## ALL OF GOVERNMENT PRESS CONFERENCE: TUESDAY, 21 SEPTEMBER 2021 HANSARD TRANSCRIPT

**PM**: Ngā mihi o te wā ki a koutou. Today, I'll go over changes to the COVID-19 Public Health Response Act, including increases in infringement fees for breaches of the Act. But first, I'll hand over to Dr Bloomfield to give us the latest case numbers for today.

Dr Ashley Bloomfield: Thank you, Prime Minister. Kia ora koutou katoa. So today there are 14 new community cases to report, all in the Auckland region. One of these new cases is recorded at Whakatīwai, and it is a household contact of the earlier reported cases in that household. It is counted in the Auckland totals as that falls under the Counties Manukau DHB catchment, and that household is being managed by the Auckland Regional Public Health Service. So that takes our total number of cases in this outbreak to 1,085, and of those, pleasingly, 790 have now recovered. In addition, there's one new case in returnees in managed isolation.

Of today's 14 new community cases, only one is considered not linked at this point. Once again, most are household contacts already in isolation, and several others are known close contacts. Investigations into the connections of today's remaining case are ongoing, including the interviews.

Back to yesterday's five unlinked cases, four of those are closely geographically linked to existing households that have cases, and there are strong leads. Just one is still under investigation. Obviously, that lower number of 14 cases today is encouraging, but we do expect the numbers to bounce around a bit. Based on the number of very close contacts we already have in isolation, mostly household contacts, we would expect another 50 or 60 further cases just from that group over the coming week or two.

Now, I do want to acknowledge everyone in that upper Hauraki area for their fantastic response yesterday. Nearly 500 swabs were taken at Wharekawa Marae in Whakatīwai yesterday, with more than 400 results back so far—all of those tests negative. Still encouraging anyone in that area to go and get tested if you haven't already. We have testing centres opening today at Wharekawa Marae again, and there were over 100 swabs taken by 11.30 today, and Mangatangi Marae, with 38 people already tested by 11.30 today.

I also want to strongly encourage people living in that rohe to go and get vaccinated, if you haven't already. There are two vaccination stations close to the testing centres at EcoQuest Education Foundation in Whakatīwai, and, pleasingly, we'd had 26 people vaccinated there by late morning. Another vaccination station is at Maramarua Rugby Football Club, as well.

So today is a great opportunity to get vaccinated, take your whānau members aged 12 and over with you. Remember, vaccination is free, and we know it is highly protective against becoming very unwell with COVID-19.

So interviews have been undertaken with the vast majority of the students who are close contacts at Mangatangi School, and they continue with the remaining students again. Thanks very much to that whole school community for turning out in force yesterday and being tested.

There will be further waste-water testing in and around places and key locations in Hauraki over coming days.

Yesterday, the Waikato public health unit held a workshop with agencies and local iwi to determine what the community's needs might be during this time, and to respond to those. There are well-developed localised communication and support for the community that is within that new area covered by the section 70 notice. Ministry for Social Development has been working with iwi and supermarkets to ensure distribution of food to households in the area. Likewise, Hauraki Māori Trust Board's Manaaki Hub, which is funded by MSD, is providing food and other support to whānau there, as is Waikato-Tainui. So thank you very much to those organisations for their support there.

Just an update on the section 70 notice, which was published late yesterday, we're providing further advice today to people living in that rohe which is covered by the section 70 notice.

This includes Kaiaua and Whakatīwai communities, who will be able to cross the Mangatawhiri boundary to travel 30 minutes south-west of Pōkeno, if required, for essential supplies, such as groceries and animal welfare reasons. It's important that people understand what is and isn't able to be done under the notice, and so we have put that information up on our website. It is very similar to the sorts of restrictions in place in alert level 4. So whilst people can travel to Pōkeno simply just to get essential supplies, they can, of course, travel if they need to get healthcare, and that includes, if required, up to Middlemore hospital.

I do know that there were some people who travelled out of alert level 2 into that area yesterday—for example, media reporting purposes. There were healthcare\* workers—those involved in swabbing—and police and other emergency services. If they have travelled back into alert level 2, they will not be required under that section 70 notice to isolate if they took appropriate precautions consistent with alert level 4 while there yesterday.

On primary care, I just want to thank all our primary care providers in Auckland, who have done a magnificent job, and that includes general practice, our Māori and Pacific providers, our urgent care clinics. It's been a mammoth effort, with over 200,000 swabs taken in primary care since 18 August. And the biggest day was on 20 August, with 19,000 swabs. Just to put that in context, the week earlier, it had been an average of a thousand swabs a day. So my sincere thanks, once again, to our primary care colleagues there.

On the boundary exemptions, following yesterday's announcement that Auckland would move to alert level 3 from this evening, there's still very tight restrictions on people being able to travel out of and into Auckland. Personal travel across an AL3-2 boundary is still very highly restricted, and it remains high as we still need to contain the remnants of the outbreak in Auckland.

One area that we will be allowing one-off journeys is for people to attend funerals or attend to or visit a dying relative or accompany a tūpāpaku, or deceased person. I know that not being able to do these farewells has been one of the very toughest and most distressing aspects of alert level 4. This travel under alert level 3 will require an exemption from the Ministry of Health and it will still have strict criteria. For example, it will need to be a first-degree relative, such as a parent, a sibling, child, or partner, or very close whānau member.

It's important to repeat: it will be in limited numbers and immediate family only and will require other appropriate measures being in place, such as social distancing and the use of face coverings. One requirement on people who are granted such exemptions is they will require a negative swab and test result within 72 hours of their travel. Again, part of our overall approach at the boundary to reducing the risk of the virus leaking out of the Auckland area. We will also be requiring evidence in support of applications such as support from a local funeral director, hospice, and/or health professional.

And, finally, today, I'd like to note on a positive, or a positive vein. As you would have seen, a very early announcement from Pfizer of the results of their trial of the COVID-19 vaccine in children aged five to 11, which shows a favourable immune response and safety profile in this age group. Whilst at this stage the information available is limited and the detail is still to come, it is promising news. It was undertaken—this trial—in around 2,000 children. It used lower doses—about a third of the dose used in adults—and given approximately three weeks apart. Importantly, it showed a similar antibody response and a similar safety profile to the age group of 16 to 25.

Obviously, we will be looking very carefully at those data when they are available, and we are aware that Pfizer will be submitting the evidence initially to regulators in the US and Europe in the near future. We will be following that process with interest, and very closely. We will, of course, follow our usual rigorous, regulatory, and approval processes here once Pfizer submits the data, and we will do that as quickly as possible when the time comes.

Back to you, Prime Minister.

**PM**: Thank you, Dr Bloomfield. As you will have heard from Dr Bloomfield's report, it appears that all but one of our cases at this stage appear to be linked to our current outbreak

and are mainly household contacts of existing cases. But the best way to continue to flush out mystery cases and give ourselves comfort that they are not more widespread is to test, test, test. It is pleasing to see a lift in testing across Auckland, with 8,588 swabs taken yesterday, which is a good result for a Monday, but it is critical that we keep up those testing rates.

There are 24 community testing centres available for testing across Auckland today. I want to highlight one of those specifically. We have a new pop-up testing centre at the Manukau Sports Bowl at 1 Boundary Road in Clover Park, a new suburb of interest, which you would have heard me talk about yesterday. We are encouraging everyone in the Clover Park neighbourhood to go down to the Sports Bowl today to get tested so that we can be sure there isn't further transmission in your area.

I'll say that again. Based on a set of cases that we have in Clover Park that we believe there is a geographical relationship between, we are asking everyone in Clover Park to be tested. This is a rigorous and cautious approach. In addition, if you are a contact or have visited a location of interest at the relevant dates and time, or you're connected with one of the eight new suburbs of interest and have symptoms, even mild ones, please get tested and isolate at home until you get your results. But, again, that's a call-out to everyone in Clover Park. It is not a large geographic area but one where we have had enough cases within a tightly confined area that we want to take a really cautious approach. So we are asking people who may not have symptoms to be tested from the Clover Park area and you can pop down to the Manukau Sports Bowl to have that taken today.

Of those remaining suburbs that we're interested in alongside Clover Park, you'll remember the list—Mount Eden, Massey, Māngere, Favona, Papatoetoe, Ōtara, Manurewa—there we're still asking for people with symptoms or mild symptoms, if we need to take a broader approach in those areas, or if you were specifically asked to come forward for asymptomatic testing, please do so.

The COVID-19 Public Health Response Act was created in April last year to help us manage the virus and to deliver our stamp-it-out strategy. It provides specific emergency powers that require people to comply with COVID-19 public health restrictions such as alert level 4 rules, mask wearing, regional boundaries, and it also covers MIQ. Throughout our COVID work—and our success has been really based on the fact that people by and large have been really compliant, and that's meant on a number of occasions now we've been able to manage the virus successfully.

However, there has been the odd person that has broken the rules and put others at risk. Specifically, we've had some people break out of MIQ including, in a handful of cases, with COVID, who've posed a threat to the community. Once we put fines in place for this group, we saw the numbers attempting to escape did reduce. And you'll remember very early on we had some issues in this regard when we first established managed isolation. But each breach of the rules risks COVID spreading, so it's important the penalties reflect the seriousness of the actions. I should add, this is an issue that Ministers have been working on for some time. You'll recall when we first introduced our infringement fee for COVID orders, they've been set at \$300 and where that fine has been imposed by the court it's risen to \$1,000.

It's Cabinet's view that these fees don't properly reflect the significant social and economic impacts of a single case of COVID-19 getting out in the community and nor do they act as a sufficient incentive to play by the rules. And that's why the maximum infringement fee—the maximum infringement fee—will move from \$300 to \$4,000 for individuals. For companies, the maximum will go from \$300 to \$12,000. Where those fines are imposed by the courts, the maximum fine for individuals will move from \$1,000 to \$12,000 and, for companies, from \$1,000 to \$15,000. Again, those are maximums and, of course, the court will use their discretion and take into account circumstances in order to use that fees regime. These changes will take effect as early as November 2021 subject to the passing of the COVID-19 Public Health Response Amendment Bill and has really been in response to people's view

that we didn't quite have an infringement regime that reflected the severity of breaches that we have often dealt with.

A quick word now on Auckland's move to level 3, before we open for questions. If you're a level 3 worker returning to a workplace and you're not yet vaccinated, I've got a specific request for you today: get your first dose this afternoon before you go back to work, and there's a number of ways that you can. This will provide you with a crucial layer of protection in level 3, not just for you but your workmates and those who may visit you as part of your work.

So far, we've had 1,132,510 Aucklanders who've now had their first dose, which represents 79 percent of the city's eligible population, and I'm hopeful that we'll get to 80 percent very, very shortly. But every remaining unvaccinated person is a risk and poses risk, so my challenge to Auckland is now this: let's keep going. Let's see if we can get to 90 percent by the time that Cabinet considers our alert level 3 settings in two weeks' time. Now, that is an ambitious challenge but it is doable. I've seen modelling which suggests that if we go hard and do this right we can reach that goal, but it will require a team effort. It means that getting the vaccine yourself is not enough. You need to encourage and help others to do the same, whether it's answering the questions, supporting them to find information, or helping with a booking.

If you're looking for somewhere to get a vaccine this afternoon, there are walk-ins and drive-through options right across the city. You'll find them at healthpoint.co.nz. Another 20 GP clinics went live in Auckland last week, so we've now got 135 GP clinics, and another 25 expected to start this week. There are 62 Auckland pharmacies, and we're onboarding more of those as well. And today New Zealand Post is giving its staff, contractors, whānau, and members of the public the opportunity to be vaccinated at a drive-through clinic at its Auckland mail centre in Highbrook.

We've also seen great momentum in our Pacific vaccination efforts, and so just for today, for this slot, I thought I'd highlight just a few of those Pacific vaccination efforts in our Pasifika community. There's a pop-up event today at the Te Atatu Samoan Methodist Church. On Thursday, a Niuean vaccination pop-up will be held at the Church of Latter-day Saints in Mangere, led by The Fono. On Thursday, Friday, and Saturday, South Seas Healthcare in the Ōtara town centre is setting up a Cook Island vaccination pop-up. On Friday, there'll be a Samoan vaccination pop-up held at the Māngere town centre, led by Baderdrive Doctors, Southpoint Doctors, and Health Star Pacific Trust. These are just some really specific initiatives I thought I'd highlight, and I'll try to do a little bit more of that over future 1 o'clock updates.

So then it's up to all of us to get out there, to get vaccinated, and keep those goals in our sights. We're now open to guestions. Yeah. Benedict, and then I'll come to Tova.

**Media**: Do you really think increasing the fines will have an impact on people? Presumably people escaping MIQ aren't thinking about the size of the fine they might get, right?

**PM**: Yeah, Yeah, and there's always a balancing there, of course. You know, we've always got to make that people understand the rules, but also that they understand the consequences of breaking those rules. But I think the sheer magnitude of having someone with COVID-19 who breaks those rules, the impact that has on the community—we need to make sure that the fines really do reflect the gravity of the situation.

**Media**: Who in the car did that remand prisoner get COVID from, and which Auckland cluster was that person linked to?

**PM**: So we know who it is that they have been infected by and on what date they have been infected, and now we're working through exactly at what point and in what means the rules were broken. But we're going to continue working through that with the health concerns being our major priority. We need to contact trace around those individuals, and that is the most important thing for us to do at this point. We'll follow through on the rule breaking as we go.

**Media**: So which Auckland cluster were they linked to?

**PM**: So we have linked them. Genome sequencing has linked them to—I'd broadly define it as a workplace.

**Media**: And were other members of the Black Power gang in the car with the prisoner, and were any of the four stops that they made permitted or legitimate?

**PM**: So I can't give you details on the personal details of the individuals in the vehicle, but, of course, all of that is covered by our contact tracing and our public health work to make sure that we're covering off everyone that needs to be tested and contact traced. The second question was around those—so the bail conditions require that only necessary stops be made. I'm not in the position to define each of those stops as necessary or unnecessary, according to those bail conditions; that's for others. But what I can say is it was over the course of the morning that that person went directly to their place of bail and remain there for that entire time, so some short stops were made, and then they did make their final destination to the place of bail.

**Media**: Is anything being done to change the rules there? Are were going to see that happening—

**PM**: Yeah. So I think, look, regardless of whether or not the person was infected by those in the car or not, what is clear here is we need a set of tight rules that keeps the person who is ultimately COVID-free remaining COVID-free until they reach their final destination. So I've asked the Minister of Justice and the Minister of Corrections to work together to see if we can create some criteria that ensures if someone is leaving to a, for instance, level 2 environment, that either a person from level 2 comes and collects that individual, or Corrections is able to make the drop-off. That should cover off that potential area of risk.

**Media**: Thank you. The data from the last 10 days show that Māori now make up the majority of the cases by ethnicity. Is that concerning at all?

**PM**: Overall, 13.8 percent of our cases have been amongst Māori; 68.1 amongst our Pacific community. Every case is a concern for us—every one. But, of course, we do want to make sure that where we have communities where there is any additional vulnerability—lesser likelihood to access health services or any other health inequalities—then we need to absolutely do all we can to track down COVID very, very quickly, and that's where that community-wide testing is so important right now.

Did you want to, Dr Bloomfield, on that?

**Dr Ashley Bloomfield**: The only thing I would add is I just want to thank the Māori and Pacific providers, who right through the outbreak—initially, of course, the Pacific providers but, more recently, as we've had that increase in Māori case numbers, the Māori providers have been fantastic, working with [Inaudible] and so on, to help us get into the relevant households and communities and get the testing done.

**Media**: And are you confident that the Mangatangi Marae and the Wharekawa Marae have adequate resourcing, testing kits, vaccinations, and staff to do the work that's ahead of them for the next few days?

**Dr Ashley Bloomfield**: Well, the provider that's gone in there did an excellent job yesterday—hundreds of swabs taken. They'll be set up to do that again today, and I know that the DHB and, of course, our team at the ministry will be providing any support they need to support both vaccination and testing in those communities.

**PM**: We also understand that Waikato-Tainui are working alongside MSD around food distribution plans and a lot of work has already been under way, a local trust has been running food distribution—so really good early signs of support for the community from a really localised response. Our job's really to make sure that we're coming in and supporting that local provision.

**Media**: Just lastly, Dr Bloomfield, how long to you see the section 70 orders being in place for that Kaiaua area?

**Dr Ashley Bloomfield**: Well, at the moment, it's through to Friday. That was to give us sufficient time to make sure everybody who we thought needed to be tested could be tested. Given the great response yesterday and the rapid turnaround of testing, we'll be reviewing that on a daily basis, and we won't keep it in place any longer than it needs to be in place.

PM: Yeah.

**Media**: Prime Minister, what's the rationale behind an increase in times that a few people are being prosecuted—for example, the Wānaka case?

**PM**: Well, obviously, the prosecution decisions aren't ultimately made by us. We need to set up the framework and the infringements that are available should those prosecutions be taken, and I think, actually, from the general public, there would probably be a bit of a view that when you are putting people at risk, you do need to have an infringement regime that reflects the seriousness of some of that rule-breaking. So that's really what we're seeking to do. Where they're used and how they are used, what fines are awarded—that sits out of our hands.

**Media**: And are either of you aware of someone who snuck past security to visit a North Shore Hospital patient last week and is likely positive for COVID?

**Dr Ashley Bloomfield**: Yes, I'm aware of that case, and this is one of the ones we have reported today. And there's been a thorough look at any CCTV footage and the process at North Shore Hospital—

**PM**: Oh yes, I know the one.

**Dr Ashley Bloomfield**: —and there's a very small number of staff who have been stood down to be tested in the meantime, and that individual's been located and, obviously, been followed up appropriately.

**Media**: Are you concerned at all about sort of a risk both to staffing but also sort of that exposure it creates for the staff?

**Dr Ashley Bloomfield**: Well, I'm concerned if people are sort of deliberately trying to avoid the security arrangements in a hospital and putting both staff and, of course, very unwell people who are in hospital potentially at risk. So I know—well, we are working with the DHB to see if there is anything else we need to do to help support that sort of thing not happening again.

**Media**: And Prime Minister, do you have a message for that person who evaded security?

**PM**: Oh, I think they'll understand the magnitude of what's happened here. But, ultimately, we need to constantly be vigilant for every eventuality, so that's why, of course, we have measures in place to try and prevent those kinds of encounters. It's also one of the reasons we have such strict protocols on visitors, which I know is really hard for people who have a really legitimate reason for wanting to be in those environments. But it is all about keeping people safe.

Yeah, and then I'll spin around and come back on to this side, Ben—so Thomas and then Michael.

**Media**: Prime Minister, we've had another case of someone leaving Auckland, seemingly after the health work exemption to do something that's not—it's a man who's travelled to Canterbury to pick up a caravan and drive it across the country. What do you make of a case like this? Does this put the South Island at risk?

**PM**: Two things I'd say: first of all, people need to be responsible, and just remember that there is an entire city of people trying to do the right thing and those individuals need to as well. Then there's, more broadly, the settings that we have in place for the rest of the country. I would broadly describe level 2 as us continuing to be on high alert. It's not just

because there might be people who break rules; it's also because there will be people, or may be people who have legitimate reason for travel, like our recent freight driver, who may test positive. So it is a cautionary approach, just because we do have such a large part of the population who currently are at a higher alert level.

**Media**: Can I just jump issues to the Afghanistan issue now? All the sort of the second phase that you're taking advice on right now, could you be more specific about what sort of the issues at play are here? I mean, are you dealing with immigration issues, or, you know, the MIQ, demand on MIQ—

PM: No, I see that as secondary. There's really two things we're wanting to cover off with that further advice—two streams of work. The first is, as you'll be aware, we have people who already had legal status to be in New Zealand, be it citizens or visa holders, who were in Afghanistan at the time that we went in in order to try and bring those people home, not all of whom—and for some it may have been because they weren't even in the region—were able to make it on those flights. So we need to consider what are the alternative options we have to support those individuals to get home. The second stream of work is around, for those for whom there are ongoing humanitarian needs—they either may have links to New Zealand or they may not—what will New Zealand's ongoing role be around humanitarian assistance, be it through supporting people to reside elsewhere or general humanitarian assistance. So those two things.

**Media**: For the group that are already here, is it the case that everyone who was on those flights and has been brought into New Zealand under some visa or pretext—are they all going to remain in New Zealand or be granted visas, or will some be moved on elsewhere?

**PM**: Yeah, so, look, for the most part, they've sought to be in New Zealand, and for the most part because they've had connection here in some way, and so there you'd see a responsibility that New Zealand holds there. But what I've asked the team to do is to look at whether or not we, without breaching anyone's privacy, go through a bit more of a process of sharing a bit more of the breakdown of those who have already been able to return and those for whom we need to continue to assist.

**Media**: Is it the case that some people might have been evacuated from Afghanistan and won't be deemed to be suitable to continue to live in New Zealand beyond—

**PM**: For the most part, actually, a large portion were people who already had links or are family members. That's a large portion of those who were coming back. There were others who, of course, were part of those additional categories of having worked for New Zealand, but, of course, not all of them were able to come out in that first tranche. So for the most part they are people who have a link here. But, again, I don't want to go into too much detail lest I breach people's privacy, but we will look to a way that we can give a bit of a sense of where the bulk of those people sat in terms of their links to New Zealand or to New Zealand's work in Afghanistan. I did say I'd come across, and Michael's gone, so I'll—

Media: I'm doing Michael's.

**PM**: You want to take Michael's? I guess that's—yeah, no, that's fair enough, Claire. You can substitute.

**Media**: He wanted to ask about James Shaw's trip to COP and whether you were content with the size of the delegation he's taking. And also James Shaw said this morning that whether they go depends on whether or not they make it through the queue for MIQ. Is that because you've told them that's the only way that—

**PM**: No. No, no. So the first thing I'd say is that we've had over 160,000 New Zealanders come back through our managed isolation facilities—well over 160,000, now. We have had one Minister in that time travel out of New Zealand to undertake work on behalf of New Zealand as part of our important trade negotiations with the EU. This will only be the second Minister and delegation to travel since we instituted that managed isolation facility arrangement. I do consider New Zealand's presence at COP to be important.

Yes, we're all facing a global pandemic, but climate change is the most significant threat that we face for decades to come that needs a response from us now, and important negotiations happen at COP that we need to have a seat at the table around. We have looked at the delegation for COP and how we can maximise it with offshore representation, so New Zealanders who are either in post—but there are some technical experts. We will keep seeing how small we can make that team, but I have told the Minister this is an important piece of work for New Zealand, so we will work to find a way to secure a small number of spaces so that New Zealand can be represented at the table.

**Media**: So the Minister will get access to emergency allocations when people offshore trying to get home—

**PM**: 160,000—

**Media**: —to their dying loved ones won't?

**PM**: Five-thousand vouchers were distributed across people in the last release that we had just yesterday. Several thousand more will continue to be released over the course of the coming weeks and months. We have had one Minister take up a spot so far; this is only our second. There is a balance to be struck here between making sure that, yes, New Zealanders are able to return home—and I know many are seeking to do so for summer and to see family and friends, and I appreciate how important that is for them, but we here also need to enable a Minister to represent New Zealand at these important negotiations.

**Media**: But will he get an emergency allocation?

**PM**: I wouldn't describe it in that way at all. We have, of course, the ability to do small group booking allocations, and we've done that for business groups where there is a serious economic imperative. I see it as a small allocation, and, as you will have seen, we've had 5,000 people who were allocated yesterday. I'm seeking a small number to enable New Zealand to be represented at these important negotiations—and relative to that 5,000 and the fact we've only had one other Minister, I think New Zealanders will appreciate that.

**Media**: But do you understand how upsetting it will be for people who haven't been able to come home to say goodbye to dying loved ones?

**PM**: And we do have emergency allocations for that, and I don't intend for the Minister to take anyone's emergency allocation in order for us to be represented at these important negotiations. So I hope that clarifies that question for you, Jenna.

**Media**: James Shaw said that you were intending to go to general assembly this year if the outbreak didn't happen. Are you—

**PM**: Sorry, what was that, Ben?

**Media**: James Shaw said this morning that you personally were going to the general assembly if the outbreak didn't happen. Is that the case, or do you have any plans to head overseas?

**PM**: No, no, that actually wasn't the case, so no, no.

Media: OK, on a secondary issue—

**PM**: And, I guess, that's one point I would make: we have been very selective in the way that we have used travel for Ministers since this outbreak began. Obviously, there's been a number of events where we've decided it hasn't been the right time or the right priority, but there are some very critical events that we do need to be around the negotiating table for—trade is one of them, and I also see the COP negotiations as part of that as well.

**Media:** Will there be any more this year, do you think, for your whole ministry?

**PM**: We'll look to the future and give you updates, but you will know the UK and EU FTAs continue to be at a really critical juncture for New Zealand, and they are worth millions of dollars for New Zealand.

**Media**: During your media rounds this morning, you said something about you were going to give people some insights into what a difference vaccine can make once the modellers have finished some of that work. Can I just invite you to be clearer on that, if you are able to?

**PM**: So just that, really.

**Media**: Can I just ask: what is the team and when do you think you'll be able to share that?

**PM**: So the modelling that we've had previously that we've used from Shaun Hendy. So you will have seen that they've done their own work all the way through and they released some of that some time ago that did demonstrate a really high level of vaccination rate required as a substitute for public health restrictions. So they continue to do that work, and I thought it would be helpful once there's a bit more detail sitting behind some of those models for the public to see what a difference vaccination rates make. So that's really what I was speaking to and we'll look for an opportunity to just share that, but they're still completing their work.

Media: Days, weeks?

**PM**: I don't imagine it will be too far away, but I don't want to put deadlines in someone else's modelling. So I'll leave it at that, if I may.

**Media**: If over the next week or two the number of unlinked cases starts to rise again, would you be willing to put Auckland or other parts of New Zealand back into level 4, and what would the alternatives be, if not?

**PM**: Oh, I said, Mark, all of that is hypotheticals. Look, the recommendation that came from Health was that 4 had done the really important job of, you know, giving us a sense of whether or not we had that widespread undetected community transmission, and the view was that we didn't. But with those mystery cases, we do have other tools available to us, and you will have heard the experts talk about it today: testing, testing, testing. And so this is where we all have identified a geographic region of concern; we're now just going in and asking everyone to be tested. That's a tool that we can use alongside ongoing, very tight public health restrictions. And, again, the most important amongst those, alongside testing and people staying home if they're sick, is people not mingling with others. That still remains critical. The rest I really see as a hypothetical we're all working hard to ensure isn't a reality.

**Media**: This may be another one of those hypotheticals, but Michael Baker has said that it's possible to imagine a world where the Government might have to choose to keep Auckland or parts of New Zealand at a level 3 – style lockdown for many months until we hit the really high threshold of vaccination. Is that something you would ever entertain doing?

**PM**: Oh, well, look, actually, regardless, vaccination is important—regardless. Even in this outbreak, even right now and as of today in this outbreak, vaccination is important because we've seen the difference it's made in those individuals who have been vaccinated versus those who haven't. And there would be those who would say that even as we continue to stamp it out, vaccination will help us with that. So that, for me, is as much reason to highlight the need for vaccine, as is the role it will play going forward in our use of restrictions.

You will have heard me say, though, it is possible, if people keep turning out for their first dose—it is possible for us to get to 90 percent in a relatively short space of time, but we can only do so much. You know, we literally can take vaccines to people's neighbourhoods; we do need them to come out, and that's where I need family, whānau, friends. Don't be dismissive of people who say that they have concerns. Talk it out, provide information. That's what it's going to take, I think, for that last group of people to get over the line. Anything you want to further—

**Dr Ashley Bloomfield**: Well, just to reiterate the importance of vaccination, including in the modelling, and, really, the key thing about modelling—and I'm looking forward to discussing it more widely—is the higher the vaccination rate, the less the restrictions that one has to use, and that's not talking about alert level 3 or 4; it's the baseline—

**PM**: It's just day in, day out.

**Dr Ashley Bloomfield**: —day in, day out level of restrictions. And you might recall Professor David Skegg talking a few weeks ago about his preference not for us to have to wear masks. Actually, it would be nice not have to wear masks in our everyday life. That's what we're aiming for, and high levels of vaccination are what makes that possible.

**Media**: On vaccinations, on vaccine buses, how many are up and running, have hit the road?

**PM**: Six currently, and I understand it will move to 12 over time.

Media: Are they in specific areas?

**PM**: So they're in the Auckland region, and they are being utilised specifically by our Māori and Pacific providers, who are using the data they have available to them to identify areas where we need to increase vaccine uptake.

**Media**: And just on Judith Collins, is she a hypocrite for breaking the mask rule in Queenstown?

**PM**: Do you know, actually, I don't particularly want to get from the podium into what people should or shouldn't be doing. I think each of us does have to just take responsibility for what we are doing ourselves and do our very best to be the role models people expect of us all of the time. But I'm not going to get into picking out people's individual behaviours from this spot.

**Media**: That's not just about role modelling though, is it? She broke the rules. She was in a place where masks are required and didn't have a mask on.

**PM**: And, again, I'd say the same thing: each of us has to take responsibility, particularly when we're in these positions, to do our very best to role model at all times, you know, because people do look to us to follow the roles and so it's incumbent on us that we do our best at every waking hour of the day and no matter where we are in the country.

**Media:** Could she be liable for one of the new \$4,000 fines for not wearing a mask?

**PM**: That would not be for me to enforce or for me to advise on.

**Media**: And have any of your MPs broken any of the COVID rules?

**PM**: Yeah, well, I couldn't specifically speak to that from here, although what I would say is that I encourage all of our members to be really familiar with them and to just be the very best role models that they can at all times. And I only ask that of myself as well as the rest of the team.

**Media**: So how confident are you that level 3 will stamp out the virus in communities which are traditionally hard to reach, like gang communities, when it didn't at level 4?

**PM**: Yeah, so I think two things that I'd say here: that is where—the vast majority of time that we've stamped out outbreaks, it has been from level 3, and so I think it's important to remember that it is a really restricted environment that still does help us with that ongoing "stamp it out" approach. But we do have an extra element that we have haven't had in those previous occasions, and that is vaccines, so that's why we are asking people, regardless of whether they've been directly in contact or asked to do anything else—they can go and get vaccinated. And so that's, I think, a critical difference for this time that we're in level 3. That was actually a point that Dr Bloomfield made yesterday.

**Media**: Prime Minister, just on the prisoner going across the border, there's been about two dozen prisoners on remand being taken over. Is there an expectation or do you know if all of the carloads have been checked for their testing status when they crossed the border? Is there an expectation there?

**PM**: Ah, so, yes, you are correct, and that would not be unexpected, and the orders that we have in place for crossings do allow for individuals to return to their place of residence.

It's just the manner in which they get there that's really important. So you will have already heard me say that what I've tasked Ministers with is tightening up those requirements, because we know the prison is COVID-free; we need to make sure that the people that transport them take them directly back to a level 2 environment and pose no risk to anyone in level 2 in the course of that movement.

**Media**: So are the rules being tightened now just to ensure that everyone crossing the border are showing those testing results?

**PM**: So, ultimately, what you'd be looking for is either one or two things. If someone is going back to a level 2 environment, we know the prisoners are going to be COVID-free. The persons coming from level 2 we can feel pretty assured that they are as well. They need to come in directly, pick the person up, and return directly. And in that case that would be a set of circumstances we can consider low risk. If that can't be done, then we're seeking advice on whether corrections can undertake drop offs to try and reduce risk.

**Media**: And is there information about a schoolboy who went from Auckland to Dunedin without an exemption? Is there any update on that?

**PM**: I don't have an update on that.

**Dr Ashley Bloomfield**: No, I've just learnt of that in the last few minutes before coming down here, but that's obviously something we'll look into.

PM: Yup.

**Media**: In terms of the new penalties that you announced—the higher new penalties—are they going to be applied to everyone equally? Because you do have that Wānaka couple who still haven't—the Auckland couple who flew to Wānaka, who don't seem to have been charged or anything yet. I mean, do the rules apply to everyone?

**PM**: So we create the rules; we then create the penalties that can apply, and our job is to make sure that they reflect the seriousness of what we're dealing with here. And I think the community would expect that these penalties should sit at a higher rate than the \$300 they have been. We've done that, but, ultimately, politicians don't place the charges or then prosecute those issues. So then it does come down to those who have that responsibility to ultimately decide who does face infringements or indeed face charges.

**Media**: Do you have any concerns, though, about the length of time that it's taken to make a decision on that? Or is—

**PM**: No, no. That's not for me. We need to let others do their job.

**Media**: One of the concerns might be that if the charges—I mean, a lot of disinformation is getting into the more vulnerable communities and if they're charged for, for instance, attending an anti-lockdown protest and you've got people that are, arguably, breaching in a much more serious way by breaching that border, who aren't getting charged, are you sure that the fines won't be dished out in a way that increases inequality?

**PM**: Yeah, yeah. No, I'm confident that those who are involved in making these decisions will be looking to ensure that they're even-handed, in the way that they deal with each case. And that's why we have a system that allows individuals to make decisions based on the cases they have in front of them. Our job, though, is to make sure that they then have an infringement regime that reflects the seriousness of what we're dealing with, when people do openly and knowingly break the rules.

**Media**: Dr Bloomfield, just with the Pacific vaccination, there seems to be a slight confusion around consent of the vaccine with parent, should every child give consent for kids in that 12 to 15 age group to get the vaccine. Can you just clarify the advice around contacting?

**Dr Ashley Bloomfield**: Yes, and I know there's been particular concern in the Pacific community about this. So the approach is similar to what it is for getting medical treatment of any kind, and that is that if the health professional judges that the person can make a decision

for themselves, and that includes a child under 16, then they are able to give consent themselves. So saying, in doing that, in the case of the vaccination, if a 12- to 15-year-old is turning up without their parent and not able to get consent and our preferred arrangement is that the parent is there and consenting, then they are strongly encouraged—or if they're booking—to discuss it with the parent. But they are, ultimately, if they're judged to be able to make that decision for themselves, able to consent themselves. However, the way we're setting things up is to take a whānau-based approach so both parents and children 12 to 15 and the older teens can come in together.

**Media**: And that could remain consistent across, I guess, mass vaccination events compared to going to your local GP?

**Dr Ashley Bloomfield**: Yes, that's correct, because the vaccine is given, or supervised, by a registered health professional who has to in every instance go through a consent process. And, of course, they take particular care if it's someone younger, and if it's someone younger who is not with a parent, then that would be a very specific conversation.

**PM**: All right, thank you, everyone. We said we'd make it 20-to, so we'd best go.

conclusion of press conference