## ALL OF GOVERNMENT PRESS CONFERENCE: WEDNESDAY, 22 SEPTEMBER 2021 HANSARD TRANSCRIPT

Hon Chris Hipkins: Kia ora koutou. Good afternoon, everybody. Welcome. We'll start with some good news. A significant milestone for Auckland: on a day when our largest city has returned to COVID-19 alert level 3, they've also achieved the significant milestone of hitting 80 percent of the eligible population now having received their first vaccination. That's very good news, and so a very big thankyou to Aucklanders, who are once again at the forefront of our response to COVID-19. They are setting the pace for the rest of us and have now set a benchmark that we want the rest of the country to see if they can reach as quickly as possible.

I'll hand over to Dr Bloomfield for an update on today's case numbers, then I've got a bit more information on the vaccine programme and some news for those who are studying NCEA in Auckland this year.

Dr Bloomfield.

**Dr Ashley Bloomfield**: Thank you, Minister. Kia ora koutou katoa. So today there are 23 new community cases to report, all in the Auckland region. That takes our total number associated with this outbreak to 1,108, and, pleasingly, 835 of those cases have now recovered. Additionally, there is one new case in a managed isolation facility who is a recent returnee.

Now, of today's 23 new cases, 22 are considered epidemiologically linked at this point. Eleven of those are household contacts, including six within one household. Five are known close contacts, while a further one is likely a close contact. Investigations and interviews continue with the remaining person who is being reported today. Yesterday's one unlinked case also remains under investigation today, and today there are 13 people in hospital, with two of those in intensive care.

Great turnout at testing centres across Tāmaki-makau-rau yesterday, with 9,780 swabs taken. That's sitting above their seven-day average of 8,441. It was great to see strong demand for testing at the pop-up centre yesterday, at the Manukau Sports Bowl in Clover Park, where 563 swabs were taken in just the one day.

Around a quarter of the residents of Clover Park have been tested since the beginning of the outbreak. So to everyone who turned up yesterday to be tested and those who are turning up today, thank you very much.

We're also seeing a good response to testing in upper Hauraki. Drive-through testing centres yesterday at two marae took a further 403 swabs, and all results to date have been negative. Additionally, a further 1,700 tests were processed overnight from the wider Waikato region, which also were negative.

Now, based on the high level of testing and those negative results in that upper Hauraki region, or area, it has also now moved to alert level 3, along with the rest of Auckland, and is covered by the relevant COVID-19 public health response alert level order that is in place for that full Auckland area. So the residents in upper Hauraki must adhere to the usual level 3 restrictions and the key one there is stay home as much as possible, don't expand your bubble at this point, and just go out and about when you need to.

A reminder also that the section 70 order applies to people who were in the upper Hauraki area between 8 and 20 September, and who left the area before 7.30 p.m. on the 20<sup>th</sup>. So that includes people who were living in the area at the time, working there, or who may have visited the area. Those covered by that notice must remain in isolation by themselves and should monitor for symptoms. If they become symptomatic, of course seek a test.

In addition, if any persons have attended a specific location of interest that is identified and listed on our Ministry of Health website, they're required to test and will have further specific self-isolation requirements.

You can leave your place of residence if you are covered by a section 70 notice, to access a health service, to get a COVID-19 vaccine—and I encourage you to do that—or for any other reason necessary to preserve your own or another person's safety or life.

The move, as I said, for upper Hauraki, to alert level 3 has been made possible because of high levels of testing, great community support for the restrictions on movement, and a well-contained community there in that region. For example, at the school, 93 of the 99 contacts at the school in Mangatangi have returned a negative test, and just six results are pending.

We are reviewing the situation in this area on a daily basis, as well as those people covered by that section 70 notice, to inform a decision about next steps. But, at this stage, the requirements to isolate under section 70 remain in place until 11.59 p.m. this Friday.

On boundary exemptions, just an update there, personal travel across the alert level 3 and 2 boundaries are still highly restricted, and the threshold for an exemption remains very high; we still need to contain the virus within Auckland. However, in addition to the new exemptions announced yesterday, there is now also the ability to apply for an exemption for people who want to cross the alert level boundary one way into Auckland to provide support or care to a person or childcare where the parents or guardians are returning to work now that it's moved into alert level 3. There are strict conditions that apply: that no one else is available locally who can carry out that function, that the person crossing the boundary needs to travel there and stay until the region moves to alert level 2, and there must be suitable evidence provided to support the need to travel. There is a high number of applications presently, so people should apply as soon as possible, as very short time frames cannot always be accommodated.

Just on the vaccine roll-out, the WHO continues to warn about the "infodemic"—that is, the glut of information, some accurate and much of it inaccurate, and it spreads like the pandemic, like the virus. In particular, false information, of course, can be harmful, mostly because it creates uncertainty, and that can then express itself in hesitancy to adopt public health measures or, indeed, to be vaccinated. The key thing I'd just like to encourage people to do, particularly those who are in positions of responsibility or influence, is to point people towards information sources that are reliable and accurate, and those include the Unite Against COVID-19 and Ministry of Health websites, the Karawhuia and Ministry for Pacific People's websites, and your local DHB or health provider.

And finally, Aucklanders, thank you very much for your ongoing work. Alert level 3 still requires very tight restrictions. Of course, you can enjoy getting out for takeaways, coffee, or other things, but please stay at home as much as possible, get tested if you are unwell, wear a mask if you're going out and about, and, of course, if you haven't already, please do get vaccinated. Thank you, Minister.

Hon Chris Hipkins: Thank you, Dr Bloomfield. So to run through a few key numbers from the vaccination programme: 53,000 doses were administered across the country yesterday; 21,000 of those were in Auckland. That means that nationwide, three-quarters of the eligible population aged 12-plus have now received their first dose and 40 percent have received their second dose and are fully vaccinated. To bore into those numbers a little bit further, 52 percent of Māori have had their first dose, with 26 percent getting their second. Pacific people—the vaccination rates are slightly better—67 percent have had their first dose and 36 percent their second. In terms of our over-65 population, 91 percent have received at least their first dose and 79 percent their second. For those aged between 40 and 64, 80 percent have had their first dose and 44 percent their second.

Those numbers are encouraging, but they do show that we continue to have an equity challenge that we need to work on. There's a lot more work to do. Across Auckland, 1,753,105 doses have been administered so far; 1,144,713 of those are the first doses. That's what got

us to the 80 percent mark. And 608,000 people in Auckland have received both doses, meaning they're fully vaccinated.

So I now want to talk a bit about vaccination of our health workforce. We've been looking closely at what we need to do to ensure that our front-line health workers are kept protected from COVID-19. Because of the nature of their jobs, they are at greater risk of being exposed to and infected by COVID-19 and they can transmit the disease to others. Vaccination rates across our front-line health workers are pretty good. DHB front-line healthcare workers were offered early vaccination, early access to the vaccination, as part of group 2 earlier in the year.

At last count, at least 75 percent of the total DHB workforce of around 80,000 have been fully vaccinated, with the numbers even higher if we just take into account first doses. Those figures include both the clinical and the non-clinical staff working at our DHBs, and that was at last count, so those numbers are likely to be even higher now. But despite that good progress, there are some parts of the sector that need to push further to support their workers to be vaccinated. In short, we need vaccination rates to be very high across this particular workforce. Many other countries have required healthcare workers to be vaccinated. These include Australia, the US, Singapore, Canada, UK, France, Italy, Greece, and Fiji, and we are considering doing the same here New Zealand.

So I've asked the Ministry of Health to consult with key stakeholders on a proposal that would require the majority of healthcare workers to be vaccinated against COVID-19. This would apply to staff working in roles with a COVID-19 pathway. That includes emergency departments, those in primary care, those in settings with vulnerable patients, and it would include people working in aged residential care facilities, critical support services, including medical laboratories and catering facilities, and those providing home and community care services—it would require them all to be vaccinated. So the consultation that's happening now will include the representatives of those workers, the health unions, their professional associations, the Office for Disability Issues, the Privacy Commissioner, our iwi representatives and aged-care employers.

Our proposal is in line with the current requirements we have in place around our MIQ and our port workers. We do need to ensure that the workers most likely to come into contact with COVID-19 are as protected as possible and that they in turn are protecting the most vulnerable.

Turning to MIQ, I can confirm today that the next MIQ room release through the virtual lobby will take place on Tuesday, 28 September at 6 p.m. New Zealand time. The lobby will open at 5 p.m. New Zealand time, one hour before the room release begins. There's no need to get onto the website any earlier than that. As long as you are there between 5 p.m. and 6 p.m. you will get an equal chance to secure a room. This release will be for approximately 3,000 rooms across October, November, and December, and I do want to remind people, as I've said previously, we're not releasing all of the rooms at once, so there will be more releases after this one. The MIQ website will be updated in the next couple of days with more information following the feedback we've received from Monday's release.

Finally, now, to those in Auckland who've been doing it tough, particularly our senior secondary school students. I want to recognise that the extended time that students in Auckland have been spending at alert levels 2 and 3 will have had an impact on their studies. I'm increasing the entitlement that Auckland students will get to learning recognition credits for NCEA as a result of that. They'll now be able to get one learning recognition credit for every four credits they achieve through their assessments in this school year, up to a cap of 16 credits for NCEA level 1 and 12 for NCEA levels 2 and 3.

I'm also further adjusting the threshold for certificate endorsement to 44 credits in merit or excellence level, rather than the 46 threshold that will apply to students in other parts of the country. These changes basically bring the support available to Auckland students into line with the support they received in 2020 following their second lockdown. I hope this will provide

a reassurance to those students that their qualifications and the rewards that go with those remain within their reach despite the disturbance that they've experienced this year.

I want to end by thanking our schools, our teachers, and our whānau in Auckland for the work that they've done to continue to support the students right the way through lockdowns and right the way through a very disrupted year. I know that a lot of effort has gone in there and I want to acknowledge them and thank them for that. I'll open up for questions. Jessica, we'll start with you.

**Media**: Are those extra credits enough to actually help students get through their high school year? They've been through a lot.

Hon Chris Hipkins: They have been through a lot and the level of disruption this year is broadly similar at the moment to what we saw last year if you combine the lockdown periods this year and last year. And so we're bringing the overall support available to them into line with what we did last year. I also want to note that this isn't the last opportunity that they will have to gain support. Last year, we offered summer school support for those students who fell a few credits short of being able to complete their qualifications. We saw good uptake of that last year. We will certainly be making sure that's available again this year, and I know that schools are working really hard, for example, by providing extra support during the forthcoming school holidays for those completing assessments. I know that there's a lot of work going on within schools to try and support those students who have those really critical assessments.

**Media**: I just have a question for Dr Bloomfield. We've heard about the Māori rate for vaccination lagging behind. If our aim is to get most of the population to 90 percent and above before we do anything, what rate would you feel comfortable with getting the Māori vaccination rate to before you look at easing restrictions?

**Dr Ashley Bloomfield**: Ninety percent and above. It's very important that we have an across-the-board high vaccination rate, and it's clear therefore that we need to put even more focus and even more resource and generate even more demand amongst our Māori population. As the Minister pointed out, actually, in that over-65 group, where the overall rate is already over 90 percent, we are seeing similar rates for Māori, Pacific and non-Māori and non-Pacific, and that's the position we want to be. It's no good for anybody if there are communities or groups that have got low vaccination rates, and so our aim is, of course, to have the same high vaccination rate for all groups.

**Media**: So it has to be, across the board, 90 percent of vaccination rates before you're comfortable relaxing anything?

**Dr Ashley Bloomfield**: I don't do the relaxing—in fact, there's not much relaxation in this role at the moment. But the first part of your statement is correct. We are not looking for any lower rate amongst any group. We are intent on getting vaccination rates at 90 and above for all our groups, and I might point out we have done this before with childhood immunisation rates—they've dropped a bit in the last few years; we have been above 90 percent. And it's also important we get high coverage across geographical regions, as well.

Hon Chris Hipkins: If I could just add, when we're talking about 90 percent, that would give us one of the highest vaccination rates against COVID-19 in the world. And looking at the numbers that we've seen and the high uptake that we've seen in recent months, that is absolutely achievable for New Zealand. And so it's an invitation to every New Zealander: come forward and be part of that effort. It will position us very, very strongly. In terms of the response to the global pandemic, it will be one of the best responses in the world and one that we can all be proud of. But when we talk about 90 percent, that's not an invitation to 10 percent of New Zealanders to say, "I'll just sit back and be part of that 10 percent." We need everybody in New Zealand coming forward and being vaccinated, unless they have a reason not to—a very good reason not to, and that group is a very, very small group—if people have a medical reason not to be vaccinated—we're not talking lots of people. So, really, our message to everyone is: play your part, come forward, and be vaccinated.

**Media**: As per the Prime Minister's challenge yesterday, if at least 90 percent of Aucklanders do get vaccinated before the next alert level decision, will you guarantee a move down to alert level 2?

Hon Chris Hipkins: Look, that's going to depend on a range of factors. Yes, of course we're encouraged by high vaccination uptake. The higher the vaccination uptake not just in Auckland but across the country, the greater our possibilities—I do believe I saw that on an advertisement somewhere. There's a reason that we're telling people that: because it does give us greater possibilities, it does mean that we can manage things without the need for as many restrictions as we've had in the past as we look to the future. But in terms of decisions that we make, we make those on a whole variety of criteria—vaccination rates are one, the number of cases we're seeing, the number of unlinked cases that we're seeing, the potential exposure events that there may have been, those are all things that we also consider.

**Media**: And, Dr Bloomfield, is it right that we may never get back down to zero cases after this outbreak? And also could I just put it to you, Minister, could you reduce the time between the first and second doses going from six weeks back to the original three weeks between jab one and jab two?

Hon Chris Hipkins: So, look, I guess, the first thing that I would say on that is that we are not giving up on getting back down to zero. That is exactly why Auckland is still at alert level 3. We've still got a very good shot of getting back down to zero. That is absolutely what we are striving for. It's what everyone in Auckland is making sacrifice for us to be able to achieve. It's what our public health teams are working so hard to contact trace to be able to achieve. It is still within reach. Moving to alert level 3 does not in any way mean that we're not still pursuing getting back down to zero. It's worth remembering, too, that we have got to zero before from alert level 3 before without having to go to alert level 4 at all. So we're well positioned going into alert level 3 to continue the road back down to zero.

**Media**: But the other question was to Dr Bloomfield. So do you think there is a chance that we may not get back down to zero cases after this outbreak?

**Dr Ashley Bloomfield**: It's a possibility, but, at the moment, we're doing everything to achieve getting back to zero cases. And on the vaccination interval: our advice remains the same at the moment. So our advice is: a standard interval of six weeks gets a really good balance between maximum immunity and also allows us to make sure that we get as many people getting those first doses—

**Media**: Does that look as if there's a supply issue, though? Because wasn't the rationale for extending it in the first place that we wanted to get, you know, that maximum coverage? But now we want to get maximum double doses, right? So why not reduce the time frame again?

**Dr Ashley Bloomfield**: Look, there were a number of factors that we took into account in advising the extension of that interval, and it's not a supply issue now; it is our considered view, and it's based on the advice we've had from our technical advisory group, that six weeks is a good amount of time between vaccines to get the best immunological response and also reduce the likelihood of some of the side effects. So that's what our advice remains at.

**Media**: As long as there's COVID-19 in Auckland, will you maintain a police boundary and restrict movement in and out of the region?

**Hon Chris Hipkins**: We haven't, typically, had a police boundary if an area has been at alert level 2 and another area has been at alert level 1, and so it's a very hypothetical question at this point. But we would continue to follow hard boundaries, if you like, when we're at alert levels 3 or 4, but we, typically, have a softer boundary if we've had a different alert level boundary, like an alert level 1 and 2 boundary, for example.

**Media**: There'd still be something in place, though, would there, given the different alert levels?

**Hon Chris Hipkins**: Look, we'd make those decisions at the time, but, typically, when we've had an alert level 1 and 2 boundary, for example, or we've had everybody at alert level 2, we haven't had an enforced boundary.

So I'll come back over here—yeah.

**Media**: Dr Bloomfield, if we don't get down to zero, what does that sort of future look like? Would that be, you know, single-digit case numbers every day and some level of level 2-ish, level 3-ish restrictions?

**Dr Ashley Bloomfield**: Well, that's the \$6 billion question, really, and it's one that we're doing some work on, right across Government, and very active discussions. What I would say, though, is one of the reasons we're able to have the current low case numbers we've got—and they are low for Delta, and if you think about the fact that even today, one household, six people, because Delta does tend to have high transmission rates inside households. One of the reasons we are keeping it down is because we're in this position now, having had a big outbreak, but we have got, now, 80 percent of Aucklanders having had at least one dose of the vaccine. There is no doubt in my mind the vaccine is already playing a role, and the future is the one we are thinking about, which is when we have got that high rate of vaccination across the population.

**Media**: So you can see, you know—90 percent, for example. You'd still see some households getting it, but that would be consistent with what your future looks like—that is, a tolerable, OK future?

**Dr Ashley Bloomfield**: Well, in a sense, it's consistent with the approach we're taking now, which is we would still actively test to find cases, and we would respond with contact tracing and isolation.

**Media**: And I guess the final question on this is: would that mean an end to—particularly in the entertainment industry, would that mean an end to mass gatherings, gigs, cinemas, theatres? Would that be consistent with that strategy?

**Dr Ashley Bloomfield**: Ah, I would say that what we're aiming to do is move back to a situation where we enjoy the freedoms of alert level 1 again as quickly as possible with the least possible restrictions, including on mass gatherings, and vaccination is by far the most important part of that future.

Hon Chris Hipkins: Jo.

**Media**: Just on vaccinations, where are the wall-to-wall ad campaigns to support the people, community leaders, church leaders encouraging people to go out and get vaccinated, because there's a whole bunch of people who aren't listening to the 1 p.m. information who you could be capturing in the same way that you led a very good ad campaign strategy last year around staying home and saving lives?

Hon Chris Hipkins: So there is an ad campaign that's been running, and you will have heard it—people talking about their reasons for being vaccinated on radio, on television, with the tagline, you know, "The stronger our vaccination, the stronger our possibility." We are actually shifting that up a little bit now. That's reached a lot of the people that we needed to reach, but there are now groups that we haven't reached as effectively with that particular campaign, and so we are shifting the campaign up a bit—that it is skewed younger now, because that's the demographic that we need to reach more heavily into. It is—and so, therefore, it is using the media that will reach younger people. It is skewed more towards Māori and Pacific communities, again, because we need to reach deeper into those communities. So the fact that some people won't see the ad campaign as much is a sign that it is being—that spending is being more targeted to the groups that do need to see it.

**Media**: So what went wrong with the first round of it, then, that it hasn't worked, and I guess in terms of attracting younger people—particularly in Māori and Pasifika—why was that not the target in the first place when you were aware that those communities were being affected by misinformation and were probably being guite targeted to not get vaccinated?

Hon Chris Hipkins: I don't necessarily accept the overall conclusion that you've reached there. We're still seeing vaccination rates around 50,000-plus a day, which ultimately was what we were aiming to get to earlier in the year. Now, we had a good spike as a result of level 4, but the goal has always been to be vaccinating at that rate of around 50,000 a day, which we are still doing. Younger people have had access to the vaccine and have been eligible for the vaccine for the least amount of time, and so their rates are lower. There's a bit of catching up to do there. But we are still seeing them come through, but we need to see them keep continuing to come through at an even bigger number than they have been, which is why that's where our campaign is now being directed. Earlier on in the campaign, it was a campaign targeted at everybody. Now that we understand a bit more about where we've got good rates and where we need to target more, that's exactly what we're doing.

**Media**: But if the ministry campaign had started the minute the people had access to it—I mean, the other people have had access for guite some time now.

**Hon Chris Hipkins**: Oh, and they have been subject of a broad advertising campaign. We're able to switch that up now—

Media: But not targeted?

**Hon Chris Hipkins**: —and be more targeted.

**Media**: Just on the Hauraki moves, could you just tell me why you're only announcing it now when Scott Simpson had it on his Facebook page last night?

Hon Chris Hipkins: Look, I'll hand that one to the director-general.

**Dr Ashley Bloomfield**: Just really confirming it now, to make it easy for people to understand what's happening. So that Hauraki region, under the order, moved to alert level 3 last night, and I was just letting them know that actually that's the current situation there, and also, importantly, that it's under daily review, and we'll be able to make a decision about whether it continues on Friday.

**Media**: And just on this leaked document that Chris Bishop has come across that said there were supposed to be 650,000 doses per week from July to September, he says that this shows that there's a Government failure and you've been slowing down the vaccine roll-out.

Hon Chris Hipkins: Look, that is a claim that Chris Bishop has made repeated times despite being told repeatedly that it isn't true, so the fact that he continues to make it I think is a poor reflection upon him. The document that he purports to have would have been one of a number of models that the Ministry of Health put together when vaccine supply, in terms of exact delivery dates, was uncertain. So they had models that saw us getting all of our vaccines by the end of September. They had models that saw the vaccine supply running through into later in the year. Those are prudent things to do, to plan for the different scenarios that you have. I think it is absolutely dishonest for him to be continuing to say that we have in any way delayed vaccine deliveries. Our entire focus from the beginning of this year has been on getting vaccines into the country as fast as we can.

**Media**: Just following in from Jo's question about young people and vaccinations, this outbreak has really disproportionately affected young people. Is an ad campaign enough to try and get those rates up as fast as we need them?

Hon Chris Hipkins: I think we'll see more than just advertising. So we will have targeted initiatives to go and reach younger people. You're already seeing across the country, in areas where vaccination rates do need to come up, there are some innovative things taking place. So, shout-out to Taranaki DHB, who promised people a bacon butty with a coffee this morning—some debate whether it was actually a bacon butty that they gave people. But there are some interesting things that are happening around the country, and we're seeing good uptake as a result of them. So I think we will see more of that now as we really get into that group that we really need to target to get them to come forward.

**Media**: Are we going to pursue this encouraging of incentives to get vaccinated? Is that what we need now?

Hon Chris Hipkins: Look, I'm aware that some employers, for example, have been doing their bit by encouraging their employees to come forward and be vaccinated. I'm aware of The Warehouse, for example, providing an incentive to all of their workers to come forward and be vaccinated, and I absolutely welcome that. I think that they are being a very good, responsible corporate citizen in the work that they are doing to help to protect their staff, and I would encourage others to do so. In terms of whether we are offering any incentives, you'll see examples like the Taranaki DHB that I just mentioned, and we'll continue to look at where there are further opportunities there.

**Media**: With the upper Hauraki area, do you feel like you did a good job communicating to them what was happening, given, you know, the boundary moved down and where they were in the alert level setting? Do you think you could've done that better?

**Hon Chris Hipkins**: Undoubtedly, yes, and I think that timing there was a challenge. But yes, undoubtedly I think we probably could've communicated more clearly when that shift was going to happen.

**Media**: Dr Bloomfield, how concerned are you at how much busier Auckland is? The motorways are packed. Bubbles are bursting everywhere. There's no social distancing at cafes in the lines there. How concerning is that?

**Dr Ashley Bloomfield**: Well, I'd just reiterate what alert level 3 means. In so saying, I imagine most Aucklanders are doing what alert level 3 requires, so I'd just again encourage people. The only reason to leave home is to go to work if you need to, and, if you are going out and about and collecting coffee or other takeaways, follow those rules and the advice, and that includes using a mask, scanning, and, of course, maintaining physical distancing.

**Media**: And why this far in are we still seeing those five close contacts becoming cases that are not household contacts? What is going on?

**Dr Ashley Bloomfield**: Well, they may have been from where someone might have been an essential worker. So it could be in a workplace, or it could be that there's a legitimate reason that someone's got a non-household close contact. For example, a number of our locations that we're working with—and this is what the public health unit in Auckland is working with—are actually hostels, and so those people may be non-household or non-related close contacts but part of a hostel.

**Media**: If the vaccination targets are achieved, does that then put the Government in a position to move towards a living with COVID strategy?

**Hon Chris Hipkins**: Look, we continue to pursue elimination, which is zero tolerance for cases when they pop up. That continues to be our absolute focus.

**Media**: And what's the update on the proposed MIQ in Rotorua, and are you happy with the consultation had with local iwi?

Hon Chris Hipkins: I personally had a conversation with local iwi last week. I have heard their very strong opposition to additional MIQ being established in Rotorua. I'm aware the National Party are campaigning against additional MIQ being established. And so yes, of course, I take that into account. We are looking to increase our capacity around MIQ, but, of course, we are still listening to communities as well. Ultimately, to operate MIQ you need to have a workforce willing to support it. You need to have people who are willing to supply the hotel. There are a variety of different factors that come into play.

Media: And when will you have a decision about the proposed MIQ in Rotorua?

Hon Chris Hipkins: Look, I imagine that we'll have more to say on that in the coming days.

**Media**: Can you please give us information about an Otago Boys' High School student that travelled from Auckland to Dunedin, and also anything about the Clover Park testing: the

level of compliance you're getting, what sort of level would you like to see there of testing to make you more comfortable, and a bit about the locations of interest.

Dr Ashley Bloomfield: Right—if I can remember all that. I can't tell you anything about the student who travelled from Auckland to Otago Boys' High School; that's beyond our purview. It was someone who took a flight down, and I don't have any information about the reasons for the flight or what checks were done at the border. On Clover Park, look, fantastic testing yesterday: 563 swabs since 1 September. Clover Park has got the highest number of swabs and the highest proportion of any suburb in South Auckland—in fact, across Auckland—and what I would encourage the people of Clover Park today is if you haven't had a swab in the last couple of weeks, whether you have symptoms or not, go along and get a swab. We're aiming to get as many people tested over the next few days in that suburb as possible.

**Media:** And locations of interest clustered around a small shopping centre—are you able to give us any detail about that?

**Dr Ashley Bloomfield:** No, I don't have any further detail. Are you talking about the small shopping centre in that area as well?

**Media:** I think so, yes. It's questions on behalf of colleagues, so, yeah.

**Dr Ashley Bloomfield**: OK, so, yes, there is a number of locations of interests which would be places that people who are now cases visited as part of accessing an essential service while in alert level 4, and so as part of our approach we publicise those as locations of interest. And I think a number of those are clustered around the Clover Park region.

**Media**: Thank you, Minister. You've given the vaccinated number for Auckland. Do you have a vaccinated or booked number? I know you to like to—the Government likes to give those numbers combined.

Hon Chris Hipkins: I'll find that one for you. Do you want just for Auckland or for—

**Media**: Just for Auckland, because I think it's 79 percent nationwide.

Hon Chris Hipkins: Yeah, OK, we'll get that to you.

**Media**: Secondarily, I saw that the Shot Bro buses had only vaccinated about 400 people combined in a week. That sounds pathetically low. Is that right, or is there—is that how many you want them to be administering?

**Dr Ashley Bloomfield**: Well, my understanding is yes, they've vaccinated a number of—hundreds of—people. I think it's a bit harsh to say it's pathetic, but that's one of the sort of options for people. There are more buses coming on. And the important thing is where they are vaccinating, and they're going out to those populations and into those areas which we know have got low coverage. So they're using a very targeted approach, and you might see those buses appearing in spots where Aucklanders may be frequenting over the next few days because they've just come out of alert level 4.

**Media**: So you expect that number will rise?

Dr Ashley Bloomfield: Yes, I do.

**Media**: Dr Bloomfield, you said before that you're looking for at least a 90 percent and above target for vaccination for all groups, but, I guess, given the known inequities in the health system and higher vulnerability for Māori and Pasifika, shouldn't that rate be even higher—at least, the target?

**Dr Ashley Bloomfield**: Oh yes, absolutely, ideally, and so as high as possible in all our groups, which is why it's pleasing to see, so far, the group that we know as one of the most vulnerable for poor outcomes from COVID-19, people over 65—to see that vaccination rate already over 90 and still going up is very encouraging. And it's even more important for those groups that do have poorer health status overall to have high vaccination coverage.

**Media**: So I guess, then, opening up and reducing restrictions—I guess we'd want to see that rate be higher than the overall rate before—

**Dr Ashley Bloomfield**: Yeah, look, think I'll disentangle the two things, because the vaccination rate is one input into our advice and decisions around loosening restrictions.

**Media**: So at least three gangs have had COVID infections in their ranks, so how at risk are people in gangs of contracting the virus and spreading it on, and what can be done about this given these groups are likely to have, sort of, mistrust with authorities?

Hon Chris Hipkins: The reports that I've had—and, again, we try not to comment on individual cases, but the feedback that I've had from those who are doing the contact tracing work is that they are finding very high levels of cooperation from all of the communities that they are working with in these case investigations, and that is very encouraging. In terms of the risk of spread, I would say that wherever there are bigger groups of people, whether it's big families or other people living in a more communal environment, of course that increases the overall risk of someone contracting COVID-19 if it gets into that kind of a setting. So wherever anyone's living, you know, in a higher density environment with more people around, then that increases the risk.

**Media**: So you're not worried about an undercurrent of spread within the gang community?

**Hon Chris Hipkins**: Like I said, I've had feedback that we've had very good cooperation from those who are under investigation.

**Media**: Do you trust that that's what's actually happening?

**Hon Chris Hipkins**: Look, I work on the feedback from the people who are doing those investigations. I'll invite the director-general to comment, as well.

**Dr Ashley Bloomfield**: Just to endorse what the Minister said. And the Auckland regional public health team and the public health providers up there are working with a range of people who are helping with engagement with all the groups, and one of the things that, of course, is going to help protect those groups is vaccination, and that's part of the conversation that's been had with those whānau that have been infected is getting them into the vaccination pathway, as well. And it's great to see high levels of interest, too, in that regard.

**Media**: Granted you don't want to talk about individual cases, but this is—I mean, it's not identifying to say that we've had three gangs identified as COVID spreading through them, and, granted, the vaccination will help, but, I mean, this is the spread of COVID-19. Is this a group that you just simply can't get to in terms of reaching the goal of reaching zero cases, you know?

**Hon Chris Hipkins**: No, no, like I said, I think we are seeing a good degree of cooperation, and as a result—but we're talking larger groups of people, people who live in more communal environments.

**Media**: Dr Bloomfield, you've also talked about bubble breaches, right? Is it within these environments, these gang environments, that the bubble breaches are occurring?

**Dr Ashley Bloomfield**: Oh, look, I don't think bubble breaches are confined to any particular part of society, in my experience. Again, just to reiterate what the Minister said, excellent engagement and good relationship that is actually identifying new potential contacts, and that's exactly what we're after. We want to find contacts and we want to find cases.

**Media**: So you're convinced your efforts are adequate here? Because, I mean, it's not about singling out this group of people, but it's about whether you can actually get there and get the job done, you know? You're convinced of that?

**Dr Ashley Bloomfield**: Yes, I am, actually, and it's been great to see the work that's gone in to put us in this position.

**Media**: A question for both of you: Minister Hipkins said today at select committee that you'd probably need to see zero or very few unlinked cases in order to move Auckland down to level 2. What's the plan if those do sort of continue to stubbornly pop up, one or two a day, for the coming weeks? Is it a level 3 for a long—you know, until you get those high vaccination thresholds?

Hon Chris Hipkins: I guess my observation there was everyone wants hard and fast rules and certainty. There really can't be in this type of environment. You do have to weigh up all of the different pieces of evidence, information, data, advice that you have when you make the alert level decision. So we've never set hard and fast rules. We have an alert level framework that provides guidance, and that is what guides our decision making, but you never say "never" and you never say "absolutely". You just have to consider every decision based on its merits and based on what you know at the time.

**Media**: Do you think, either of you, that staying in level 4 for longer for Auckland would have made a difference, or had it done everything that it could do?

**Hon Chris Hipkins**: I think alert level 4 was designed to give us the best possible start, position us as strongly as possible, to get back to zero again. You may recall that in previous outbreaks we've gone to alert level 3. With Delta, we decided to go to alert level 4, to really maximise our chances here, and that is what it has done. So as we step back down to alert level 3, we do so knowing that the time that Auckland has spent at alert level 4, and other parts of the country for a more limited period of time, really put us in a strong position to be able to stamp COVID-19 out.

**Media**: Most people who have got exemptions for wearing masks are still being denied service in places. What's your response to that?

**Hon Chris Hipkins**: Look, if people have an exemption, then they have an exemption, and they should be served.

**Media**: For businesses who are really struggling at level 2—we've heard from businesses, particularly in Christchurch, who are finding it tough operating at level 2 and calling for more certainty—will you offer that to them? What clarity can you give them about this?

**Hon Chris Hipkins**: Look, I do know that people want more certainty. I think everyone wants more certainty, across the board. I think we've been doing this for a year and a half, it's been tough, there's been constant disruption. Every time someone feels like they've got a footing and they've got their business back on track, something's happened. In terms of travel, you know, people were relieved with the trans-Tasman bubble, then it closed.

Right the way through, we've been living with this uncertainty for the last 18 months, and I get that people are tired, they're feeling worn down by that. We are still doing this, though. We are still pursuing elimination. It is still the right thing for New Zealand. We are, of course, looking to the future. It won't always be this way, and so my request to people is: just, you know, hold your nerve, hold on. The future is going to be better, but I acknowledge that it's been a pretty tough year and a half.

**Media:** Do you support businesses implementing a no jab, no entry policy?

Hon Chris Hipkins: Look, we will have more to say on that in due course, but ultimately, you know, I am very supportive of people encouraging people to be vaccinated. There are some legal issues to work through around whether the no jab, no service approach can be implemented or enforced, and so any businesses thinking about doing that, my advice to them, as it's always been, is make sure you're getting good legal advice before you make those sorts of decisions.

**Media**: And when it comes to making those decisions, you talk about vaccination rates, are you primarily looking at the fully, the double-dosed rates or do the first doses come into your thinking? So we've got high first doses, but the double dose is where it really matters, right?

Hon Chris Hipkins: Oh, the double dose absolutely. We want people to be fully vaccinated, and if you look at the high rates that we've got of first doses—I mean, I think we're not talking a long gap. It's a six week gap between now, between the first dose and the second dose, and we are not seeing any tailing off of people coming forward to get that second dose when they're eligible for their second dose. So I'm very encouraged by the first dose rate. I think the first dose rate gives us an idea of where we will get to in terms of people being fully vaccinated, and that is ultimately the number that we should be interested in. We're talking about first doses at the moment because for many people that's the best indicator that we have, because they won't yet be eligible for their second dose.

**Media**: Yeah, I guess when it comes to making those alert level decisions, when you say you're looking at the vaccination rates, though, it's that double dose that you're looking at there, right?

**Hon Chris Hipkins**: In terms of alert levels, no, not necessarily, but in terms of future decision-making, then yes, the double dose could well be the factor.

**Media**: So why are you looking at first doses when it comes to alert levels, because people aren't as protected, are they?

**Hon Chris Hipkins**: No, but it is a sign that people are committed to being vaccinated, they're in the system, they're going to get their second dose; they're just awaiting the time for that.

**Media**: That's not going to stop the spread and protect us if you move down to alert level 2, if you've got 90 percent of Aucklanders' first dose.

**Hon Chris Hipkins**: One dose of vaccination does already provide a significant level of protection, so that's my message to everybody. If you haven't been vaccinated yet and you're thinking, "Well, I've left it too late.", ell, you've never left it too late. Everybody, even with one dose, gets a much greater degree of protection than they have with no dose, but again I'll invite the director-general to comment.

**Dr Ashley Bloomfield**: I think you've said it well, Minister. Actually, that the first dose affords a good level of protection. It's the full course that means someone's fully vaccinated, and then it's 95 to 99 percent protection against being hospitalised or dying. That's as good as any vaccine.

Hon Chris Hipkins: All right, very last question.

**Media**: Just on your select committee this morning, you said that the self-isolation at home could certainly play a bigger role in New Zealand's future. If this trial goes well, would it be possible that from the start of 2022 we could see normal people isolating at home after being overseas?

Hon Chris Hipkins: Look, I don't think it's going to be a big bang, but certainly the trial will tell us what works and what doesn't. We'll be able to look at a variety of different approaches through the trial period, and the fact that we're doing that now means that next year we'll have a higher rate of vaccination, we'll have a good high rate of vaccination across the country, we'll have good high rates of vaccination of people coming in. That will set us up well, but I don't want to pre-commit to what that might look like until we've actually gone through the trial process. That's what it's designed to do. Very last one.

**Media**: Just very quickly, is there a chance that we could, for MIQ, we could prioritise vaccinated returnees in the system?

Hon Chris Hipkins: Watch this space.

Media: That's something you looking at?

**Hon Chris Hipkins**: There are international developments around the requirement for vaccines in order to travel and we are certainly involved in those discussions. Thanks.

## conclusion of press conference