

**POST-CABINET PRESS CONFERENCE: TUESDAY, 29 JUNE 2021
HANSARD TRANSCRIPT**

Hon Chris Hipkins: Good afternoon, everybody. I'll start with the good news first. I can confirm that there are no new cases of COVID-19 in the community today. Waste-water results continue to show no detection of COVID-19 at any of the sites around Wellington, the Hutt Valley, or Porirua. Also, a further 7,250 tests were processed yesterday, all with negative test results. It's also the case that over 90 percent of the identified close contacts of the positive case that returned to Sydney with his wife last Monday have now been returned, and all of those are negative.

Cabinet met just a short time ago to consider these results and the broader public health advice around the Wellington region. We've been at alert level 2 in Wellington for the past week, out of an abundance of caution. Given the large number of highly populated places that the case visited while they were potentially infected with the COVID-19 Delta variant, we did think that that was a prudent course of action. Alert level 2 measures ensure that if there are any new cases in the Wellington region, the risk of transmission of those cases will have been minimised through two important tools: limits on gatherings and the requirements around social distancing that are put in place at alert level 2.

Given that there have been no new cases of COVID-19 detected, nearly two and a half thousand negative test results from close contacts of the case, including repeat negative results from the case's closest contacts, the Cabinet has agreed to shift the Wellington region back to alert level 1 from 11.59 p.m. tonight. Testing centres will remain open in Wellington central, Porirua, Kapiti Coast, Hutt Valley, and the Wairarapa.

If you haven't checked a location of interest yet and you're in the region, please do that and go and get a test if you have been to any of them within the specified period. If you have any symptoms of a cold or a flu, any aches and pains at all, please stay home, call Healthline or your GP, and arrange to get a COVID-19 test. The more tests that we do, and the more results that we receive, the more certain we will be that there is no COVID-19 here in the Wellington region. Cabinet is confident that if there was, we would be expected to see evidence of that by now, but we still need to remain vigilant. We need to remain at a higher state of alert, although not alert level 2, until the full 14 days has passed since the Sydney case left our shores. This is a tricky virus, and new strains, like the Delta variant emerging, mean that we can never be too careful.

It's also important to remember, if we think back to November, when we dealt with a small cluster of cases in November, officials and the case investigators struggled to identify the link between two of those cases. The closest they got was that the two people were in the same street at approximately the same time. Therefore, that just reinforces the need for all Wellingtonians to stay vigilant, stay sharp, and to come forward or contact Healthline to arrange to get a test if they do start to show any symptoms at all.

Cabinet also agreed today that from 11.59 p.m. on Sunday, 4 July, New Zealand will lift—Cabinet made the decision in principle that New Zealand will lift the travel pause to allow travellers from South Australia, ACT, Tasmania, and Victoria to travel to New Zealand. The health advice is that the spread of COVID-19 in these parts of Australia has been contained at this point. There's robust surveillance, testing, and contact tracing to detect and manage cases, and adequate border controls are in place to prevent the spread of new cases. We'll keep a close eye on all of this over the next few days, but the decision in principle allows people to start to plan.

We will extend requirements for those coming into New Zealand from Australia during the foreseeable future, to get a pre-departure test, within 72 hours of when they are leaving Australia, and, of course, that test will need to show a negative test result.

To be eligible to fly, travellers also must not have been in New South Wales on or after 11.59 p.m. on 22 June, or in Queensland, the Northern Territory, or Western Australia on or after

10.30 p.m. on 26 June 2021. Those times align with when our pauses came into effect with those Australian states. We want to ensure that New Zealanders aren't unnecessarily barred from travelling back to New Zealand, where there is no risk or very low risk of COVID-19. But we will, as I said, be monitoring the situation very closely.

As we said on Saturday when we announced the pause, we needed a few days to get a better understanding of the developing situation and the growing number of cases being reported across Australia, and we do have further information on that. Detailed risk assessments have been completed for each state and territory, based on the information that we've been able to get from those.

New South Wales is currently regarded as the highest-risk state in Australia. Queensland, Western Australia, and Northern Territory have a higher than normal risk, which is why the travel pause there is continuing, while South Australia, ACT, Tasmania, and Victoria are considered to have low levels of risk consistent with our green zone travel arrangements.

Cabinet carefully weighed up the evidence this morning and we consider that partially lifting the pause at this point is an appropriate course of action, particularly when bolstered with the introduction of a mandatory pre-departure test. We'll review the remaining pause in place for those other states on Tuesday, 6 July. There will be a first discussion of that at Cabinet again on Monday.

Today's decision gives airlines, passengers, and all of those affected the time to prepare flights from those green zone areas when the pause lifts on Sunday night. We know how important the travel bubble is, in particular for families and for businesses, but we also want to avoid a situation where we're having to respond to a case or cases here in New Zealand. Our system from here of opening up to the states where they are able to contain COVID-19 will help to ensure that New Zealand can remain at alert level 1.

So I now hand over to the director-general, Dr Bloomfield, for further detail, and then we'll open up for questions.

Dr Ashley Bloomfield: Thank you, Minister. Kia ora koutou katoa. So, as the Minister said, no COVID-19 cases in the community, and we have four new cases to report in recent returnees in our managed isolation facilities.

So in Wellington, today marks the eighth day since the person who tested positive in Sydney departed, and they were out and about in Wellington in the weekend prior to their departure, and it's nearly a week since Wellington moved to alert level 2.

The increasing number of cases that we see in many parts of the world, including, obviously, in Australia, is a stark reminder that the COVID-19 pandemic continues and is continually evolving with the emergence of new strains. It does reinforce we are taking the right approach here in New Zealand with our precautionary actions to ensure COVID-19 stays out of our community.

In the past week since Wellington entered alert level 2, health officials have had time to gather further information, undertake large-scale testing and contact tracing to establish if there is any community transmission. Just to put that in context, 2,609 people classified as either close or casual-plus contacts on one case is way more than we have ever done before, including most recently in the outbreak in Auckland in February where we cast the net fairly wide.

I want to thank all the testers who have done the testing, the lab staff, and our contact tracing staff right around the country in our public health units, who have participated and contributed to this. And especially those people—those over 2,600 people—who have done what was asked of them, been tested, and isolated. And a reminder that even as Wellington moves back to alert level 1, over 950 people will be remaining in isolation for that full 14-day period. And I want to thank all of them. It's an important part of our response. It's disruptive and it's inconvenient, but it really is a fantastic effort and will help give us confidence that we have headed off any wider spread here.

Yesterday, of the 7,240 tests processed throughout the country, over 2,000 of those were in the greater Wellington region. And since Wellington entered alert level 2, there's been more than 8,200 tests in the capital, so approaching 2 percent of our population, which is what we try to do when we are trying to chase down any community transmission.

As the Minister said, waste-water samples taken daily, and we're processing those quickly. I want to thank our colleagues at ESR. They're turning those around within around 24 hours—have shown no detection of the virus, which is also reassuring.

I know people will be looking forward, across the greater Wellington region, to returning to alert level 1 with fewer restrictions, but please do keep up the good habits that we have adopted over this last week or so. In particular, do stay home if unwell. We have got used to alert level Zoom. Keep using it. If you're unwell, get a test and remain isolated until you've had that test back. Let's keep the scanning numbers up, not just in Wellington but right across the country, and, of course, good hygiene and use of masks, which—a reminder—are mandatory even under alert level 1 in public transport and, of course, on domestic flights. So while the job is not done, there's no denying this is a milestone and that we've achieved that, thanks to the combined efforts of many people. A simple thankyou, then, to everyone who lives in the greater Wellington region and indeed across the country, because some of those people who remain isolated are not in the Wellington region.

Just a quick update on Australia. We continue to be in regular contact and participating in the daily meetings with our counterparts in Australia and closely monitoring the situation there. As the Minister said, there are multiple outbreaks across a number of states, but in several jurisdictions, in particular ACT, South Australia, and Tasmania, there are no cases. Victoria is still managing some cases from their outbreak, but the recent cases they have identified have been isolating during their infectious period.

Please—to everybody who has recently travelled back from Australia prior to the pause being in place; the number of locations of interest continues to grow. Please do keep an eye on that and there is a section 70 notice in place that requires anybody who was at one of those locations of interest to follow instructions, which include isolating and being tested. Thank you, Minister.

Hon Chris Hipkins: Happy to open up for questions.

Media: Have you had to use any of those section 70 notices or enforce them so far in Wellington or has everybody been pretty compliant?

Dr Ashley Bloomfield: Well, I think we've seen by the response, in particular, with over 2,600 close and casual-plus contacts, people have been—I wouldn't say "compliant", but they've contributed to the effort. The section 70 notice is in place there, particularly for those people who have travelled back from Australia, which does place a legal requirement and, of course, many of them we will be able to identify because they have flown back and they will all have received an email letting them know as well what the expectations are.

Media: Given that there are still a hundred potential contacts that still haven't been tested, what makes you so confident that they haven't got COVID-19?

Hon Chris Hipkins: I'll ask the director-general to—

Dr Ashley Bloomfield: Well, we know those people are in our system. About half of them, their test result is overdue. The other half we're still expecting it and they're being actively chased by our contact tracing team, and I guess we've got a high level of confidence. The particular thing here is usually within a week, when we've tested this many people across this many venues, if there was anything happening we would have seen something, and we have seen nothing. And that does give us a high level of assurance. Of course, it's not at 100 percent, but our contact tracing teams will continue to follow up those results that we haven't got back yet.

Hon Chris Hipkins: I think when you consider that in context of other positive cases that we've dealt with, we've never contact traced and tested this many people across this period of time and not identified another positive case where there was an elevated level of risk.

Media: Why not wait another two weeks to move down alert levels like some experts have called for?

Hon Chris Hipkins: I think, the issues that the director-general has just canvassed around the extent of our contact tracing—it has been far wider and more comprehensive than we've done for any other case previously. We have been able to contain actual cases in New Zealand without the need to escalate alert levels where we've had really good contact tracing information. This was a challenging case because of the extent of the potential exposure but, as the director-general's remarked—and I think this was of some comfort to Cabinet as well—the fact that given the extensiveness of the contact tracing, we haven't seen any additional positive cases, that provides us with some comfort, and the fact that we've still got a lot of people isolating, which means that if they do subsequently show up as a positive test result, we know that the risk will be contained because they've been isolating during the potential infectious period.

Media: You said that Tasmania, ACT, and South Australia have low levels of risk consistent with green light arrangements. These places haven't had cases for months. Why are you waiting another five days to re-open to them?

Hon Chris Hipkins: We have to put in place the pre-departure testing. We do know that also we've got some miners who are in those locations. I don't know if I've got the exact numbers here, but reasonable numbers of the miners from Northern Territory have travelled to those locations. Not all of their tests results are in yet; some are. So they're still a low risk, but it gives us the extra time to ensure that people can comply so that they can get their pre-departure test, but also, that if anything else was to come up in the next few days that meant that there was an elevated risk, we would be able to respond to that without having to yo-yo. So that's why we chose the time we did.

Media: You said yesterday that you didn't think everyone at all the locations that had been discussed had come forward inside of Wellington Airport. How much weight is the waste-water testing doing here in giving you this confidence?

Hon Chris Hipkins: Waste-water testing is one of the things that we look at, and that's, I guess, a little bit of additional comfort for us—that it would suggest that there isn't COVID-19 out there in the Wellington community. A lot of really active work has been done around those locations of interest just to make sure everybody knows, and we've tried to reach out to as many people as we can. So that's included things like working with the staff in the shops at the airport, reviewing CCTV. It's meant working very closely with Te Papa to extract every bit of information that we possibly could to identify people who may be at a higher risk. So a lot of work has been done to identify people who needed to be captured within that net, but, as I indicated before, we'll never ever be able to rule out with any case that someone didn't walk down the street next to them or the like, and that they'd have no idea of that, which is why we say to everybody, please, wherever you are in the country, if you start to show any COVID-19 – like symptoms, contact Healthline and arrange to get a test. That is the way we would identify any cases, wherever they are in the country very quickly.

Media: Can you clarify what's happening with those states that are still in bubble-pause mode? Are you considering green light flights, how many people are affected, and how long is the extension of that—across the board the same?

Hon Chris Hipkins: So we will review this again on Monday at Cabinet. We've indicated that we'll publicly communicate further on those states on Tuesday next week. We'll have a first discussion about that in Cabinet on Monday. One of the things that we will look at on Monday are the options that are being worked up at the moment to provide greater clarity to New Zealanders who may be caught up by that, and greater clarity to them on when they

might be able to return home to New Zealand in the event that this goes on for a significantly longer period of time in Australia.

So this is the same exercise we went through with Victoria. In the case of Victoria several weeks back, they reached the point where they were easing their restrictions and so we were happy to provide for people to travel back. In the case of New South Wales, obviously they're still seeing significant case number growth there, and so we do have to be prepared for the fact that we might not be in the same position there as we were with Victoria, and that's where we work up a variety of different contingency plans, including using our MIQ space that we've set aside specifically for this purpose. It includes considering whether any self-isolation should be required on return. It includes all of those different scenarios. So we'll be working through those over the next few days. Cabinet will discuss those on Monday and then we'll be able to provide greater clarity to people in those areas by Tuesday next week.

Media: What was your advice to the Government on this decision to expand the mandatory use of masks in certain settings? Did you support the move?

Dr Ashley Bloomfield: We've provided advice as part of the all-of-Government advice that's gone into Cabinet, and they're still considering so I don't want to pre-empt their decision by saying exactly what our advice was. But remembering there's the advice that we provide from a public health perspective, but then there are considerations around enforcement and implementation issues, which comes from across Government. So ours is part of that broader, across-Government advice.

Media: How reliable is the waste-water testing? We've been told that over the weekend because of the heavy rain some of the tanks, or wherever they get the water from that's tested, had to be emptied or there were some issues with heavy rain that may have impacted the test results.

Hon Chris Hipkins: Waste-water testing is certainly not a failsafe. It is just one piece of information that we weigh up. In terms of the specific accuracy as a result of higher rain, that is not something I have been briefed on, but the director-general might want to comment.

Dr Ashley Bloomfield: I haven't been briefed on it. There was a lot of rain here, but we've had testing daily now over nearly a week—it hasn't been raining every day in Wellington, which is good—and at five different sites around the region. So the fact that all of those have been negative does provide us with just another layer of assurance.

Media: Just on the two contacts or the miners that came back from Australia, have you got the results from the second person whose test result was due back today?

Dr Ashley Bloomfield: Yes, we've had initial negative tests on both those people. They will be isolating and further testing will continue for them.

Media: And can you tell us how long they were out in the community before they were put into isolation?

Dr Ashley Bloomfield: I don't have that information, but what I do know is that the mine itself notified all the people who had been there quite quickly wherever they were, around either Australia or if they'd travelled here, but we can find out that information.

Media: What's your level of risk assessment for South Australia, because I think they don't have cases there but they do have some local restrictions there? Is that correct?

Hon Chris Hipkins: That's correct. My understanding is that the restrictions in South Australia fall into the very precautionary approach that South Australia have been taking. They have been very, very cautious, which, again, is one of the things that contributes to our greater level of confidence there. But, look, we'll keep that under close review over the next couple of days.

Media: Did you consider the chances of someone who's still incubating the virus, maybe for 14 days—did you just think, given what we've seen, the chances of that is very low?

Dr Ashley Bloomfield: Yes, I think—I mean, there are two things we're watching here, and that's why our advice was to push out the implementation of re-opening travel from, in principle, those other states and territories. By pushing that out another few days, it just gives us a chance to see what might be happening there. And the implementation of the restrictions on travel that South Australia and, indeed, Tasmania and ACT have put in place, and Victoria, across their border as well.

Media: I was talking more about Wellington—people in Wellington who might still be incubating the virus.

Dr Ashley Bloomfield: Look, we feel that the likelihood of that is now very low, and the fact that over 950 people who might still be incubating it—those who are deemed to be at potentially the highest risk if there was anyone there—will be remaining in isolation provides a high level of assurance.

Media: On the vaccine roll-out, we're getting a lot of reports from people in different priority groups in Wellington, including people who are in their 80s, saying that they're struggling to get their first or second doses of Pfizer vaccine. They say they've had terrible communication from health authorities about when they will be able to get the vaccine. Are you confident that the messages are getting through, that the right people are getting the vaccine at the right times? Or is there sort of a choke here at the moment?

Hon Chris Hipkins: So what I would say to everybody who's in group 3: we've been really clear that our expectation is that they will be contacted for a booking to be arranged by the end of July. Now, the supply is the big issue that's holding back vaccination for everybody in group 3. So we're doing well in terms of using the vaccines that we have available to us. We're not expecting to see bigger numbers of vaccines arriving in until the middle of July. I would reiterate the message, and Minister Little in particular has reiterated this message to each DHB in his conversations with them, we do want them to be actively getting out there and contacting people so that they know when they can expect to hear from their local DHB or whoever it is that's doing the bookings.

Media: So these people aren't missing out at this point, basically?

Hon Chris Hipkins: They're certainly not missing out, no.

Media: They shouldn't be antsy. How's it being weighed up in terms of—do you have any sense of how it's weighed up, in terms of who gets priority in these groups, and in DHBs, because it does seem a bit patchwork at the moment?

Hon Chris Hipkins: Look, DHBs are making decisions around group 3, around how they approach that, and there is slight variation in that. We have asked them, particularly now, while we're just in these couple of weeks where vaccine supply is very constrained, to really focus in on group 3 and try not to do too much outside of that, into group 4, but really just focus in on those people who are on the current prioritisation list.

Media: Have we run out of vaccine yet? When will that occur?

Hon Chris Hipkins: No, we haven't run out of vaccine, and we're not expecting to, but we're expecting to get very close to it.

Media: When's our lowest point?

Hon Chris Hipkins: Our lowest point would be next Tuesday, when we're also expecting another—yes, next Tuesday, but we're also expecting another delivery next Tuesday. So we have very carefully calibrated this. If the deliveries are late, that might create a bit of a headache for us, but we made that decision deliberately. I've been very open about that. We didn't want to have vaccines sitting in the freezer as a contingency; we'd rather get them out and into people, but it does mean we are cutting it very fine.

Media: What's the current stock level?

Hon Chris Hipkins: The current stock levels sit at around, I think, 30,000—yeah, just under 30,000. But we have just had a delivery; we had a delivery today, and so that doesn't get added to that until it's been processed through. So that will be happening today. So that brings us back up again a little bit, but, look, it is going to be pretty tight over the next seven days.

Media: What do you mean by pretty tight? Is that a few hundred vaccines?

Hon Chris Hipkins: Yeah, we will pretty much get down to almost zero by Tuesday next week, when we get the next delivery in.

Media: Does that worry you? That seems like really, really low. Doesn't that keep you up, thinking if something goes wrong at the border?

Hon Chris Hipkins: Absolutely. Yes, there's no question. That is going to be keeping me awake for the next seven days. But as I said, we could have recalibrated things so that we slowed down in order to keep a stock of vaccines in the freezer. We made the decision that we would rather get the vaccines out there and into people. They're not going to provide any protection to anyone if they're sitting in a freezer somewhere.

Media: Brian Roche said the week before last that the next thing that they were concentrating on was a, sort of, two- to three-week stocktake of the border. I'm just wondering, they must be partly through that. Have you had any advice back from him and the advisory group around, I guess, what you've done at the border and the way things have worked out the last week or so?

Hon Chris Hipkins: Yeah, I haven't had my—I have a fairly regular catch-up with him and his group. I haven't done that in the last week or two, but I certainly will be doing. But the approach that they're taking is to work alongside the people who are doing that work to provide that second set of eyes. So early on in the process where Sir Brian was leading two different work streams for us—you'll recall he did one around contact tracing and one around testing—it was sort of more in the audit and then report type of mode. This is more about working alongside the people who are doing the work, providing that kind of contestable advice and opinions and a contestable set of advice and opinion back to Ministers as well. So it's more real-time reviewing rather than that kind of review, write a report, and then it's some time before it's released. So that's the mode of working that they are in at the moment.

Media: Because presumably then, I mean, you've been making some pretty, sort of, fundamental decisions over the course of the last week or so, specifically around the border, and that's an area that they're working in. I mean, wouldn't it be more useful if you were getting those updates either after you were making set decisions or every, sort of, 48 or 72 hours or so?

Hon Chris Hipkins: Look, we keep in fairly regular contact, and also Sir Brian has never hesitated if he's felt that there was something that we needed to know and to get on the phone and let us know as well. And then, of course, you know, bearing in mind that this is a second set of eyes. We've still got the first set of eyes, which are the health team providing us advice on a daily basis as well.

Media: Sir Brian also talked to you about how critical it was to get those unvaccinated workers at the border vaccinated. Can you talk about what the barrier is there? Because we've got the border testing register and it's linked to the immunisation register. How hard is it to just see who's unvaccinated and—because they get sent text messages about the test they need to do, can't they just be sent text messages about “Hey, we need you to be vaccinated. This is where you can get vaccinated.”?

Hon Chris Hipkins: Yeah. So, look, I'm happy to provide a, if you like—it's probably worth sitting down with the team to talk about just the intricacies of all of the ins and outs, but all of the different border workforce groups, because there's different pressures on different parts of that system. What I'm confident of is MIQ—no one's working in MIQ who hasn't been fully vaccinated. That doesn't mean there's still, I think, a few people who are on the books, but

they're not working. And you're right, that is not where the weakness is. In terms of the air crews—very good progress with Air New Zealand around making sure that we're getting good coverage there and that we're covering them. Government border workers—so people working at the border working for Customs, MPI, etc.—again, confident that we don't have people doing that work who haven't been vaccinated.

The bigger group are the people who are working in the private sector, many more ins and outs there and intricacies of that. So, again, if you look at, say, the ports, which is where, on the data that I have available to me, it seems to be the highest concentration of non-vaccinated workers are at the ports. Some of those people who are in the system are only actually occasionally working in those areas of the port where there is higher risk. So we're working through all of that.

One of the things that we have to keep in mind is the legal advice that we get on this around who we can—which jobs we can require vaccination for, and we have to balance that very carefully. We have to have a very strong public health reasoning for doing that. So those are all the issues that we've been working through around the next iteration of the border order, which will be coming shortly, and it will extend the mandatory requirement to a much bigger group of workers.

Media: Can you answer that question about how—is there a difficulty there and just simply, you know, looking with the testing register and the immunisation register and sending text messages to help them get vaccinated?

Hon Chris Hipkins: Oh, in terms of that, look, a lot of work is happening with employers at the moment, even before further mandatory kind of requirements are put in place, just to help them identify their staff who haven't been vaccinated. So if they're using the border worker testing register, the matching now between the vaccination register and the border worker testing register is pretty good. There's still a little bit at the margins where we're still tidying that up, where we've found people who haven't been vaccinated in the testing register. When a manual process has been gone through it, it has been identified that they have in fact been vaccinated, but the data hasn't been pulled through the two different systems and matched up appropriately.

So, you know, there's obviously tens of thousands of people that we're talking about here, so that data-matching exercise is very important and it continues.

Media: The question I'm asking is we've still got thousands of people who are unvaccinated at the border. What efforts have been made to try and reach out to them? Because it isn't mandatory for them to be vaccinated to work at the border at the moment. How many of them are actually working at the border—as you say, some of them are moving in and out, etc.—and how much effort has been going to contact them and say, “Hey, you're not vaccinated, you're working at the border, we'd really like you to get vaccinated.”?

Hon Chris Hipkins: Look, as I said, we don't always have the data to determine exactly when people are working at the border, so—some people, their work at the border is occasional work at the border, for example, and we don't track and trace those people. So we do rely on employers—

Media: You'd have contact details for those people, though.

Hon Chris Hipkins: Yes, we do have contact details for them, but we don't necessarily know when they're working at the border. So we're working hard to make sure that they know they can get a vaccination now.

Media: Wouldn't you send them a text anyway, just as a precaution?

Hon Chris Hipkins: We'll come—you've had a pretty good go, we'll come back over here.

Media: By moving Wellington down to alert level 1, it, effectively, signals the closure of the Sydney man's case, right? That must feel like we've dodged a bullet, given the Delta variant, how many places he's visited, and so many days of no community transmissions?

Hon Chris Hipkins: Look, we're in a good position. It doesn't mean that we're in a perfect position. I don't think we'll be in a perfect position again until COVID-19's all over, which could be some time away. So there is never a room for complacency. No one's doing victory laps at this point. We're still going to have to remain vigilant, and those who are in Wellington, particularly those who were in Wellington, and are now in other parts of the country, last weekend—they'll still need to remain vigilant, as well.

Media: Just because it is important, can you explain why it was still necessary to do what we did, even though we had so many days of no community transmission?

Hon Chris Hipkins: Look, we've taken the approach right the way through our COVID response: better to act quickly on a no-regrets basis than delay when we had a whole lot of uncertainty and find that we were then dealing with something bigger that meant we had to be more extreme in our response to that. So I acknowledge that level 2 places restrictions on businesses, for example, and that does have an impact on their turnover—far less of a turnover at level 2 than if we'd waited a few more days, found that actually we did have a number of positive cases, and we were at a level 3 for a prolonged period of time.

Similarly on the trans-Tasman—a similar principle applies there. So I do acknowledge that those businesses in the tourism sector will be feeling that—not having those tourists who were otherwise booked coming in from Australia. The counter to that is that if we had people coming in from Australia and then we found that we were dealing with cases here that meant we had to have more border restrictions—not just more border restrictions but more domestic restrictions—they could be potentially finding they would lose their domestic customers as well as their Australian customers. And so those are the sorts of things—we think about that very carefully when we make those decisions.

Media: Just on the scanning, we've spoken to one close contact who scanned in at Floriditas but never received an alert through the app. Why would that be, and how satisfied are you with how the app's running?

Hon Chris Hipkins: Look, we'd have to look at that detail in particular. They should have received a push notification through.

Media: On the state borders, again, you described the opening on Monday as “in principle”. Can you just describe what needs to happen? Is there a later check—a Saturday meeting or some such—that will actually ratify that, and also are you open to adding other states like Queensland and Perth if they flatline or go back to zero local cases each day before then?

Hon Chris Hipkins: So working backwards through that, the latter point first: we will consider those other states on Monday at Cabinet. In terms of the states that are currently slated to be opening up again for green zone travel from midnight on Sunday, that will happen unless there's good reason to stop that. So we won't have to meet again to confirm that, but we would meet again if we were going to change that.

Media: Minister, on the vaccine roll-out, again, have DHBs been following that order from Dr Bloomfield from a couple of weeks ago to scale back, stop making new appointments? Is that coming through in the data, or are they back to plan?

Hon Chris Hipkins: They have been delivering to plan, but, of course, they're ahead of plan, so they haven't gotten further ahead of plan. So they've been, broadly, sticking to plan the last few weeks.

Media: And when are the first—even roughly—of those big batches of vaccine supposed to come in? Is it next week, or is it another couple of weeks away?

Hon Chris Hipkins: No. We start getting bigger deliveries from next week, but the big, nice, healthy deliveries that will mean that we can start to ramp up—that won't happen until about the third week of July.

Media: Just on the Waikato DHB data leak, Dr Bloomfield, have you seen reports today that there's been a big public leak of the patients' and staff information, and what do you make of those reports?

Dr Ashley Bloomfield: I haven't—I've heard of the reports. I haven't looked at the information. I just think it's completely disappointing that someone would do this with private information, and the fault lies with the perpetrators. I'm shocked and disappointed that they would leak private information about staff and patients. It's such an important part of maintaining trust and confidence in our public health system, and you can rest assured that all DHBs are incredibly focused on making sure that all that private information that they have is secure.

Media: Is the Ministry of Health doing anything to stop the spread of that information? Are you helping DHBs?

Dr Ashley Bloomfield: I don't have any further information on that as yet, but I'll be asking my team for advice on that.

Media: Are you going to be looking at who did this and what sort of repercussions will there be?

Dr Ashley Bloomfield: Well, of course, that's with the National Cyber Security Centre. Colleagues are following up who was involved in the cyber-security incident and, of course, anything like this is referred to the police to follow up.

Hon Chris Hipkins: Last couple of questions. I think I had one over there.

Media: Given things are so tight with the vaccine and we've had this Delta scare, would you consider approving the applications for the AstraZeneca and Johnson and Johnson vaccines?

Hon Chris Hipkins: Ultimately, that decision sits with Medsafe. I think, as we've indicated before, they are close to making recommendations on both of those vaccines. They've not yet done that. So—

Media: Would you urge them, though, to hurry up with that and—

Hon Chris Hipkins: Look, at this point, I'm confident that Pfizer's going to deliver us the vaccines when they've indicated they're going to deliver the vaccines to us. Rolling out a different vaccine would have a bit of a lead time to it anyway, so at this point, we're still sticking with plan A. You never rule anything in or out, though, but what we've always been very clear about is that our Medsafe approval process is critical, and we won't be using any vaccines that haven't gone through the full Medsafe approval.

Media: On the trans-Tasman bubble, is there a plan to help Kiwis who might be trapped in those other states where the bubble won't be reopening?

Hon Chris Hipkins: Like I indicated on Monday, Cabinet will be considering options around what we do if people end up being—if we're not in a position to start easing restrictions to other states—what alternative contingency plans we'll put in place for those people who are affected by that. So we'll consider that on Monday and we'll say more about that. New South Wales, as I indicated, is the highest risk, but it's also the one that the pause has been in place the longest. So that will certainly be front of mind in our considerations. Last question.

Media: Is there any particular reason that Cabinet didn't approve the provisional Medsafe approval for Pfizer for 12- to 15-year-olds yesterday?

Hon Chris Hipkins: We are awaiting a little bit of further information from the Director-General of Health—a bit of further advice on that—and once we've got that, we'll consider that. I'll let the director-general comment on that.

Dr Ashley Bloomfield: Yes. So we'd put the advice through to Cabinet, which included support for the Medsafe provisional approval, however, I had asked for one specific further piece of advice through Dr Ian Town, the chief science advisor. Our COVID vaccination

technical advisory group is meeting today, so we'll have that information, which I'll then be able to update the Minister with.

Media: Is one of the things that you're weighing up here the need to get to herd immunity and how much—you know, the number of people within that 12 to 15 years age group?

Hon Chris Hipkins: Oh look, that's probably a broader topic of conversation than what we're here today to talk about, but we will get into that when we do our next vaccines update—happy to get into discussion on that.

Thanks very much, everybody.

conclusion of press conference