Of course, what we have said all the way through is the first groups that we've prioritised have been our older population and those who might have underlying health conditions. So I never want to give too much of a commentary on whether or not someone may or may not fulfil that criteria. But what we've also said is that everyone will be vaccinated; no one will miss out. What we're now communicating is an across-the-country message that no matter where you live, your eligibility will open up at the same time. When your booking might be, might be slightly different, but you'll be eligible at the same time as other people across the country, regardless of DHB.

Media: Scott Morrison has apologised for being so slow in the vaccine roll-out. Do you apologise for being slow here, too?

PM: Right at the beginning of the year, we said that this would be the year of the vaccine campaign, that this would be the largest undertaking of our health system, around a vaccination, that we have ever seen. And so far, we are running according to our plans. I'm really proud of the work that our health professionals have done. Those who have been vaccinated know how well they are doing on the ground. Our focus now has to be right through to the end of the year, getting as many people vaccinated as possible.

Media: How would you rate the Government's roll-out?

PM: Exactly as we intended to be is where we are now. In fact, in some cases, you will see that we are performing a bit over and above where we thought we would be. It's only been this month and next month that we've had those big deliveries that are enabling us to ramp up. But you can see, now, those numbers—38,000 vaccines in one day—really are starting to pick up pace.

Media: You're just about to have your second jab. How did the first one go, and how are you feeling about the second?

PM: Fine—actually, I've got two fully vaccinated individuals here. Yeah, my experience of the two—so I absolutely stand by what I said. As far as needles go, it's a pretty painless injection. You can get a little bit of dead arm afterwards—I felt like I'd been knocked in the arm. But other than that, that's hardly a trade-off when we think about what protection it provides New Zealanders—our family, our friends. It's an act of kindness on behalf of the rest of the country—we need everyone to do it.

Media: I've got a couple of questions for Dr Bloomfield—

PM: Go ahead.

Media: —if that's all right. So this is regarding the Northern DHB. How can you have confidence in the vaccine roll-out progress when you don't have a precise idea of the denominator for each priority group?

Dr Ashley Bloomfield: Well, what I will say is that we don't categorise the New Zealand population into these priority groups through any of our census data or, indeed, our health service data. So we gave estimates at the start of the campaign as to how many people might be in those groups, but if you think back, our border workforce, we thought, might be between 12,000 and 15,000, and now in group 1 we've vaccinated well in excess of—or around 50,000 people in group 1 as the number of people in that workforce and their whānau have come forward. Likewise, our group 2 is a very large group. What we are looking at now as we move into this next phase is to start to use our health service utilisation data as a denominator, because what's critical now is that we know exactly who and who hasn't been vaccinated in each DHB area, and so that will give us the option to dig much deeper and be

able to present at local level and by ethnicity and by age group exactly how many people are in each group and exactly how many have been vaccinated.

Media: And are you still experiencing problems with matching people's NHI numbers to their names or facing any other usability issues with the national [*Inaudible*] system?

Dr Ashley Bloomfield: It's performing exactly as we expected. I should say that we did test it for several weeks and then rolled it out into each district health board, and the NHI matching is at a very high rate, but this is something that we do day in, day out, in the system. We have a dedicated call centre that receives calls from health professionals throughout the day, every day, where they've got a person and they know the name and date of birth, to match their NHI number. So the system is performing as we would have expected.

Media: Can I ask about saliva testing? Where is the Government at in terms of extending that beyond border workers and has advice been sought?

PM: That's Dr Verrall—so, look the last update we would have given on that was, obviously, our intention to make it more widely available across our front-line workforce. We have wanted for some time to expand the range of testing options, but the key to that has been at the same time maintaining the quality of the test at the same time. So, Dr Verrall—I'll have Dr Verrall give a quick comment, but this has, obviously, Minister Hipkins' focus.

Hon Dr Ayesha Verrall: Beyond the roll-out of saliva testing to the border workforce, we are interested to see how we can use more innovative testing technology more generally, and so we're in the early stages of bringing a group of scientists with expertise in disseminating technology together. Dr Bloomfield's leading that within the Ministry of Health. So there's some, I guess, more medium-term focus around that at the moment.

Media: Just another question on testing, and [*Inaudible*] in light of the Taranaki situation, are enough people with cold and flu symptoms across the country going and getting a test who have actually been told by their healthcare providers to go and get a test?

PM: It's a good opportunity for a public service announcement. I'll let Dr Verrall and then Dr Bloomfield have a go at that one.

Hon Dr Ayesha Verrall: Indeed, we do need people, when they're experiencing symptoms of traditional cold and flu symptoms to bear in mind it could be COVID, and not to be complacent, despite the fact that we've done so well—and not to assume it's RSV either, actually. You don't know unless you get the test, and so we do encourage everyone: if you need to stay home because you're sick or if you're feeling a bit crook, you do need a test.

PM: You asked about health professionals. Their protocols haven't changed.

Media: We do know of some people who have had some symptoms who were told "No, you don't need to go and get a test." Are we going to find ourselves in the same situation as August last year, when there was an outbreak going on?

PM: The protocols have not changed.

Hon Dr Ayesha Verrall: No—there is no change to those protocols. Health professionals, in particular, need to be maintaining a high standard in terms of their behaviour around not coming to work when they're sick.

Media: Prime Minister, just a question on Pharmac. Pharmac has published all of the drugs it would like to fund if it had the budget. There's over 70 medicines and products on that list, but not all will be approved. Does Pharmac need more money?

PM: As I understand, Pharmac have made the decision to publish those pharmaceutical products that they have under consideration, and, look, I welcome the transparency that they're providing. Ultimately, they are the ones that need to make the funding decisions, and that's important. We've increased their funding, but it should never be for politicians to determine which drugs it is that Pharmac ultimately decide to fund.

Media: And on the Otago lead report that's been released this morning, Australia's set to introduce zero-lead tapware and brass plumbing. Should removing lead from tapware be something New Zealand should be considering here?

Dr Ayesha Verrall: Thank you. Firstly, it's great to know that the communities of Karitane and DHB Waikouaiti are back on being able to drink their regular water supply and that the concerns about lead in their water have definitively been laid to rest. Indeed, this is an area that I've raised with Minister Williams following the report we received in March around the initial concerns about lead in the water there, and we're investigating whether in fact that is required.

Media: And one of the recommendations in the report, I think, was for Otago's population to run cold water for 30 seconds before using it each morning. Is wasting water like this an appropriate solution to the lead problem?

Dr Ayesha Verrall: Look, if there are old pipes, old tapware, that may well be necessary, and I notice that was the determination of the medical officer of health.

Media: Just going back to that—

PM: Yep, I'll come to you. I'll just finish up with some questions from you, and then I'm going to finish by just allowing Minister Henare to speak very briefly to the issue of ensuring good population reach with our vaccine campaign.

Media: And my question's around that.

PM: Great! Well, shall I just—yeah, go ahead.

Media: Are you satisfied with the Māori vaccination rate being close to half the general rate and the gap continuing to rise [*Inaudible*]?

PM: Yeah, actually, I'll go straight to Minister Henare. Thank you.

Hon Peeni Henare: Kia ora, and thank you for your question. The first thing I'll say is I take great heart in the fact that for the Māori population over 65, we are tracking alongside and even, in some district health boards, better than the non-Māori population in that respect. We also know that 77 percent of the Māori population is aged between 16 and 54, which means that as we look to the age bands that we've got scheduled in phase 4 of the roll-out of the vaccine, we expect to catch a heck of a lot of Māori communities and Māori people across the country. So our expectation is that those numbers will grow significantly over the next couple of months, but we do acknowledge some of the challenges around the booking system for, in particular, rural communities and Māori communities who don't have access to the internet, which is why it's important the Prime Minister shared the 0800 number, to get our people to be able to ring up, book, and get vaccinated.

Media: Are you concerned about some of the discrepancies between DHBs [*Inaudible*] Māori being close to a quarter of the national average?

Hon Peeni Henare: Yes, there are concerns about the way that the DHBs are rolling it out, which, on a fringe note, is why I'm excited about a Māori health authority in the health reform work that's ahead of us, but we do need to work with those DHBs. They've submitted plans, and our job is to make sure we hold them to account to their plans that they've submitted, to make sure that Māori are being vaccinated at a rate that will see the equity in the distribution of the vaccination amongst our communities. We do have a significant challenge, but we know that in phase 4, we hope to capture a heck of a lot of Māori and people in communities that have been underserved in the past, and we'll continue to monitor that.

Media: What would you say needs to be done to attract more Māori and Pacific people to, for example, the mass event on Friday? What could have been done to get more people along there?

Hon Peeni Henare: We've done a heck of a lot of things to put communications in amongst the Māori community, led by Māori themselves, not just the Government, which is a significant

step forward. But there are a number of events coming up where we'll have another opportunity to do these things. There's the event, of course, that the Prime Minister has discussed already, but very soon, in this very rohe, we have the King's coronation, which is another opportunity to get messaging out to big groups of Māori communities. We also know that in Tāmaki Makaurau, at the end of August, is the largest kapa haka event in Auckland for this year, so we're expecting about 10-15 thousand people at that event. Those are our opportunities to get those messages out.

PM: OK, look, I'll just wrap if you don't mind, everyone, but I do acknowledge you might want to talk to some of the DHB. There's a vaccination centre at Tūrangawaewae Marae, for instance, so that's another good example. Alright, thank you for joining us.

conclusion of press conference