

POST-CABINET PRESS CONFERENCE: SUNDAY, 3 OCTOBER 2021
HANSARD TRANSCRIPT

PM: Kia ora koutou katoa. Good afternoon, everyone. As you'll be aware, two cases of COVID-19 have been identified today beyond the Auckland boundary. One is in Raglan. The other is in Hamilton. The two cases are connected to one another, but at this stage we have not connected them to our Auckland outbreak. I'll hand now over to Dr Bloomfield to provide an update on these and other cases identified over the past 24 hours, before setting out what actions Ministers have agreed to today. Dr Bloomfield.

Dr Ashley Bloomfield: Thank you, Prime Minister. Tēnā koutou katoa. So today there are a total of 33 new community cases to report. Thirty-two of these are Auckland-based, and one case is in the Waikato. Now, you will have seen—and the Prime Minister's just mentioned it—that, actually, we are reporting a second case in Waikato, but it's not included in today's figures because of the time it was reported. It will be in tomorrow's numbers.

Now, of today's cases in total, 15 are yet to be linked, two of those have a possible link, and, separately, three of those 15 are all actually one whānau that live in a single household. Interviews are under way, and we fully expect that those will identify links and connections to the existing outbreak. Of yesterday's cases reported, just four remain unlinked at this point, with investigations ongoing. In the Auckland region, there are now five active sub-clusters. That is where there are new cases that are emerging over recent days, and our public health efforts are significantly focused on those.

On to those two cases in the Waikato. One of these cases lives in Raglan, the other in Hamilton East, and they are known associates or contacts. However, at this stage, there's no obvious link between these two cases and the Auckland outbreak, and we would expect that both the interviews of the cases and the whole genome sequencing, which is being done with urgency, will help us elaborate what that link might be.

The case in Raglan, and their family, has been moved to a quarantine facility in Auckland. That case, the Raglan-based one, was tested on 1 October, having become unwell, and their infectious period is deemed to be from 27 September. A pop-up testing centre has been set up at Raglan in the Raglan rugby grounds carpark on Cross St, and anyone in Raglan with symptoms is urged to get a test today. In Raglan, if you haven't yet been vaccinated, now is the right time to do so. There's been quite a big increase in vaccination in Raglan over the last week or two, which is great to see. Vaccination is available today at the Raglan Area School from 2.30 p.m. Just turn up.

The second Waikato case is, as I say, a known contact of the Raglan case and was tested yesterday evening after become unwell. This person was transferred safely overnight to Waikato Hospital when their symptoms worsened, and they are being treated for COVID-19-related symptoms. There are no exposure events at the hospital because they were prepared and ready to receive this person. That second case's household contacts are currently self-isolating, and we are getting rapid testing done on them.

So today in Hamilton, the testing centre at the Founder's Theatre's carpark in Hamilton CBD will have additional capacity added, and there will be a pop-up centre at the Claudelands Events Centre. That's being set up at the moment. Again, anyone in Hamilton with any symptoms whatsoever of COVID-19 are asked to please get tested and isolate until you receive your result. There are also walk-in vaccinations available in Hamilton today at Te Awa The Base, and the Prime Minister will have further information about vaccination opportunities. There may be public exposure events, which will be listed as locations of interest on the Ministry of Health website through the afternoon, so please do watch out for those.

A quick update on the Auckland-based truck driver that has also been reported in today's number, and we made a media release about that last evening. This person was picked up through routine surveillance, showing the value of this testing. They had previously returned

a negative test on 24 September, and then tested positive two days ago. Their infectious period is deemed to be from 28 September.

Now, that driver, when the positive result came through, was in Palmerston North and is isolating at a bespoke facility on the hospital grounds in Palmerston North. Their two household contacts in Auckland are also self-isolating. Both of them have returned initial negative test results, as have three other close contacts. Locations of interest between Auckland and Palmerston North over a number of days while this driver has been driving through—mostly petrol stations—have been put on the ministry's website, so please do look at those. Again, there is whole genome sequencing under way to determine the link with the current outbreak in Auckland.

Just briefly, then, on hospitalisations. Twenty-six people are in hospital today, the majority in Auckland, and, as I mentioned earlier, the one person in hospital in Hamilton, at Waikato base hospital, and three of the total number of people in hospital are in ICU, all at Middlemore.

Testing continues to go well, and it's hard for me to emphasise enough how important it is for our testing to continue, and, in particular, anyone with any symptoms at all, wherever you are in New Zealand. Last Friday was the highest testing day for metro Auckland in over a month, with nearly 16,000 tests completed—a huge effort. Thank you to all involved. From this Monday, 4 October—that's tomorrow—the Ōtara community testing centre in the town centre there at Ōtara will be open from 6.30 a.m. to help provide access for essential workers to surveillance testing.

A reminder that there is also testing ongoing at a number of accommodation places across Auckland: residential facilities, boarding houses, community housing providers. It is voluntary for those residents, and around 50 of those facilities are being moved through over the last few days and in the coming day or two.

Finally, all of the testing that's been set up is within a 30-minute walk of other testing facilities where we have seen positive cases or close contacts. So it's a very mobile population, and we're going out with specific teams to find those people. Back to you, Prime Minister.

PM: Thank you, Dr Bloomfield. In light of the positive case detected in both Raglan and Hamilton, Ministers have agreed today to move these areas into level 3 restrictions, alongside Auckland, from 11.59 p.m. this evening. I'll now share a bit more specificity around the areas that will be covered by level 3 restrictions. It will include Raglan, then, coming from north down south, Te Kauwhata, Huntly, Ngāruawāhia, and Hamilton City, based on the Hamilton City boundary. These boundaries will be published online.

Just a word about the surrounding boundary areas. In terms of management of the boundary in this case, Auckland's boundary will remain in place as it stands. For these new Hamilton areas, there will be spot checks around these boundary areas, but it will not be the same as the hard boundary we've been operating for the Auckland outbreak. The reason for that is simply a practical one. The Hamilton area simply has too many feeder roads for us to successfully operate a hard boundary around the outskirts of the area. So we ask people, please, to maintain compliance, and there will be spot checks in place.

For those who live and work across these areas, we ask that those who can work from home do work from home. We intend at this stage for these level 3 restrictions to apply for the next five days. This is the same approach we took when cases emerged in the Upper Hauraki area. It gives us the opportunity to contact trace and widely test in the coming days to assess if the virus has spread widely. If you live in these areas or have visited these areas and are experiencing even mild symptoms, please do get a test.

After five days of wide testing, contact tracing, and waste-water testing, we will assess whether the restrictions need to remain in place. It is noteworthy, however, we have had waste-water testing in the Hamilton area on 29 and 30 September. Those have been negative tests. Of course, further testing will assist us as we seek to ascertain how widespread these cases may be.

But testing is not my only request of those who live in this area or, indeed, those who live anywhere in Auckland. It is not a coincidence that those in our current outbreak have not been vaccinated. Those who have not had a vaccine in New Zealand are currently in the minority, but they are the vast majority of our cases. That is because the vaccine works but it's also because the virus is literally finding unvaccinated people. Vaccination makes a difference. It keeps people safe, but it also gives us choices. And this is how stark those choices are: if we had a vaccination rate at 90 percent or above in either Hamilton or Raglan, it is highly unlikely that we would be here today announcing level 3 restrictions. Instead, we would be able to rely on other tools like contact tracing and much lower-level public health measures, but, while we are still vaccinating, we have fewer choices in how we react to cases.

So this is a message for the rest of New Zealand: we are doing everything that we can to keep cases confined to Auckland and managing them there. The people of Auckland are sacrificing a lot to do that, too, but they are doing that to give everyone else time to be vaccinated. If, in the meantime, the virus moves beyond the Auckland boundary and the places it moves to have low vaccination rates, then today is an example of how we will need to respond. So please get vaccinated today if you want to avoid level 3 in your community, and we can avoid it in the future.

Now, I know some people are nervous about the vaccine and wanting to wait a bit longer to see what happens. I understand. It's natural to have questions, but I can assure you the vaccine is safe and the experience is friendly and supportive. There are nurses and healthcare professionals onsite. You get looked after and, if you have questions, you can ask them while you're there, with people who are knowledgeable and supportive. There are still 887,000 eligible New Zealanders who haven't been vaccinated, but, on the flip side, 79 percent have had their first dose. We have a different approach to COVID within our sights and in our hands. So as we all look ahead and we think about summer and the plans that we are making, make the first step a vaccine. It is the thing that will make those summer plans possible.

So on that note, in the Waikato, there are 1,500 bookings available today and 2,800 available tomorrow. In terms of walk-in vaccinations that are available right now, you can find those at Te Awa The Base. Raukura Hauora o Tainui is open until 3.15 p.m. today. Rāhui Pōkeka Huntly: the community vaccination centre is open for walk-ins until 3.30 p.m. Anglesea Pharmacy is open until 11 p.m., Sanders Pharmacy until 3 p.m., and there are approximately 80 pharmacies, GPs, and vaccination centres, including mobile services, across the Waikato. Also, today there will be a pop-up vaccination centre in Raglan at 2.30 p.m. today, and we'll make sure that we put details of that out for anyone locally.

Before I finish today, a quick reminder that tomorrow we'll be talking more about our roadmap forward, in particular for Auckland. On Tuesday, we have another step-up in our vaccine campaign, and you can expect that alongside, each day, our reporting on developments in Hamilton. Until then, though, we are now happy to take questions.

Media: Is there anything you can tell us from the preliminary contact tracing interviews about these two Waikato cases—whether they went to any potential super-spreader events, whether they were in front-facing employment?

PM: So we do know that we will have a number of locations of interest around, in particular, our Hamilton case, and we will continue to publish those. We've had it described to us that they've moved locally over a period of time. We can make an assumption around infectiousness given that they infected the person in Raglan on or around 26 September. So that gives you an idea of the window, time frames, that we're looking at. I haven't been advised that there's been any movement outside of the region as yet, and at this stage we have not identified any movement from anyone from Auckland in contact with this family, but that's a key part of our source investigation.

Media: In that five days for the Waikato in level 3, is that going to extend for Auckland as well? Will it remain in level 3 for longer because of this?

PM: No. What is happening here in the Hamilton area and surrounding area, think of as discrete measures for that area, because, obviously, what's happened here is we've got a new outbreak in the Hamilton area, so we'll be treating that distinct from what we're dealing with in Auckland. So we'll still be making announcements on what we intend to happen in Auckland tomorrow.

Media: Why not do the same thing for Palmerston North? Why not—

PM: Yeah, a bit of a different set of circumstances for that individual. I'll let Dr Bloomfield talk a little bit about what we've managed. One thing we know is, obviously, having come from Auckland, we know the source, so that's really key. We know that someone—this is a person in Auckland, so it's easier to connect it to our Auckland outbreak. We also know all of their movements. Here we've got two cases. We don't know where those individuals got it from, so, therefore, it's harder for us to define the edges of that outbreak, so that makes it very different.

Dr Ashley Bloomfield: Yeah, so the person in Palmerston North just happened to be in Palmerston North when the positive test came through and is therefore being isolated and managed there. The exposure events, including locations of interest, are all identifiable, and this person is Auckland-based and, obviously, worked as a driver going down. So we're not worried about there being undetected community spread in Palmerston North. So saying, of course, we're wanting testing there of anyone who's symptomatic, and we are increasing waste-water testing in Palmerston North and some of those surrounding towns.

Media: And they were vaccinated, the truckee?

Dr Ashley Bloomfield: Sorry?

PM: No.

Media: They weren't vaccinated?

PM: No. The Palmerston North case was not vaccinated. None of the individuals from Raglan or Hamilton were vaccinated, and this is, I think, one of the points I wanted to make. Here we have a situation where, actually, the vast majority of New Zealanders eligible now are being vaccinated, but the virus is finding our unvaccinated individuals. Interesting and of note, as we've been advised, the household members of the truck driver are vaccinated and have not yet tested positive.

Media: What more can you tell us about those sub-clusters in Auckland? For example, are they connected to the emergency transitional housing population, and are any of those results—those positive results—from the testing within those facilities?

Dr Ashley Bloomfield: So the sub-clusters that are connected to transitional and emergency housing are ones we've already talked about during last week. There are two more in new emergent ones, but they're not related to the housing sort of situations. Yes, and some of those positive cases, a number of those positive cases, coming through today and yesterday are from those sub-clusters that do involve transitional housing, but, as far as I'm aware, none have been discovered through the surveillance testing we're doing of the other locations. They have all come out of the places where we knew there were already active cases and within the family and contacts there.

Media: Prime Minister, can you just talk a bit about the vaccination requirements at the border for non-citizens?

PM: Yes. So you will have seen today two significant announcements, one from the side of the Government, where we've now announced that it's our intention in the future to require vaccines for non-citizens entering into New Zealand. At the same time, you will have seen that Air New Zealand has announced a requirement for individuals using their international services to be vaccinated. I don't think either of these requirements will come as a surprise to New Zealanders. Of course, we are pushing very hard to have as many

people vaccinated in New Zealand to keep them safe. It makes sense that we ask that at our border for those who are non-citizens.

Media: And will this bring us into line with other countries—

PM: Yeah.

Media: —and potentially will it relieve pressure on MIQ? Does that take out a certain cohort that would otherwise be coming through?

PM: Certainly it helps prepare us for the future. You will have seen that part of the reconnecting New Zealand work talks about greater flexibility for fully vaccinated individuals: shortened periods of isolation, the possibility of self-isolation at home. All of that is predicated on people being vaccinated, so it is a, if you like, precursor to greater flexibility at our border.

Also, for me, this is—why should New Zealand carry the cost of individuals who are visiting New Zealand who choose not to be vaccinated? And it is a cost in many, many ways. It does not extend to citizens, because, of course, we cannot preclude New Zealanders from being able to return to their home and put a condition on that that includes vaccine.

Media: Last week, we reported that there are actually real problems with the security of the vaccine confirmation. Because of the way that it is at the moment, you don't have to present ID. You could—you know, it's basically a written letter. Given this is becoming so important, and will be, what's being done to make sure that it's proved that people who say they're vaccinated are and, actually, that they have the document that can prove it properly?

PM: Yeah. And this is one of the issues, you know, in part, that has meant that we've taken this approach at this point—has been, actually, we do not have internationally a system of documentation that can be universally recognised. We have the back-up measure at the moment, though, that we are still using measures like our quarantine facilities that add that extra layer of safety. So we've got that as our back-up, but in the future, you will certainly want to be able to rely much more meaningfully on documentation. New Zealand is working up a system that, essentially, aligns us with internationally recognised systems like those being used by the EU.

Media: But aren't the big holes at the moment, though, in the actual documents that people are getting? Like, the vaccinations now—realistically, if you said, "Prove that it was you"—

PM: Just to narrow down—and I'll have Dr Bloomfield—do you mean internationally or for us?

Media: Well, no, just as the moment, with the system that you can log on, you don't have to prove ID. So, I mean, someone else could go and get vaccinated in my name, for example, and I could get the certificate, and then I'm vaccinated.

PM: And that individual would never then be able to carry their own documentation. It is quite an effort for someone to go to, to have someone else to be vaccinated on their behalf in order to then acquire their documentation, in an environment where, in the future, every New Zealander is likely to need their own individual documentation. The issue, actually, for us at the border is the international documentation, because there isn't a consistent approach, and that is one of the things that, yes, we've got our own systems for checking, but in the future I hope we will have a system that works a little more robustly. But Dr Bloomfield.

Dr Ashley Bloomfield: So, three things here. First of all, we made a deliberate decision, and I think it was the right one, that people didn't need to show ID when they went and got vaccinated, but that doesn't mean they don't have to identify who they are so that we can link them into the system. So it has been my experience this morning: I was asked three times my date of birth. So people have to be able to be identified and linked to an NHI number, and through that NHI number we can then record the vaccination in the COVID immunisation register.

The second thing is, at the moment, yes, people can make a request to be sent a letter to say they have been vaccinated, and people will realise that early on in the programme, and still in many places, people would get a card, manually recording their vaccination. However, as we move into this next phase, this is becoming an electronic process that will require people to identify themselves and provide a form of identification when they register, to then be able to provide proof of their vaccination status. So that part of the process, when we move into the next phase, will link identification of an individual with their vaccination status.

Media: Dr Bloomfield, did you get your second jab today?

Dr Ashley Bloomfield: I did.

Media: How was it?

Dr Ashley Bloomfield: Well, it's a nice feeling to be fully vaccinated, and in another couple of weeks, I'll be fully immunised, and I'm hopeful that the next day or two, I feel fine.

Media: Just in terms of the truck driver, you say that both household contacts were vaccinated. Does this show that the truck driver may be vaccine hesitant, and does it also show that those who are essential workers moving out of Auckland should only be able to do so if they are vaccinated?

PM: Yeah. So look, one of the things that we are considering is whether or not, in addition to the testing requirements—and the testing requirement at our boundary in Auckland is what has enabled us to pick up this case—whether, in addition, it is therefore a reasonable expectation to have a vaccine requirement alongside it. But I think what we need to remember is that, unfortunately, as the case today, it's not necessarily the fact that we will have a border forever between Auckland and the rest of the country; we need all of New Zealand to be vaccinated. Auckland at the moment is in level 3 restrictions and containing this outbreak to give all of us time—time to be vaccinated, time to keep ourselves safe, and the opportunity to ensure that in the future, we aren't in the position where we have to contain this virus by using level 3 restrictions.

Media: Because in terms of international travellers coming here and the new requirements on them, you said, you know, New Zealand shouldn't have to carry the cost on non-vaccinated people coming here. I guess the rest of New Zealand would probably say the same in terms of Aucklanders moving in and out of Auckland: that we shouldn't have to carry the cost of non-vaccinated people moving out of Auckland.

PM: It would be wrong to paint Aucklanders as somehow the issue here. They are not. They are carrying a huge burden and a weight by being in the restrictions that they are, for the time that they have, in order to try and keep this outbreak away from the rest of New Zealand. The point is that we as a nation—the way that we can thank them for what they're doing is making sure that we all get vaccinated. That's the way we can protect ourselves. A boundary is not an ironclad way of protecting ourselves against COVID; a vaccine is.

Media: So can I just clarify that: so you are considering whether essential workers need to be vaccinated?

PM: Whilst I still hold that view, we have asked that question. We are looking at that issue. But again, none of those elements are necessarily ironclad. We have individuals who move, for single movements, for instance. We have others who move more frequently. This is an individual who was being tested regularly, and we still have this case.

Media: Can you give us an idea of what the traffic is over the Auckland boundary at the moment at level 3?

PM: I can't give you the specific number. We haven't seen a large change over time, because of the way we've—I can give you for—I'm told that we think that, in the last few days, we've had 5,000 to 7,000 people moving in and around the Hamilton region. That's some data that I have, but I don't have the latest on Auckland.

Dr Ashley Bloomfield: And maybe just a comment on the testing: again, just to reiterate this person was being tested regularly, and that's how the infection was found. And the last data I saw, the compliance with the testing requirement has been around 95, 96 percent at the boundary.

Media: Is it practical at all to increase that frequency? And have Ministers considered—

PM: The frequency of testing?

Media: Yes. Did Ministers consider other ways to strengthen that boundary, even moving Auckland to level 4, which would lessen that traffic—

PM: Well, keeping in mind that, of course, even in level 4, we still have freight movements. I mean, it's, essentially, impossible to create a situation where New Zealand can continue to operate with zero movement from Auckland.

Media: No, but there'd be less movement at level 4.

PM: Yes, indeed, but, whilst I don't have the detail of this particular individual, keep in mind that the two cases we've had that have come out in the past—we had the Tauranga situation—that was food. And so it is very, very difficult to have a situation where you don't have those movements and, therefore, zero risk. And that is why we've always said, yes, we've got the boundary, we've got a testing requirement—we use PCR weekly because that's more likely to pick up that wider infectivity window—but nothing is ironclad. So that's why we all need to make sure we get vaccinated.

Media: Have you considered more frequent than weekly testing? Is that practical at all?

PM: We haven't considered more frequent testing. Keep in mind, literally thousands of individuals, for very legitimate reasons, the vast bulk of which is freight, move across that boundary. So it probably, I think, would pose some practical issues.

Media: Do you know how many people have been granted those border exemptions, and what percentage of them haven't been vaccinated—how many potential risk factors there are crossing the border?

PM: No. No, we don't, because those individuals—we would have to be able to categorise someone's individual occupation, and employers would have to have the ability to request that medical information from their individuals. So no, we don't. We have, however, worked with freight companies to set up workplace vaccination. So that has been one of our target areas.

Media: So you've got no idea how many unvaccinated people are crossing the border every day?

PM: I can tell you that, across New Zealand, 79 percent of eligible New Zealanders have had their first dose. In Auckland, roughly 83.5 percent have had their first dose. It is the minority. We need, though, all New Zealanders, not just those dealing in freight, to be vaccinated.

Media: Are you happy with the police response to the protests in Auckland yesterday?

PM: Sorry, I realise that I haven't panned across to some who have had no questions. I am happy to answer that, though. Look, ultimately, the police response to the protest activity in Auckland on Saturday is a matter for them. It is operational—very important that I don't step into their decision making on the ground—but I have faith in the judgment of the police to manage all sorts of situations within COVID when it comes to compliance. I do, however, have a personal view on the protest itself. It was wrong. Obviously, it was illegal, but also it was morally wrong. What does it say to every Aucklander who has given up a huge amount over the past few weeks to do the right thing and keep other Aucklanders safe? It was a slap in the face to them.

Media: So what would Aucklanders then think that they didn't face any further consequences, for exactly those reasons?

PM: Ultimately, that is for the police to consider, and I understand they're still considering it. So let's let them do their job when it comes to possible prosecutions. My personal view, though, continues to be that this was a complete slap in the face to every Aucklander and to every Aucklander who has followed the rules to keep their friends and family safe.

Media: And also they sent a message saying that there's one rule for everyone in Auckland and another rule for Brian Tamaki and his—

PM: No, I don't agree with that. No.

Media: And also were the Waikato cases at all connected to gangs? Are there any gang connections?

PM: We're still very early on in case investigations and identifying any potential sources for these families, so I wouldn't speculate on any of that at this point.

Media: Do you think their social movements are very limited at this stage?

PM: So we've been told that there are extensive movements around the region, but there is no travel in or out of Auckland and no one that they've had contact with who they believe has been from Auckland.

Media: And the nature of those movements? Were they big social events at all—

PM: Not that I've been—I haven't been advised of the detail.

Dr Ashley Bloomfield: No, we don't have that information as yet, but what I will say is we're getting, you know, great cooperation and engagement—

PM: Lots of help.

Dr Ashley Bloomfield: —so we should be able to identify any quite quickly.

Media: Were they quite young—like, that sort of young adult cohort who are quite social?

Dr Ashley Bloomfield: No.

PM: No, no, no.

Dr Ashley Bloomfield: A person in Hamilton was in their 40s and the person in Raglan in their 50s.

PM: Fifties, yep. Really important, as Dr Bloomfield has said, the family have been really helpful, providing all the information they can, despite having a really unwell family member.

Media: Given the spread and the way that things are tracking, do you now regret moving Auckland to alert level 3 almost two weeks ago?

PM: No, no, no.

Media: Certainly not?

PM: No. And at this stage, you know, there's nothing here to suggest that that shift necessarily has led to any change in what we are seeing currently. So no, not at all. One of the key things for us to continue to keep in mind is that—multiple drivers here. Yes, we want to continue to stamp out this outbreak that we have in Auckland, but, at the same time, it does require us to keep everyone moving as a team as well, and it's a very hard ask to keep everyone in level 4 restrictions for very prolonged periods of time. The advice we had from public health was that we should move. That was the advice on the ground in Auckland, as well as from the team at the ministry.

Media: And on the vaccination campaign, I mean, given that first doses have slowed in recent days, weeks, and there's increasing concern about Māori and Pasifika not getting vaccinated, do you feel like you're reaching the limit of what you can do here?

PM: No, no, not at all. No one is ready to say that. In fact, when, actually, some of our first dose numbers are still holding up—I'll correct myself. In Auckland, we're now at 83.9

percent—4,625 first doses were administered in Auckland yesterday. Yes, we've had very high numbers, but when I was growing up, that is almost my entire town's worth of people being vaccinated with a first dose in Auckland alone, at this point in the programme. The key will be to continue to maintain that first-dose momentum, because that will be an indication of how many we can fully vaccinate. The rest of the country is now at 79 percent. We just need to keep going.

Media: What about the Māori and Pasifika question, though? What about reaching those communities? Because there seems to be some difficulty there. Your own Minister Peeni Henare was expressing concern about the ability to achieve that.

PM: I would describe it as slower but not that it's impossible. It has been slower but, you can see in our 65-plus rates, really high for our Māori population. So that to me demonstrates what's possible. Did you have anything further there, Dr Bloomfield?

Dr Ashley Bloomfield: I just endorse that, and I think what you would have got a sense of from Minister Henare's comments was he's not going to be happy until those rates go up, and that's why he's getting out and about—

PM: Absolutely.

Dr Ashley Bloomfield: —and the Prime Minister and I were on discussions with DHBs in the last two weeks so that we could be absolutely sure the right effort was going in to get the vaccine to these populations.

Media: Because I don't know if there's any one thing for any particular community, but what is it? What do you put those slower Māori vaccination rates down to, and what are you going to do specifically to get those numbers up?

PM: So, look, I am not the person to stand on this podium and give you a view on exactly what might be happening across our Māori and Pacific populations when it comes to vaccines, but those who are are the ones that we have a duty to make sure that we're supporting them. A week ago now, Dr Bloomfield and I virtually sat down with some of our providers across the country where we have the highest population of Māori and Pacific, and, there now, the switch in strategy is not to just have static mobile sites but to take vaccination into communities, on to people's doorsteps, and into their homes, and that's the switch you'll see in our vaccination programme from here.

Media: Dr Bloomfield, what is the public health risk of the gathering of some 2,000 people outdoors like we saw yesterday?

Dr Ashley Bloomfield: Well, it's an unnecessary risk and an illegal risk, as the Prime Minister said, and it's frustrating and disappointing.

Media: We have 15 new unlinked cases today, which brings the total number of unlinked cases for the past 14 days to 23.

PM: Correct.

Media: That number seems to be rising. Are you confident that you do have the outbreak more or less ring-fenced? Can you talk about that a little bit?

PM: We were just discussing that a little bit before we came down.

Dr Ashley Bloomfield: Well, a couple of things there. Again, even within those unlinked cases, there are some groups in there. So we count all the cases—three are in one household. But what we do find is in the subsequent 24-48 hours, we get through most of those, and then, as the whole genome sequencing comes through, we're able to link them.

Our priority is always finding out the contacts and testing and isolating those people, but also just trying to work back and find out are there any other chains of transmission. That's why these active sub-clusters are the ones that are being focused on every day and where the testing is being focused on, making sure we're going widely around those new sub-clusters.

Media: Just on those 23 unlinked cases, 19 of those have come over this weekend. How concerning is that, and can you rule out that Auckland could move back to level 4 this week?

PM: That is not part of our consideration, so that should rule that out for you. We'll probably spend a bit more time on this tomorrow, but one of the things that has become quite clear is that the original outbreak that we dealt with in Auckland, through the efforts of Aucklanders, has essentially ended, and what we're now seeing is a subsequent outbreak that has emerged. As with any outbreak, when you're at the beginning of it, putting a ring around it and determining its scale does take a bit of time, and that appears to be what we're at the beginning of with this subsequent outbreak that we're dealing with at the moment.

But if you don't mind, I do want to spend a bit more time talking about that tomorrow. It is specific to Auckland. You'll see reflected in some of our decision making our thinking around what we're learning about the specifics of what's happening there is a pattern.

Media: Just on the Waikato border, can you just explain the rationale of why not move the whole of Waikato to level 3?

PM: Yeah. So, obviously, what we've done is taken into account those areas where there is a very close relationship between workforce and accessing essential services, and, of course, the fact that they sit between the Auckland and Hamilton border. So that's the rationale for Te Kauwhata, Huntly, and Ngāruawāhia, because you've got that transit path between Auckland and Hamilton. Otherwise, you'd have situation where you'd have one in 3, another in 3, and this piece in the middle, which in our mind didn't make sense, and, also, I actually expect that the local community probably would have virtually moved themselves into a level 3 environment regardless. Raglan, on the west, you know. Essentially, we've then used the Hamilton City boundary. So that's the basis of that decision.

Media: Can I just clarify that this is the approach going forward: unless you have regional vaccine coverage at 90 percent, this is how you're going to—

PM: What I'm indicating today is that we would have had the possibility of a very different decision today if we had a higher level of vaccination, and we've been saying this all the way through. Very, very simple equation: high vaccination rates means lower restrictions. So please get vaccinated.

Media: We're aware of a large number of cars being allowed to cross the border from Northland into Auckland yesterday to pick up a body, and that that was permitted—

PM: I couldn't speak to that. It is a permitted activity for people to accompany a deceased person. I can't speak to a specific case.

Media: We also understand that the Hamilton case expressed anti-vax views at the hospital. Can you shed any light on that?

PM: I can't speak to that. All I can say is that we have very high levels of cooperation with the family, who are helping us a lot as we work to contact trace.

Media: And when did the Government find out about the Raglan case being tested positive?

PM: So that result came in over the evening. We were informed in the morning.

Media: Did you consider at all moving—you said there were 5,000 to 7,000 people who were moving in and out of the Hamilton region—

PM: There was a call between leaders in the community, and that was an indicative number. I actually can't give you more specificity than that. So that hasn't come from me but from local leaders.

Media: And you didn't consider moving all of the North Island to level 3 on that basis?

PM: No, it wasn't—in fact, what I would say is that this decision I would put on the cautious side, and that's because simply not knowing at this stage the level of circulation in

the community and the source. So, no, there wasn't a view that the rest of the North Island needed to move, and in fact this was considered the most cautious approach.

Media: You're expecting the genome sequencing back tomorrow?

PM: Most likely.

Media: With no waste-water results in the Hamilton region, do you think it's likely that it did come from Auckland?

PM: The 29th and 30th, we had negative waste-water testing in Hamilton. More waste-water testing we'll be collecting and reporting on over the coming days.

Dr Ashley Bloomfield: I think they're two separate things, but what the waste-water testing has suggested is that there's not a lot of infections in Hamilton, but almost certainly this case will be linked to the Auckland outbreak, and it's just the whole genome sequencing and the interview will, I'm sure, elaborate this.

Media: That continues to show that there are little cases in Auckland that are still under the radar. Can you give us a view of how much of this surveillance testing has been happening, including in the transitional and emergency housing, and across those suburbs of interest? How much—because that's trying to find cases beyond the contact tracing, etc. So how useful has that been in finding cases?

Dr Ashley Bloomfield: Well, it's been very useful, and it has found some cases, but what it also is helpful is giving us an extent of the control around those sub-clusters, and so that's the real value: it helps us identify what the margins are and, therefore, where we need to focus the contact tracing efforts.

PM: So, Hamilton, if you want to help us with our decisions over the coming days, please, please get tested, because that will give us that extra information we need to just see whether or not we have anything more widespread while we undertake that source investigation to determine exactly what has happened here. So please get tested, get vaccinated. We'll be back on the podium at 4 o'clock tomorrow with decisions and a further roadmap for Auckland. So please feel free to tune in then. Thank you.

conclusion of press conference