ALL OF GOVERNMENT PRESS CONFERENCE: FRIDAY, 10 SEPTEMBER 2021 HANSARD TRANSCRIPT

Hon Grant Robertson: Kia ora. Ngā mihi nui ki a koutou katoa. Good afternoon, everybody. I'll very shortly hand over to Dr Bloomfield to update on the latest case numbers and other details for you, and then I will provide an update on economic support and the latest weather issues, before taking your questions—Dr Bloomfield.

Dr Ashley Bloomfield: Thank you, Deputy Prime Minister. Kia ora koutou katoa and mālō 'etau lava. There are 11 new community cases to report today—all are in the Auckland region. This takes our total number associated with this outbreak to 879, and of those, 288 cases have now recovered. Additionally today, there are six new cases in recent returnees in our managed isolation facilities, and two historical cases have also been identified at the border. The total number of as yet unlinked cases is 29, noting that six of these are from today's new cases. Analysis of yesterday's 13 cases show all are contacts of other cases and 12 of those are household contacts. We also know just one case was infectious in the community, which is encouraging.

Finding direct epidemiological links between cases can take some time, especially when considering a small likelihood of exposure and where there are no clear links to an exposure location or person. We're continuing to work closely with Auckland Regional Public Health to investigate fully any unlinked cases. Of the unlinked cases, there is a small number which are the ones that are being investigated very thoroughly, and that includes the two cases that have recently been identified when they presented to Middlemore Hospital.

There are several new locations of interest that have been published today as part of the source investigation into two of the unlinked cases—not the two I just mentioned. One of these new locations of interest is the Crowne Plaza vaccination centre. The genomic sequence of the case that has created this as a place of interest is linked to the community outbreak, and the date of the potential exposure interest there is 23 August. Just for your information, the last person left the Crowne Plaza on 21 August, so it's not related to the people who were in the Crowne Plaza at all.

The advice for people who visited these locations of interest—and they are on the ministry's website—is to get tested immediately whether you have symptoms or not. And again, this is not part of contact tracing; this is part of source investigation, because these two cases in the same household have more than one SNP or SNP difference in their genomic sequence from the other cases they're associated with, and we are trying to rule out whether there is a person in between—so a link between those original cases and these two cases. For those people getting a test, if you've been at one of those locations of interest there is no requirement to self-isolate, unless, of course, you have symptoms.

There are 27 people in hospital today; all are in the Auckland region, and of these, four are in intensive care and all four are requiring ventilation at the moment. Our thoughts remain with anyone who's in hospital and their whānau at this time. On testing, yesterday there were 14,181 swabs processed across the country and 7,974 swabs taken across metro Auckland. This continues to be giving us confidence about the outbreak and whether or not it is controlled, and one thing I would like to emphasise is this weekend it's critical that we get high testing numbers. So anyone who is symptomatic, particularly in Tāmaki-makau-rau, please do go and get a test. To everyone who has been tested, thank you for your commitment.

There are 23 pop-up testing sites across Auckland today, including our community testing centres. And remember also, GPs and urgent care clinics offer swabbing. We are also widening the scope of surveillance testing, and, as part of that, invitations have been sent to a number of employers of essential workers across Auckland, encouraging their workers to be tested. Please do take up that invitation. This is for people who don't have symptoms, and you will not need to stand down from work if you have that test. Anyone with symptoms,

including essential workers, should not go out and should get a test and remain isolated until that result comes back.

Work is also under way to set up testing sites closer to the Auckland boundary to help ensure testing can be undertaken as easily and efficiently as possible for people who are required to be tested because they are crossing the boundary. Surveillance testing of essential workers is continuing today, with a further pop-up at an Auckland supermarket for staff only.

Last month, we commenced the national roll-out of saliva testing in our border workforce, and this morning we hit a milestone with our 1,000th worker opting in for saliva testing. We're continuing to make saliva testing more widely available, including as an option for people who will be required to be tested because they're crossing the Auckland boundary.

On contact tracing, just over 38,000 people in our system, and, of those, 92 percent of all contacts have got a test in the system. We continue to follow up any who have outstanding test results.

And an update on Middlemore Hospital. The COVID-19 - positive case we reported last evening, who went to Middlemore Hospital for treatment, is in isolation and has been transferred to a quarantine facility today. Auckland Regional Public Health will today interview the case to determine if there are any known links to cases or exposure events. This is one of that small handful of cases that we're particularly concerned about finding what their link is to the existing outbreak.

All the staff in the ED and the short-stay ward where the person received care were wearing appropriate PPE, including N95 masks and eye protection, and those staff have been stood down. There were 30 other patients in the ED and short-stay ward who have been assessed as being contacts. Of those, 17 are in the hospital and they're isolated from other patients. The remainder had already been discharged but have been contacted and are isolating at home with support and oversight from Auckland Regional Public Health.

And, finally, it's great to see excellent use of the NZ COVID Tracer app. On Wednesday this past week, we had more than 1 million New Zealanders either scan in with the app or make a diary entry. It's the highest number in any 24-hour period to date. Our latest figures showed that there were over 2.5 million scans on yesterday, beating our previous daily record, and there were over 100,000 manual entries. So scanning in, staying home, and getting a test, if you are unwell, and, of course, if you're in Auckland, doing everything that's required under alert level 4 are imperative if we're going to get around this outbreak. Back to you, Deputy Prime Minister.

Hon Grant Robertson: Thank you very much, Dr Bloomfield. And just to reiterate the importance of people getting tested. It is one of the things that the director-general gives us advice about when Cabinet takes decisions about alert levels is the level of testing that is undertaken. And in the Auckland area particularly, we do encourage people to take advantage of the opportunities to get tested over this coming weekend.

As I said, I just want to make a few comments around economic issues. Firstly, you would have seen the announcement this morning from Minister Hipkins and Minister O'Connor that one-way - quarantine-free travel for RSE workers will begin in October. This is an important milestone for our horticulture industry—that they know that they can get the staff that they need for the upcoming picking season. And I want to thank the industry for the collaborative approach over recent months to help make this happen. To minimise risk, there are additional health measures being put in place to protect these workers and their communities. The RSE scheme does have important benefits for New Zealand, Pacific partner countries, workers, and their families and communities, and so we are pleased that this is able to go ahead.

You've heard me say before, the New Zealand economy was going strong as we went into this latest outbreak of COVID-19. Compared with our international counterparts, we have low public debt, low unemployment, and strong economic growth. Our economy has proved to be remarkably resilient. The bounce-back last year was better than almost all economic

forecasters had expected, and most forecasters are assuming the same will happen as we emerge from this outbreak.

But that is not to say that the pandemic is not taking a toll on many businesses around the country. We know that it's difficult, and in some cases impossible, for businesses to operate under elevated alert level settings, and in particular in level 4 lockdowns. I want to thank all of our business owners, large and small, and their employees for coming up with clever, innovative ways of operating and for your resilience in this new and strange world. I particularly want to thank those businesses in Auckland, who are doing it tough for the rest of the country. We know that it is hard-going but we will manage this outbreak together and come out the other side and rebound again.

From the beginning of this pandemic, the Government has adapted and increased the support it provides to businesses, workers, and communities. We listened to the concerns raised by affected businesses and we adapt our systems. The second payment of the wage subsidy scheme remains open nationally for businesses. Eligibility is not determined by the alert level for the area that the business is in, but, rather, so long as the drop in revenue is caused by the rest of New Zealand being in alert level 3 for a time or the higher alert level in Auckland. And a reminder: if Auckland stays at either alert level 4 or alert level 3 after Cabinet's decision on Monday, that will trigger a third fortnight of wage subsidy payments for eligible businesses. As of this morning, 404,688 applications for the wage subsidy scheme have been approved in this round, totalling almost \$1.7 billion in payments. Combined with the resurgence support payments, that has seen more \$2.2 billion paid to New Zealand businesses.

We do know that extended periods of alert level restrictions puts pressures on firms' ability to meet their fixed non-wage costs, and we have taken advice from businesses and worked with the likes of the Auckland chamber of commerce and other business organisations as to how to respond to this. With that in mind, we have decided to open a second round of the resurgence support payment. This is a new payment, as the resurgence support payment was originally seen as a one-off initiative, but it is clear that as heightened alert level restrictions are in place for longer, it does put more pressure on businesses. Applications for this new round will begin next Friday, 17th and will be available for one month after a nationwide return to alert level 1, just as for the first payment.

In order to qualify for the new payment, firms must experience at least a 30 percent decline in revenue over seven days as a result of the current alert levels, as well as the existing eligibility criteria. In this case, the new payment, that seven-day window is from 8 September. The payment remains the same, which is a core per business rate of \$1,500 plus \$400 per employee, up to 50 FTEs, which works out as a maximum payment of \$21,500. We estimate that this new payment will cost about \$430 million depending, of course, on uptake. Ministers have further agreed that there will be two more payments after that, three weeks apart, so long as the conditions that trigger the resurgence support payment still apply.

The overall amount of support we are providing to businesses in this current lockdown is actually more than we provided the last time we had alert level 4 restrictions. For example, over a month in alert level 4 last year an eligible business with 10 employees would have received about \$23,000 in support, whereas this outbreak it will be about \$35,000 for the same sized firm. This an illustration of the fact that we are listening to businesses as we move through this pandemic and modifying and adapting the support that we provide to them. As I said at the start, the New Zealand economy does continue to outperform its peers. Our business and our workers have proved to be incredibly resilient. The COVID-19 virus in all its variants challenge us and obstruct our way of life, but the Government is going to keep supporting New Zealanders to get through this together.

I'll just very briefly update on the weather before I take some questions. I do want to note that there remain a number of warnings and watches in place across both the South Island and the North Island. Strong wind warnings remain in place in the Canterbury high country, Canterbury Plains, Marlborough, Wellington, and the Wairarapa, including the Tararua

district, and strong wind watches are in place for Christchurch, Nelson, Westland, Motueka, Taihape, and the Hawke's Bay. There has been damage, as you would have seen reported, in Canterbury and Otago and Wairarapa, including downed trees and some power outages. There were fires in Otago, Hurunui, and Waimakariri, and these have been managed by FENZ, and the largest fire was at Glentui with nine appliances attending. Another front, unfortunately, is expected to bring significant rainfall to western parts of the lower South Island on Sunday and early Monday, and possible sever gales for eastern areas of the South Island, and further warnings about this will be issued close to the time. Please stay safe over this weekend.

Media: Deputy Prime Minister—a question on behalf of a colleague, please. The Resident Doctors' Association says the new hospital visiting policy that the ministry released yesterday could potentially not see a further reduction in visitors at Auckland hospital. Why weren't union groups consulted on these guidelines?

Hon Grant Robertson: I'll hand that to the director-general.

Dr Ashley Bloomfield: Thanks, Deputy Prime Minister. The guidelines have been sent out to union groups, and I clarified that with my team this morning. They've been sent out to union groups and others to get feedback on them before they are finalised, but, of course, the really important part of implementation of guidelines is at the district health board level, and the main principle here is to protect visitors and, of course, staff and patients.

Media: Why isn't level 4 no visitors other than on compassionate grounds in the quidelines?

Dr Ashley Bloomfield: Well, there's been a lot of work on the guidelines, and this is where they have settled. As I say, the most important thing is that when they're implemented, that the district health board and the staff can ensure the safety of all at the facility, and that's a key principle.

Media: You mentioned, Dr Bloomfield, that the two linked cases have different SNPs. What does that mean, and is this a new, previously not seen variant?

Hon Grant Robertson: No.

Dr Ashley Bloomfield: So, no, they're absolutely linked to the—all the cases have clearly linked genomically, and we've had a very high success rate, or ESR has, in sequencing the genomes. So these ones are clearly linked to the outbreak. The important point here is usually if there's a change or a mutation, it's at one point between one individual to another, so one SNP. Both these two cases, who are in the same household, have two different mutations, so two SNPs. So that suggests that it can happen, rarely, but it suggests there could be an intermediate case in between these two and someone else in the outbreak. And so what the testing is designed to do is see if we can find whether there may be someone out there who is that intermediate case.

Media: And why weren't you immediately setting up community-based surveillance testing, given the high numbers of mystery cases?

Dr Ashley Bloomfield: Oh, there is a lot of surveillance testing, focused surveillance testing, happening, and we had a good brief this morning from the Auckland team on where that is across the Auckland region. Actually, over the last four days there's been an average of 9,000 tests per day across Auckland and 4 percent of Aucklanders tested just in the last six days, including 6 percent of Pacific and 4 percent of Māori. So there's been some quite focused pop-up testing sites in different communities and also in essential workplaces, exactly to get to the bottom of whether there is any further community spread around where some of these mystery cases live or work.

Hon Grant Robertson: And that's exactly why you're seeing higher testing numbers coming through, is because there has been an effort to push out and do more testing. As the work is done each day, as cases come in, more cases get linked, but, obviously, the focus has to be on where there are these mystery cases. And a lot of work is done from our contact

tracers and others to identify that, but we need that surveillance system to be able to back this up, and it's the reason why we're pushing so hard in on that.

Media: But if you had done this sooner, could you have then, sort of, prevented the chains of transmission and perhaps so many cases, if you'd done the essential work earlier in the outbreak?

Dr Ashley Bloomfield: This is the time when we would be doing it. In the first part of the outbreak, we're just testing widely to identify any cases out there, and we've done that successfully. And if you look at the epidemic curve is almost perfectly shaped epidemic curve; our number of cases is coming down. We're now at that point in the outbreak, as has happened in previous outbreaks, where these cases pop up as part of the tail, and those are the ones we put the really thorough investigation into to identify whether they are a flag for other undetected community transmission, and that's why we do the much more targeted testing as well as the asymptomatic surveillance testing.

Media: Yeah, it's clear you're really calling on Aucklanders to go and get tested over the weekend, and that could have an influence on your recommendation on Monday about whether Auckland moves out of level 4. What do you need to see terms of those testing numbers—what would you like to see?—and also how much of a bearing do those mystery cases that keep popping up have on your decision on whether or not they move out?

Hon Grant Robertson: Well, I'll start and then hand to Dr Bloomfield. From our perspective, we get a range of advice on each occasion that Cabinet makes its call. And as people know, it's about cases, and then when we get to this stage in an outbreak we are drilling down into what we know about the number of mystery cases: do we have any links that we can find for them? And so that's the information that Dr Bloomfield brings forward to us. The reason I made reference to testing was if testing numbers stay high and we're still seeing case numbers coming down, then we've got a confidence that we really are capturing what might be out there that we don't know about. But, obviously, the more mystery cases there are, the more challenging it is to be able to come to that conclusion.

Dr Ashley Bloomfield: Yeah, just to back that up, and, really, what we're wanting to do is get to the bottom of any of these cases and see if we can find out where they are linked through to other cases and, importantly, whether those links show other potential chains of transmission. So by far the best way to do this is to do the surveillance testing and the testing of people who are symptomatic, because, even though some people are asymptomatic with COVID-19, most have some symptoms, and so testing of symptomatic people is still the mainstay of the testing in Auckland this weekend.

Media: Can you confirm that the vaccines have arrived from Spain, and some health experts are calling for them all to be kept in Auckland to help vaccinate people there—is that something you're thinking about? Is that necessary in terms of logistics?

Hon Grant Robertson: I can certainly confirm they've arrived. I saw a photograph of the plane's wheels hitting the ground, so that's excellent news. In terms of that, no—I mean, we have a very clear roll-out plan and strategy. Obviously, there's a big focus on Auckland in any event, but the Ministry of Health works closely with district health boards around the country to make sure that we get those vaccines and we put them out. Bear in mind this is all about making sure that we can keep the momentum up of the fact that we're ahead of where our plan was, and right now, today, it's not a matter of there being any issue if people in Auckland want to be vaccinated. This weekend, there are going to be enormous opportunities for people to go out and get vaccinated. There are spots available for people to go out to get vaccinated, so this is not about a shortage in Auckland. We now have the vaccines on hand to keep our momentum up, and that's what we plan to do.

Media: Just on the resurgence support payment—I mean, this will come as welcome news for a lot of businesses who have really been doing it tough, but a lot of them are complaining about the tax element of this. Have you given any thought to (a) actually increasing the

support payment as a bulk per that \$1,500 and per employee, or (b) just removing the tax altogether?

Hon Grant Robertson: We haven't given consideration to changing the criteria. One of the things that I think's been really important through this process is we've tried to be consistent so that people can know for sure about their eligibility. We've always got to look at this as a balance. We've got to make sure we're providing the support that we can to people. We've said from day one we're not in a position to be able to pay the whole wage bill of the country; that we're here to provide support and assistance to businesses. We've had a lot of conversations with business groups about this and I do think one of the things that's important about the resurgence support payment is that it applies at level 2 or above, and so for some of those businesses who've found it difficult adjusting to the new rules around Delta alert level 2, this is something that they will be able to get.

Media: But those same businesses say that they were blindsided by level 2.5 with the Delta too, because it was just told to them a day before it was supposed to happen. Fifty people as opposed to a hundred is a massive change for a bar or a restaurant, and some of them are now calling for a level 2.5 wage subsidy, or an extension of the wage subsidy at this Delta level. What's your response to that?

Hon Grant Robertson: As I say, the response we've put out today is to have an additional resurgence support payment and a commitment to further ones if we stay at alert level 2 or above. We think that is the best and most balanced response at this time. Again, the wage subsidy scheme's well understood, it's well understood at the level that it kicks in at, and bear in mind those businesses who can relate their revenue drop to those heightened alert levels in Auckland can still claim it, even though they might be at level 2.

Media: But the scheme has changed since it was last time. There was an understanding about the wage subsidy scheme in level 2, but level 2.5 is a whole different game. So isn't there more—wouldn't it make more sense to actually forget about the fact that it's understood and just give them more money, because what's going on is very un-understood?

Hon Grant Robertson: Ah, yeah, I think, in fairness, that while for some businesses it definitely is providing different challenges, we're trying to deal with that through the resurgence support payment rather than the wage subsidy payment. The wage subsidy payment is about keeping that employer and employee relationship going. The thing about resurgence support is it can be spent by the business on whatever they need, and so we think that's the correct and flexible response that's needed in alert level 2 this time.

Media: Dr Bloomfield, can you just talk us through the latest Middlemore patients? Are you confident that the individual was honest about their symptoms, and what was the later police involvement?

Dr Ashley Bloomfield: So, just in terms of the patient, yes, I'm confident that the patient sought care, and was open and honest about symptoms, and that the appropriate care was provided. And a swab was taken as a surveillance swab that is done as part of the management in this situation, and it was appropriately done. And the police involvement was because the person had self-discharged and the result came back afterwards, the assistance of the police was sought to help find the patient as quickly as possible.

Hon Grant Robertson: And, obviously, Counties Manukau Police have issued their statement where they've indicated that they had been at the address on the Wednesday on a different matter.

Media: Does that sell the case for that rapid testing for people if they go on to those sort of scenarios?

Dr Ashley Bloomfield: Well, it wasn't rapid testing; it was just a standard test that was done, and it was particular to the service and the protocol that is used in this instance. And it was additional to the screening that is done on hundreds of people across hospitals in

Auckland and elsewhere across the country in this sort of situation to identify those who might be at higher risk of having COVID and those who are not deemed to be at a high risk.

Media: Dr Bloomfield, the Ministry of Health confirmed last night that advice was sent to Minister Hipkins on 27 August around making pre-departure tests necessary for all Australian states. There was advice that was given from MIQ/MBIE, and it included support from the Ministry of Health to implement that. However, on 25 August, so two days prior, MIQ on their website had already announced that pre-departure testing was going to happen for those return flights in September. So have MIQ kind of got ahead of the Ministry of Health there, given that the advice didn't go to Minister Hipkins until two days later? And then, I guess, second to that, Minister, given presumably Ministers make those decisions and the pre-departure testing announcement came in on 1 September a few days later, why was MIQ announcing it a week before it had been enforced by Ministers?

Dr Ashley Bloomfield: I don't have any particular insights into why it might have changed on the MIQ website. What I can say is, just to reiterate what I said yesterday, when we put up the initial advice around not requiring pre-departure testing for people coming back from New South Wales earlier on, it was also signalled in that advice that Australia would be removed from the list of countries with an exception to pre-departure testing requirements, and the timetable for that was laid out. And the advice has gone up and the decision's being made in accordance with that timetable; in fact, probably slightly sooner than the original timetable that was laid out. And it may well be, and I can't speak for MIQ—I think you'd have to go to them, but it may well be they were just letting people know ahead of time the requirement was coming in, because of that period people would need to get the test.

Media: What does that signal look like though? I mean, did the Ministry of Health put out a press release or—I'm just unsure of what the signal was.

Dr Ashley Bloomfield: I'm sorry, what's the question here?

Media: So you said that you had signalled that you were going to make pre-departure testing necessary for all Australian states, but what does that signal look like?

Dr Ashley Bloomfield: Oh, we signalled in the advice that went to Ministers at that time. So that was part of the decision was an agreement that, yes, over the next few weeks the work would be done to remove Australia from that list of pre-departure test requirements.

Hon Grant Robertson: And just in answer to your second question, Jo, yeah, it would be my expectation that a decision like that would come through Ministers. I don't have any information about why MIQ might have done that. We'll follow that up with Minister Hipkins' office and get back to you.

Media: Dr Bloomfield, of the cases that have been infectious in the community for the past few weeks, is there any indication that any of them have led to new infections or—you know, recalling that in the early stage of the outbreak most locations of interest didn't result in new infections?

Dr Ashley Bloomfield: I'll have to come back to you on that. There is quite a number, and it's just we'd need to come back, because for some of those there may have been infections in the workplace—that was some time ago, but I also know that two days ago there hadn't been an infection in the workplace from an essential worker workplace since 31 August, so it's just whether any have happened from that, and we'll come back to you on whether any of those exposure events have led to newly identified cases.

Media: Yesterday's 13 cases, one was not a household contact and also one case was infectious in the community. Were those the same person or was there a household contact who was infectious in the community and should they have been out there?

Dr Ashley Bloomfield: The information I've got doesn't tell me that, because it's a summary, but we will come back to you with that specific information.

Media: Dr Bloomfield, do we need more randomised surveillance testing, not just for symptomatic people, given that we've got this person who came to the hospital who seemingly had no COVID symptoms but was found to have COVID? And also there's quite a high proportion of Aucklanders now who will be partially or fully vaccinated, which does not mean they cannot be infected but it does mean that they're probably not going to have any symptoms if they are infected, so is there a case to be made for more of that kind of randomised supermarket surveillance testing at this point to make sure that there's not COVID in the community?

Dr Ashley Bloomfield: And that's actually what's happening. So there's a mix, at the moment, of surveillance—that is, essentially, asymptomatic testing of essential workers, and that message has gone out through a number of employers to do that, and specific pop-up sites at, particularly, supermarkets to test all the workers in three supermarkets over the last two or three days. But some of that focused testing in different communities and at different locations of interest is designed to capture asymptomatic people for this very reason, that if people have been vaccinated, they may not be symptomatic, and there are some people with asymptomatic infection. So that's not necessarily randomised, but it's certainly asymptomatic surveillance testing.

Media: Is sewage testing a little bit—(a) it's not sensitive enough to be able to tell in Auckland whether it's widespread or just present? Because, obviously there's some COVID in Auckland, we all know that, there's definitely some in MIQ. Can you use this sort of testing to work out if it's two or five cases, or is it not sensitive to work the difference between 100 cases and 10?

Dr Ashley Bloomfield: Yeah, it's very sensitive—in other words, you can have just one person shedding virus, and this is what happened recently with the Rotorua positive result last week. But at the moment we've had over 800 cases, and many of those—even those who have recovered—will still be shedding virus. So we're getting positive waste-water testing results as expected. What we are looking at is whether there could be some more specific, very location-specific waste-water testing to see if it's an area that we're worried about. And if that produces a negative result that is helpful, but at the moment there's just such widespread infection that—

Media: On the vaccination roll-out, we've seen quite a drop-off in vaccines in the last week compared to the two weeks' prior to the drop-off, which were obviously really high. Some areas are already at 70, 75 percent vaccinated, places like Nelson Marlborough or the [inaudible]. Are you starting to see those areas plateau, where you've kind of reached all the easy to reach people and now the harder to reach people are the ones you're trying to get, or is it not that complicated?

Hon Grant Robertson: I think the first point to note, that even at 60,000 vaccinations, that is still a higher rate than we had expected some time ago. It's quite clear that during alert level 4, when the whole country was in that place, there was quite a lot of focus for people around getting out and getting vaccinated, and so those numbers have come off a little as other parts of the other country have come down to alert level 2. Again, the Ministry of Health work really closely with the district health boards around the distribution of vaccine to sit alongside where they think they're at and, you know, the particular areas they're going into. We really have to emphasise, just again, we're now in a position where everybody over the age of 12 can get out there and get a vaccine. So we will be targeting our messaging, we'll be targeting our programmes to pull groups through all the time, but right now it's up there for everybody to get out and be vaccinated.

Dr Ashley Bloomfield: There's no doubt we will see, as areas get to higher vaccination levels, the rate will start to slow down, but we've got over 90 percent of our over-65s vaccinated, on average, around the country. That's a target I think every age group and ethnicity group and region should be aspiring to, and it shows what's possible if we make it widely available. So there's plenty of capacity, so I encourage everyone to go and book, or go and be vaccinated.

Media: Can I just ask what the Government's stance is on vaccine passports being used domestically? For example, entry into events, restaurants; and are there plans for the Government to legislate around how they can be used?

Hon Grant Robertson: Yeah, so it's very important when we use that phrase, "vaccine passport", that obviously there's a lot of work going on about what needs to happen in terms of travel overseas to make sure that have that in place and so that we can be consistent with other countries and other jurisdictions. There is a different conversation to have about what happens in terms of venues or businesses, and that conversation is under way, so I'm not going to speculate today on where it's going to end up at. Clearly there are a number of organisations who are already giving thought to this in the context of their own employees. And obviously that's an area that's new again, and so employment law will evolve around that, I'm sure, but for now we're saying to people that for a new contract obviously you can do that, but you need to be talking to your workers for an existing one. So where it then goes, and whether the Government ended up in a legislative position, is now the discussion that's under way.

Media: Dr Bloomfield, a lot of people on social media are considering you a reo Māori hero for normalising te reo Māori in these 1 p.m. press conferences. What do you make of that, and with the Māori language week on us next week, do either of you have plans to celebrate?

Dr Ashley Bloomfield: Definitely have plans to celebrate and contribute as I can to Te Wiki o te Reo Māori next week. I don't see myself as a reo hero, that's very nice; I just think it's a real privilege that we can use te reo in this country, and I just love the fact that it's increasingly used in every-day life here in Aotearoa.

Hon Grant Robertson: One thing for me is it's a little bit disappointing that Parliament's not sitting in Te Wiki o te Reo Māori this year, because it's always been a great platform for us as politicians to be able to use it, but we'll make sure that we do through this week. For me, it's been a real journey. I'm a boy brought up in the South Island and didn't have a lot of exposure to te reo Māori through my own personal life that has occurred, and so I try to use it as often as I can, and I will try to do that next week, so kia kaha te reo Māori.

Media: Dr Bloomfield, this exposure event on 23 August is quite a while ago. Why has it just popped up now?

Dr Ashley Bloomfield: This has been identified because these cases have just been found and confirmed in the last day or two. Their onset of symptoms was only a week or so ago—less than a week or so ago. But because of this pattern with the whole genome sequence and the concern that there could be an intermediary case, Auckland Regional Public Health has gone back 14 days from their onset of symptoms to look at possible exposure events in the community, and this is more about source investigation and the possibility of other people who were infected by the same source, so that's why it's just come up now.

Media: And Grant Robertson, you mentioned that most people are expecting the economy to bounce back well once we're through this, sort of, latest outbreak. Compared to last year, I guess, a lot of that demand side of recovery was driven by the housing market going a bit nuts, and obviously you don't want that this time around. So what's kind of picking up the slack of—what's filling the hole in the housing market?

Hon Grant Robertson: Well, I don't know if necessarily I'd look at it that way. The point that I'm making is that, you know, the feeling that people have right now when they're in a period of time where perhaps they can't trade or they're limited in their trading, they do need to reflect on the fact that when we come out of this, there is often pent up demand, which you see. Not all of that was about the housing market; some of that was in consumer spending. So we know—we've shown our level of resilience. Clearly the housing market's in a different place right at the moment. We've put in place different policies, and the Reserve Bank has as well in the meantime, so that will be different. We also have to take ourselves back to just a few weeks ago, where the biggest conversations from, for example, the hospitality industry

were about their access to enough staff to meet the demand that they had. So we were seeing an economy that was going strongly, and I expect that when we come out of this that will continue.

Media: In Australia, in particular in New South Wales, there's a growing solidification of their reopening plans. But here it seems like there's a bit of backsliding on previous plans, you know the Skegg reopening stuff that's been thrown into some doubt by Minister Hipkins' comments in the House then Ardern's comments this week. What is the status of those plans? Is there any urgency about redoing it, or are you just going to wait out and see, sort of, how we go through this outbreak?

Hon Grant Robertson: Yeah, I think it's important to note that we continue with that work. So for example, the pilot for people to come back into New Zealand and do self-isolation—that work's continuing, and we will roll that plan out over the next month or two, so that continues. What Minister Hipkins and the Prime Minister have been referring to is in each outbreak and in each situation we learn more. We learn more about the virus, we learn more about what our response to that is, our level of vaccination, the level of vaccination in other countries, and so it's really just about learning those lessons. So that reconnecting New Zealand plan is still the plan; it is still what we are working towards. Obviously, when you're dealing with an outbreak, your focus is getting on top of that. But both Professor Skegg and Prime Minister Ardern, when the speeches were made across the road, referenced Delta, talked about the fact we're in a Delta environment, but we've got to keep learning.

Media: Similar to what Jason was asking before about the inability of this Government to plan in long term that is due to Delta, isn't it? I mean, on Monday it seemed like you came up with the Delta 2 rules, announced them, and then caught up, and, you know, everyone's sort of had 48 hours to adapt. Is it just impossible to plan into the distance while this outbreak's going on?

Hon Grant Robertson: We can plan. We do plan, we set frameworks, we make scenarios, we do all of those things. And then we end up in an outbreak. And when we're in an outbreak, we listen to the advice that's given to us by our health experts. That's what's served New Zealand incredibly well over the last 18 months is that we have listened to science, we've listened to our experts, we've adapted when we need to adapt. And we got the advice around what Delta level 2 would look like, we considered that, we talked it over with Dr Bloomfield, and then we made the announcement that we made. As a country, that is what's worked for New Zealand, and I recognise when there is change it can cause stress and difficulty for people, but what we're doing here is following the advice we get.

Media: Just a question on Afghanistan: the first commercial flight with foreigners on board left overnight from Kabul to Doha. What plans have the Government of New Zealand put in place to get stranded Kiwis and Afghans out on a commercial flight?

Hon Grant Robertson: So we've been continuing to work, since the rescue flights that we did run ended, with New Zealanders and those associated with New Zealand on the ground, to work out the best-possible way for those people to be in a position to leave, when they can leave. I don't have an update on that particular commercial flight, but those discussions have been ongoing, and I'm sure if there's anything to update on that we will.

Media: And could I just ask Dr Bloomfield: could you confirm if it's OK, under level 4, to cycle 5 kilometres from your home with someone from your bubble and not be wearing a mask?

Dr Ashley Bloomfield: Ah, yes it is. The Prime Minister has earlier talked about if you are keeping well away from other people and you're undertaking what may be exercise on a more vigorous side, yes, that is fine, and being outside, of course, is a much lower risk than inside.

Media: What about if somebody's swimming in the ocean? Is that—

Dr Ashley Bloomfield: Well, swimming in the ocean is not actually allowed in alert level 4, so it's a moot point.

Hon Grant Robertson: Yeah, and you shouldn't be on your bike in the ocean either, Jason.

Media: President Joe Biden is mandating vaccines for potentially 100 million Americans, including health workers and public servants. Is New Zealand going to follow suit?

Hon Grant Robertson: So, as you'll know, we've already put in place those requirements around those who work at our border and those who work in other parts of that outward-facing part of what we're doing. We've been working closely with the health sector around vaccination issues, and if we do make that decision, it would have to go through the right processes as well, but at this point we have not made that decision, but it's an ongoing conversation about what the place of vaccines looks like. Do you want to add to that on the health workforce?

Dr Ashley Bloomfield: We certainly—well, one of the things I would say is the health workforce has got high rates where we've got the data from the DHBs, which is encouraging. But we've certainly given advice about which members of the health workforce it might be, as part of our overall response, we might create an expectation of being vaccinated, and that advice has been going through the process.

Media: What is that point that you would look to do that—if you get to sort of the 80 percent and it's stubborn to get beyond that, what is the point that you would then make the call to perhaps bring in mandatory vaccination?

Hon Grant Robertson: I don't think it's about a particular percentage at this stage. We're really optimistic and actually pleased with the way that New Zealanders are responding, and the very best thing we can do is get vaccinated and encourage our friends and our family to do the same. So we haven't set anything based on a percentage; we'll consider how we're going and then we'll make decisions after that.

Media: There are reports of bad behaviour to retail staff who ask patrons to put masks on. Are you considering strengthening the mask mandate; and if not, why not?

Hon Grant Robertson: I've seen some reports around those who, for medical reasons, are not able to wear masks, and we've all got to respect that—that there are people who cannot wear masks, and when that conversation occurs, it should be a respectful conversation between people there. Obviously, we've made changes to the mask mandates recently, and any time we make a change, it does take a little bit of time to bed in for people, but these are important changes in a Delta environment to keep us all safe. So I'd just ask for there to be respectful conversations to understand that the rules have changes, and sometimes people will take a little bit of time to catch up with that, but we do need them to obey those new rules.

Media: And Dr Bloomfield, just back on the Auckland Hospital, what do you say to doctors, nurses, and patients who feel they are at risk of catching COVID at Auckland Hospital because of the visitor guidelines that are currently in place?

Dr Ashley Bloomfield: Then they should keep talking to leaders of the organisation, and, indeed, that's what our response was to the NZNO delegates there who were concerned last week. The staff are really the make-up of the organisation, and it's within their power, and it's the right place for them to have the conversations with the management of the organisation to make sure that the policy can be implemented safely.

Media: Just a question about mortgage lending. The Reserve Bank has proposed tightening loan-to-value ratio restrictions for owner-occupiers. It's released a consultation document that showed that if house prices fell by 20 percent, only about \$5 billion of mortgage lending done last year would be in negative equity. That's actually a really small portion of all the mortgage lending, so I'm just wondering if you are comfortable with the way the Reserve Bank is exercising its sort of powers as its financial stability kind of mandate?

Hon Grant Robertson: Yeah, and obviously it is a consultation document, and that's the first really important thing to say, that this is an opportunity for people to have their say about it, and I'm not going to pre-empt and get ahead of that process.

What I would say is that the advice I've seen is, while I understand the point you're making about the size of that, some of the advice I've seen was that there has been quite a big growth more recently in that space, and so that is, I think, the point the Reserve Bank are making. More broadly, as you know, when it comes to debt-to-income ratios, we've said that they can only brought in if we can limit the impact on first home buyers. Loan-to-value ratios are already in place, and we didn't have that specific requirement in around then.

Media: Some experts in this area are saying that it seems like the Reserve Bank is being quite paternal and targeting first home buyers, because they're the ones that are actually most at risk of being in trouble if house prices do fall. And actually that the financial stability of the system as whole—which is the Reserve Bank's job—is not actually at risk, and that the Reserve Bank's picking certain groups, like first home buyers, and really targeting them with this proposal. And it's also said that even though it's a proposal, the Reserve Bank will probably go ahead and do it. So I'm just wondering if you are happy with the way it is exercising that power?

Hon Grant Robertson: Look, I think, again, it is a proposal. I think Reserve Bank's job, in terms of managing financial stability, is both an overall system one, but they will inevitably look at particular groups, because it is important—and many, many times, have said, people, when they take on mortgage debt, need to understand that the interest rate they take it on at might not be the interest rate that they keep paying it at. So I think the Reserve Bank's role is both a macro one, but also to look at individuals.

Media: Can I just ask a follow up on that? Just on interest deductibility rules, as well—that rule change is meant to kick in on 1 October, but we're still yet to see exactly what those rules will look like or even a draft of what they will look like. There are a lot of people that will be affected by this. Is it good enough that we're three weeks from when this rule is meant to take effect and we still don't know what that's going to look like?

Hon Grant Robertson: Yeah, so first point to make is that the policy decisions have been made and announced. What this is about are the matters of detail that go with that. We always said we would have it out by the time that they came in on 1 October. Minister Parker and I have been working through that, and I'm sure there will be an announcement very soon.

Media: Aucklanders have obviously had a tough time in the last several weeks and, I imagine, will be holding out for some good news come Monday, I guess. What can you say to them about how likely—all things tracking the same, with the numbers decreasing—there will be an alert level change on Monday? What are some of the key things you'll be looking at, and, I guess, are there any outstanding areas that, you know, you really want to get some more clarity on around that?

Hon Grant Robertson: The thing that I've learned over the time that we've been doing this is that we wait for the very latest advice. And—as I think I've said before—Dr Bloomfield comes into our Cabinet to give that advice to us on Monday, and so we wait until we get the final advice before we'll say anything around whether or not we feel good, bad, or otherwise.

The things that we're looking for remain the same things that we've been looking for all along, that is: that case numbers are coming down; that is that we know as much as we possibly can about the cases; that they're connected to one another; that we don't feel that we've got chains of transmission we don't know about; and that we've got the levels of testing, as I mentioned before, that give us confidence that the numbers are telling us what we want to hear.

I absolutely understand for people in Auckland that they will be wanting to see their alert levels come down. They have been doing it tough, and we all really appreciate what Aucklanders are doing on behalf of the rest of us. I would also say that the thing that's served

us well—as well as listening to the advice of our medical and scientific experts—is to be careful, but also to make sure that when we do a job, we do it once and we do it right.

Media: Back on Afghanistan, there was this international ministerial meeting yesterday. New Zealand wasn't invited—was that a snub?

Hon Grant Robertson: I'm sure it wasn't, but I don't have any information about who issued the invitations.

Media: OK, good. And just, on a related question, New Zealand is scheduled to play Afghanistan in the world T20 in November—do you think that that match should go ahead?

Hon Grant Robertson: I haven't had any information as to the way that New Zealand Cricket is looking at that. I've been following what Australian cricket has been doing. Ultimately, in the end, those decisions will get made by New Zealand Cricket and the International Cricket Council, and we'll follow developments closely over the coming months.

Media: Do you have an opinion?

Hon Grant Robertson: I'm not going to venture one today.

Media: Sorry, just on Zane's question before, because he was alluding to a specific video of Siouxsie Wiles being caught—well, not caught, but being at the beach, and then somebody else who was with her going for a swim. Have you seen that video and do you think that there were any level 4 protocols broken in that video?

Hon Grant Robertson: I don't think I've seen it or have—

Dr Ashley Bloomfield: I haven't seen the video. I've had a message from Siouxsie who described what happened, and, from what she told me, it didn't sound like protocols were breached, and I don't think that the person who went in the water that what they did could be described as a swim.

Media: So she proactively reached out to you after the video was made public?

Dr Ashley Bloomfield: I know Siouxsie quite well and, like me, she has got a bit of a public profile and so there's—often when these things happen, there's speculation and interest in them, so she reached out to me to just explain to me objectively what had happened.

Media: Sorry, sorry just—doesn't she have an obligation, as somebody that's high profile, to not just be following the rules, but to be very high above them and there can be no room for any misinterpretation? Isn't there that sort of obligation?

Hon Grant Robertson: I think you've heard from Dr Bloomfield the explanation that's been given. Everyone should follow the rules.

Media: Minister, last time Wellington was emerging out of the lockdown, public servants were a bit lax—well, not lax, they were a bit slow coming back to work. A lot of Lambton Quay businesses were very upset about this. There seems to be a similar thing happening now. You're both the finance Minister and the Minister—or MP for Wellington Central. Are you going to make similar kind of pronouncement this time and tell public servants to, you know, come back to the office? And also, as the member for Wellington Central, do you think more should be done to allow cafes to use car parks and footpaths to extend out and be able to operate more safely?

Hon Grant Robertson: Firstly, I'd just make sure that when I answer questions, I wouldn't describe that as a "pronouncement"; it's answering questions. Look, we've certainly seen, I think, this week, a similar situation to what we saw last time, and I think that's just about people just adjusting themselves back to the fact that we've come to level 2, and even in this workplace here, you'll see that next week will look different from this week, and the week after will look further different. So I'm confident we will see public servants returning to the CBD next week, and carrying on from there as well. I certainly want them to, as the MP for Wellington Central.

In terms of the answer to your second question, obviously, that is a matter for the Wellington City Council. As Wellington's notoriously balmy weather today is exhibiting, sometimes being outside is not as easy as it might be if you are dining in Wellington. But, certainly, I'd like to see more of that in Wellington generally, and I hope the Wellington City Council will work with businesses to support them to be able to provide outdoor dining spaces as they can.

Media: Just going back to the vaccine passport. What conversations is the Government having with other countries to make sure our vaccine programme is recognised? For example, the UK doesn't recognise it at the moment.

Hon Grant Robertson: Yeah, so those conversations are happening as we speak. As you can imagine, Cabinet's been discussing issues to do with the vaccine passport; Ministers have been, in recent times, and it is important that we align ourselves with other countries around that. This is clearly a developing area. Australia, the UK, others, they'll be countries that we will be talking to, because we do want to make sure that when the time comes for New Zealanders to be travelling around the world, that we can do so and be confident about the arrangements we've got. Have a good weekend, everybody.

conclusion of press conference