

ALL-OF-GOVERNMENT PRESS CONFERENCE: FRIDAY, 12 NOVEMBER 2021
HANSARD TRANSCRIPT

Hon Grant Robertson: Kia ora. Ngā mihi nui ki a koutou katoa. Nau mai, haere mai ki tēnei hui pāpaho. Welcome to the press conference, everybody. I will hand over to Dr Caroline McElnay, the Director of Public Health, for the latest update, and then I'll make a few comments before taking your questions.

Dr McElnay.

Dr Caroline McElnay: Thank you, Deputy Prime Minister, and kia ora koutou katoa. There are 201 new COVID-19 cases in the community being reported today. Of these, 181 are in Auckland, 15 are in Waikato, four are in Northland, and one is in Taranaki, with the remaining five cases announced last night to be included in tomorrow's figures. There is also one case to report in recent returnees in our managed isolation facilities. Further details are in the 1 p.m. statement.

We are very aware of the grief and hurt whānau who have recently lost loved ones to COVID-19 are experiencing. This is a serious virus, and none of us can afford to underestimate it. If you or your loved ones are being cared for in the community and you feel that your or their condition is deteriorating, please don't leave it to chance that you'll improve. Please reach out as soon as possible, or ask someone to do so on your behalf. This is the advice that's given to anyone and everyone who is being cared for in the community with COVID.

Hospital care is free and ambulance services are free for those with COVID-19. Our hospitals are ready to help and have robust infection prevention and control measures in place to keep you and your loved ones safe.

I'd just like to acknowledge that people have died this week, and that is tragic for their friends and family. This is a very real reminder that the more people who get COVID-19, sadly, the more deaths we are likely to see. It is a sad reminder that COVID is potentially fatal, and this is particularly true if you're unvaccinated.

Just moving to hospitalisations: there are 85 people in hospital with COVID-19, including three who are still being assessed. Of these, 11 are in ICU or high-dependency units. The health system in Auckland can cope with these and the forecasted numbers of cases and hospitalisations, and I'd like to reiterate that there are more than 1,700 hospital beds across Auckland and more than 100 ICU beds.

Currently, overall hospital occupancy is about 86 percent, ICU occupancy is around 70 percent, and ventilator occupancy is around 15 percent. It should be noted that the ICU bed capacity does change daily depending on need and staffing. We can manage, but it is important that we limit the load on our hospitals. There are two key actions that all New Zealanders can do to ensure that our health system is able to provide for everybody's health needs, and those two things are get vaccinated and continue to abide by the alert level restrictions. It's also important that anyone who needs care for any reason seeks it—do not delay.

On testing, there continues to be high demand, particularly in Auckland. Yesterday, there were 30,653 tests processed across the motu, with 11,683 swabs taken in Auckland alone.

Specifically on Auckland—just an update there—public health staff are continuing to urge anyone with symptoms, no matter how mild, to get a test. The focus is currently on those living in Rānui, Sunnyvale, Kelston, Birkdale, Manurewa, and Māngere. People living in those suburbs need to be vigilant, and get tested if they're symptomatic. There are 18 community testing centres available for testing across Auckland today. Testing centres at Northcote, Balmoral, Ōtara, and Wiri continue to operate extended hours to increase access to testing in those areas.

Public health staff are supporting almost 3,000 people to isolate at home. That's made up of 1,382 cases across 929 households.

Just an update on the Auckland rest home in Avondale, a second round of testing was carried out on residents and staff yesterday after two residents tested positive for COVID-19. One further resident tested positive yesterday and has been admitted to Auckland City Hospital. Other results from the second test of all other residents and staff received so far are all negative.

Turning to the cases in Stratford now, one of the six are in Taranaki Base Hospital and is in a stable condition. The five remaining cases are isolating at home. All of these cases are clearly linked, and are also linked to the Auckland outbreak. Contact tracing is under way today to determine the movements of the cases and any locations of interests. Five locations of interest, including pharmacies, a hardware shop, and a supermarket, have been added to the ministry's website so far. So far, there have been five close contacts identified, and our investigations still continue to see if there are any additional ones.

Just to note that these cases are highly likely to explain the recent waste-water detections in the town, and the most recent detect there was reported on Tuesday. And we want to remind anyone in Stratford or any recent visitors to the town with COVID-19 - related symptoms, no matter how mild, should get tested. Details of the testing and vaccination centres throughout Taranaki are on the Taranaki District Health Board website.

And just on vaccination: as of yesterday, 86 percent of eligible people in Taranaki had received at least one dose of the vaccine; 73 percent had received a second dose. For Māori in Taranaki, 73 percent had at least one dose; 54 percent had received their second dose. Yesterday, 801 vaccines were administered in the region. This is a really good time to get vaccinated if you haven't yet done so.

On Waikato: there were 15 new cases confirmed in the Waikato overnight. Four cases have been linked to previous cases so far, the remainder of the cases notified, and investigations are under way. Locations of interest, again, are on the Ministry of Health website, and yesterday they were identified in Hamilton and Ōtorohanga. There are seven pop-up and dedicated testing sites across the Waikato today: Hamilton, Ngāruawāhia, Huntly, Ōtorohanga, Te Awamutu, and Te Kuiti. Yesterday in Waikato, there were 3,377 tests processed and 2,628 doses of vaccine given.

In addition, COVID was detected in a waste-water sample collected from Taupō on 8 November. A repeat sample was taken on 10 November, and we expect those results later today. As we've seen in Stratford, this can be an indication of a case in the community. It can also be due to recovered cases who may be there, but we encourage anyone in Taupō with symptoms, even if they are mild—and regardless of vaccination status—to get tested.

On Northland, there are four new cases in Northland being reported today. That brings the total to 39. Three of those new cases are known close contacts of existing cases. That leaves one who is still being investigated and interviewed. Just a note that a person who was previously under investigation yesterday after returning an initial positive result has been reclassified as not a case after being confirmed with repeat negative results. In Northland, there continues to be a good turnout for testing: 985 swabs were taken yesterday. There were also 1,276 people vaccinated in Northland yesterday, and details of testing and vaccination centres can be found on the Northland DHB website.

And, just finally, we are hearing reports that health professionals are being put under considerable pressure to provide vaccine exemptions when the process is just getting under way. I just want to reiterate that there is a single national process, with strict criteria, and this is the only process that can be used, so please be patient and be kind to front-line staff. The application process and the criteria under which you can apply is on the Ministry of Health website. The next step of our process is just to confirm the panel members, which we expect to do in the next couple of days.

Back to you, Deputy Prime Minister.

Hon Grant Robertson: Thank you very much, Dr McElnay. You will have seen yesterday that we hit 90 percent of eligible New Zealanders having had their first dose of the vaccine, and 80 percent fully vaccinated. This is an incredible milestone, and I want to thank the millions of New Zealanders who have taken up the opportunity to get vaccinated. On a DHB basis, six of our DHBs have now hit the 90 percent mark for first doses: Auckland, Waitematā, Counties Manukau, Capital and Coast, Canterbury, and Southern. Some others are very close to hitting that milestone: South Canterbury is 842 doses away; Hutt Valley is just 542 doses away. This weekend, people in those areas could go and get vaccinated and push their DHB past that 90 percent milestone, and, indeed, right across New Zealand, this weekend is a great time for people to get vaccinated and protect themselves, their family, and their community.

On the topic of vaccinations, the requirement to be vaccinated for our health and education workforces starts next week. I want to thank the vast bulk of health and education workers who have already been vaccinated. Cabinet has only chosen to require vaccination of workers in the highest-risk settings, and this is not a decision that we took lightly.

Under-12-year-olds can't be vaccinated yet, but they can get COVID. In fact, about 20 percent of the cases in the Delta outbreak have been children aged under 12, including babies. So this is one of the reasons we're asking health and education workers to be vaccinated—to protect those who can't yet protect themselves. We've also seen that when COVID gets into school and education environments around the world, it can spread quickly and easily.

For health workers, it's a similar equation. People entering our hospitals, GP clinics, and other healthcare settings often have compromised health already. As we've seen in this outbreak, our hospitals and healthcare settings have become some of the key places that COVID is seeding and spreading. Having health workers vaccinated means that those who are sick can have that extra layer of protection from the virus.

So getting vaccinated is not only about protecting yourself; it is also about looking out for those around you and those you come into contact with, especially our children and the sick. Vaccine requirements have been commonly used overseas. They work, and they're a key part of the vaccination drive in those countries with high rates of vaccination that we're trying to match.

Just a quick word on vaccine certificates: as you all know, vaccine certificates are in our very near future, and, so far, 700,000 New Zealanders have signed up to My Covid Record to create an account. This is where that vaccine certificate will land shortly. So if you haven't already signed up, I encourage you to get cracking today at [Mycovidrecord.health.nz](https://mycovidrecord.health.nz).

And, finally, just before we finish up, I'd like to remind everyone that the new resurgence support payment is open for applications. This is now a double payment, calculated weekly but paid fortnightly, with the payment being at a rate of \$3,000 and \$800 per FTE, up to a maximum of \$43,000 per business. The wage subsidy also continues to be available to eligible businesses on a fortnightly basis as well.

Since the current outbreak began, we have paid out \$5.5 billion in economic support via the wage subsidy scheme and the resurgence support payment, which has helped to keep New Zealanders in work.

Happy to take your questions.

Media: Do you have any more details about the Stratford case—so were any of the cases vaccinated?

Hon Grant Robertson: I believe one of the six were vaccinated—

Dr Caroline McElnay: Yes.

Hon Grant Robertson: —the other five were not.

Media: Why did they travel to Auckland at the end of October?

Hon Grant Robertson: So there was a member of the family in Auckland and they were coming down to be with their family in the Stratford area, and a member of the family went to Auckland to pick the person up.

Media: Did they get an exemption—

Hon Grant Robertson: I'm just going to say, I'm not going to go into the details because I do want to try and protect some of the family's privacy here. But, yes, it was part of a process of bringing someone down.

Media: Why were they reluctant to get tested?

Hon Grant Robertson: I don't have specific information about that—as to why they were reluctant to get tested. Obviously, they were in touch with the healthcare system over the last week or so, and through that period of time I am aware that they were asked to be tested, but they declined that. However, obviously, they became, or a member of the family became more unwell, that resistance dropped away.

Media: Were any of them scanning in?

Hon Grant Robertson: No.

Media: You've just been told that there was several hours' delay between the DHB finding out and them telling the Ministry of Health and then, obviously, the public. Is that true?

Dr Caroline McElroy: I'm not aware of that. We were first alerted at the Ministry of Health yesterday evening.

Hon Grant Robertson: I'm not aware of that, either.

Media: We were told they were told early afternoon yesterday—is that true?

Dr Caroline McElroy: I can follow that up, but the first that we at the ministry were aware was in the evening.

Media: And will you put Taranaki in level 3, considering the DHB said that at least one case had been infectious for two weeks and in the community, plus that region has very low vax rates?

Hon Grant Robertson: Yeah, so at this time the advice is not to do that, but Dr McElroy and her public health team are doing ongoing assessments of the situation. The reason for the position we have right now is that we know how the case came to be in—or how the virus came to be in Stratford. We know that it is currently confined to one family and one household. But, as the day goes on, more interviews are undertaken, more investigations are done, and the public health team would update their information.

But if you think about what happened in Christchurch at the beginning of October: a similar situation there, where somebody was there. We knew how they'd got the virus, we knew how the virus had gone there, and we knew enough about them to be able to say, "We think this can be contained." So, for now, we're working on that basis, but we continue to listen to the advice that we get.

I'll just finish with Jess, and come over there—sorry, Jemma.

Media: A Glen Eden family of a man who died are saying that the level of support that they received while in home isolation was substandard, to say the least. Does it upset you to hear that that care was inadequate?

Hon Grant Robertson: Oh, we want to make sure that everybody who is in the community is feeling safe and well looked after; that they know that if there are any issues whatsoever that they can be picked up quickly. The system that we've set up is designed to make sure that we do early assessments on both the medical—the health conditions, but also the public health elements of them being safe and able to be cared for in the community. By and large, I believe the system is working well, but, clearly, there are some examples that are coming through where we do need to tweak the system. That is happening, and we want

to make sure that we continue to provide the services that are most appropriate for people. The standardised way of interacting might not be the right thing for everybody, and we've got to be able to make sure our systems keep up with that.

Media: So what are you actually doing to improve the home isolation system so it isn't overwhelmed, as it is currently, and people get the care that they need in a swift fashion, and this doesn't happen again?

Hon Grant Robertson: Yeah, so I'm not going to accept that the system is overwhelmed. What I'm going to accept is we've got some examples where things have not gone the way that we would like them to go. We have a process of continuous improvement, so there is conversations between the Ministry of Health, the district health boards, and the public health units. We do need to be involving more people from the community to be able to make sure we get the appropriate support alongside people, and Ministers have been working and talking with officials at every level to be able to make sure that this system operates as we intend it to.

Dr McElnay, do you want to comment?

Dr Caroline McElnay: No, there are constant meetings with Auckland district health boards, who are setting up this system to make sure that we learn from any of these events that have happened and make sure that we're providing that level of care.

Media: Dr McElnay, how do you think that that family feels, hearing you say "Don't leave it to chance.", when they're saying that they made multiple attempts to get in touch with health professionals and were told that these were normal symptoms of COVID?

Dr Caroline McElnay: Well, I'm aware that in that particular situation there is an investigation under way to find out exactly what did occur. But I have spoken to the providers that we use for the daily checks that are made to cases currently in the community, and they've assured me that they do ring daily. They go through a number of questions, specifically asking for symptoms and offering additional health professional support if needed, and that's the system that we've got. So I can't go into the details of this particular situation, but it is under investigation.

Media: The health Minister said—

Hon Grant Robertson: Just hang on a minute. We'll take Barry, because I said I would, and then I'll come back down, Craig.

Media: Are you aware of the Auditor-General's report—John Ryan—into the procurement procedures for saliva testing, and that the panel—four on the panel had conflicts of interest? What's going to be done about that?

Hon Grant Robertson: Well, I'm certainly aware of the report and, obviously, the Ministry of Health is the agency that is being looked into there. They accept the findings of the report. I do note—and Mr Ryan said he doesn't feel the need to go further, but he has highlighted those issues that had concerned him, particularly around where they can improve their documentation, their communication, and the way in which they worked through the RFP. I would note the ministry was acting quickly. At the time, they were trying to make sure that they dealt with a number of uncertainties in the process, recognising the importance of that development, and I'm very confident the ministry will now use the recommendations of the Auditor-General to guide their future practice.

Media: Perhaps Dr McElnay could answer how come four people on the selection panel for the company had conflicts of interest—how did that come about?

Dr Caroline McElnay: I wasn't involved in any of the processes there, but just supporting what the Deputy Prime Minister has said: that the report from the Auditor-General's been accepted by the Minister. We'll be reviewing those recommendations and making sure that our system's going forward and our process is going forward.

Media: How could that possibly happen?

Hon Grant Robertson: Barry, I don't think either Dr McElnay or I were involved in the detail of how that panel was appointed. What I would say is when we're in these areas where there is a great deal of technical expertise required, sometimes it is—and I'm not making a specific comment about this, because I wasn't involved. But sometimes when there is this kind of technical, specialist area, you have to go looking for people who know about this particular type of testing. But clearly, when you're doing that, you should be aware of conflicts of interest. We also know that conflicts of interest need to be managed. It doesn't automatically mean someone can't be involved, but they do need to be managed. So we would expect the Ministry of Health—as we would do in any part of their work—to be aware of conflicts of interest and to manage them. I'm sure that will be one of the lessons they will learn from this.

Craig.

Media: Back to the home isolation system, early next week, there'll be this massive exodus of people out of MIQ. Are you considering moving away from the default self-isolation and going back to putting people into MIQ as a default?

Hon Grant Robertson: We continue to put people into MIQ, and those assessments that are done once somebody tests positive for the virus are very much about the suitability of where they are, their own ability to be able to manage and get through, and so if people are in a position now where the assessment is that that is not the case, they go to MIQ. There is room for them to do that in MIQ, and we'll continue to get the balance between what works for people, either in the community or at MIQ.

Media: On another topic, you mentioned resurgence payments. Retail reopened in Auckland this week, but we're hearing lots of shops are still remaining quite empty. They're saying they need more support. Is there any further financial support that could be made available, or is what's there what's there?

Hon Grant Robertson: As I said when I made my opening remarks, more than \$5.5 billion of economic support has gone out since 17 August via both the wage subsidy scheme and the resurgence support payment. As of today, that resurgence support payment has doubled. We are doing our best to support people. There have been a number of different reports about retail. There was certainly quite a rush on the first day in certain parts of the retail sector; but equally in others—for instance, the Auckland CBD—it's much harder going because there aren't the people there that would normally be in town. But our schemes are set up so that your decline in revenue is what defines how much assistance you get. That's what people will be receiving.

Media: What about mortgage holidays for business owners? I know the previous loan deferral scheme—it wrapped up in March, I think.

Hon Grant Robertson: Yeah, so we have maintained pretty constant contact with the banks over the course of this outbreak to monitor the number of hardship-type applications that are being put forward. The banks tell us that they are not at the volumes they were last time, and that they're being dealt with by banks, and, remember, the only reason the Government became involved was effectively as an underwriter, with a concern that there would be an effect on the overall financial and banking system. There is nothing like that this time, so therefore that really is fundamentally down to an arrangement between those businesses and their banks.

I'll come to Henry and then—

Media: Dr McElnay, can you just say—for the advice that is given to people who are home isolating, are there red lines in that advice that basically say “Go to the hospital immediately—don't bother calling Healthline or waiting for a daily check-in call.”? In the UK, it seems like if someone is at home and they start coughing up blood, they go to hospital. There's no waiting around and checking with Healthline, who might not be that good. Are there those red lines in the advice?

Dr Caroline McElnay: Yes, in the daily calls, not only do they check for symptoms but every call is finished with “If you deteriorate, if you become unwell, ring 111. Seek that urgent help, do not wait for the next call.”, which would be the next day. So that advice is given out on those daily calls.

Media: Are you confident that that advice is getting through to people, given there’s several stories I’ve heard—particularly one that was on the *Herald* this morning, about someone who was clearly deteriorating, but did not go to hospital?

Dr Caroline McElnay: I think, as the Deputy Prime Minister said earlier, messages can be given, but sometimes that might be understood or it’s not received, or people may need a different way of communication with them, and that’s one of the things that we’re looking at as part of the extra tweaks to the system that we’ve currently got in place. That is—the current system at the moment is it’s a phone call. That may not be the most appropriate method for everyone, and that’s where we want to learn how to make that more specific to the needs of individuals and their families.

Media: Sorry, Minister Robertson, just one more: you were talking about business support, resurgence payments. There’s been quite a lot of that this lockdown in Auckland. There’s been no support for renters, despite the fact that last year there was quite a lot of support for renters. Renters United have called for more support. TPK actually also called for more support, but were shot down by Kāinga—HUD. Did you at any point consider helping renters more, and why did you choose not to?

Hon Grant Robertson: We kept a very close eye on the experience of all New Zealanders through this outbreak, and particularly low-income New Zealanders. Last time when we made the initiatives, we did around making sure that people’s rents couldn’t go up and so forth and so on, that was in the environment of extreme uncertainty as to what was happening. In this environment now, we can be confident that the systems we’ve got are the ones that should work. So that is if people had significant financial stress, there are a number of avenues for them, particularly through the Ministry of Social Development to be able to work on. So, no, on this occasion, we didn’t take that beyond an ongoing consideration. Minister Woods, as housing Minister, keeps us up to date with the situation for Kāinga Ora tenants.

I’ll come down to Jo and then I’ll come back up the front.

Media: MSD said they had less support—made less money available for that support than they did last year, so MSD—

Hon Grant Robertson: Well, that support is made available. If MSD has concerns about the amount they have available, they’re fully able to come to us.

Media: What do you say to someone who’s on the wage subsidy, so they’re possibly getting—I know you encourage employers to pay the full amount, but some people on the wage subsidy are getting 70 or 80 percent of their income and their rental is taking up 40 percent of their income, and there’s no control that means their landlord can’t at some point ask for a higher rent. What do you say to that?

Hon Grant Robertson: Well, bear in mind again we changed the rules so rents could only go up once a year in between now and last time, and we continue to tell people that if they have concerns about their ability to make ends meet, that they do contact MSD.

Jo.

Media: You mentioned that one of the six in Taranaki had been vaccinated. Do you know whether the person who was vaccinated was the person who had the exemption to travel to Auckland to pick up the family member?

Hon Grant Robertson: I’m not aware of that, sorry, Jo. I can find that out if you like.

Dr Caroline McElnay: No, I don’t know that. I don’t know.

Media: So it could be a situation where an unvaccinated person has yet again been able to use that Auckland border similar to the Christchurch situation, where they went there for a childcare arrangement and they brought the virus back.

Hon Grant Robertson: I actually think that the person, I think—I've got a note here which I just need to check, but I actually think that the person who has left Auckland was the vaccinated person. But I will come back and confirm that for you.

Media: On that—and it's come up a lot now—is there still active consideration around people who are getting exemptions to cross that border and come back to other regions actually requiring vaccination for that sort of movement?

Hon Grant Robertson: It's not something that we've got under active consideration right now. Obviously, there are many different reasons for why exceptions might be required. Some of those have to happen at very short notice, as well—they're not necessarily things that are planned. So, obviously, we want everybody to be vaccinated. The vaccination rates in Auckland are now high, and so we have a limited number of people. But we continue to have to deal with the reasons why people need exemptions, and, unfortunately, sometimes that means we can't intervene.

Media: Can I ask well what your view is on the merits, I guess, of moving into the traffic light system for the whole country earlier to use it as a way to sort of nudge the unvaccinated across the line who are living a pretty comfy level 2?

Hon Grant Robertson: Yeah, I don't have a lot to add to what the Prime Minister said to you, Jo—you won't be surprised to learn that. Obviously, you know, we want to create an environment where not only are we all moving forward with vaccination but there are reasons why the unvaccinated should get vaccinated. I'd say today that there are many reasons for that, regardless of what we end up doing with the traffic light system. In particular, in the very near future, regardless of exactly when that is, if you want to be going to the gym or going to bars, you're highly likely to be being asked for a vaccine certificate. So those reasons exist. Just this week, Air New Zealand have given their announcement about flying. We need people to understand that whenever we go into that traffic light framework, it will be different if you're vaccinated or not vaccinated, and those incentives exist today. But obviously, as the Prime Minister has said to you, we do have the option at the back of our mind to be able change where we were.

Media: What is the time line on that, though? I mean, is it that you would see Auckland moving into it first, to kind of bed it in, and then moving the rest of the country some period after that, and is it likely to be before Christmas so that everyone is on the same page and part of that system before Christmas?

Hon Grant Robertson: I think the Prime Minister indicated to you in the interview that that's what we're working on right now. We still have the target of people reaching 90 percent in each DBH, and we are moving forward and we're getting closer to that, but obviously, we've also got to bear in mind the other commitment that we've made, which is that we will have Aucklanders being able to travel for Christmas. In order to put those two things together, we have to look at what the best arrangements are in terms of the traffic light framework and what we require of people. Those decisions will be made soon.

Hang on, we'll just bring it down. We've got some time, although I will indicate that we won't go quite as long today as I did last week. So I'll take people who haven't asked, and we'll come to Jason and then back.

Media: Ah, if Jenna's got a supp—

Media: Yeah. So for Auckland to be able to move at Christmas, the whole country needs to be in the traffic lights?

Hon Grant Robertson: That's what we're working through—I'm just processing that question—that's what we're working through at the moment. Obviously, Aucklanders—we've

made the commitment that Aucklanders will be able to leave. We have to have a system that can support and back that up.

Jason.

Media: The vaccination order originally excluded family carers providing care and support in the home from the definition of care and support workers. The latest amendment to the order has removed that exclusion. Can you explain the basis for that requirement—for example, a father who provided care to his children in their own home?

Hon Grant Robertson: Do you have anything on that, Dr McElnay?

Dr Caroline McElnay: Not specifically on that—no, sorry.

Hon Grant Robertson: I think my understanding, Jason, and I can come back to you on the specifics of the order, but my understanding is that in looking across the broader healthcare sector, we wanted (a) to provide some consistency but (b) to make sure that if there were people in vulnerable situations, they were protected. It is a challenging area because there are a lot of different arrangements in community and homecare. You've given one of those where it's a parent, but there are also caregivers that are coming in and out of people's houses as well. So we have set the net relatively wide here to make sure that we are protecting as many people as we can, no matter what healthcare setting that they're in.

Media: Dr McElnay, just really quickly: it might be a bit of a technical one, but you said that there were 80 something—I can't remember the exact number—people in hospital. Are you able to tell us how many people have got their first jab and a second out of that number?

Dr Caroline McElnay: I don't have that split down, but we do provide details on our website of vaccination status, and that's updated—I think it's updated on a weekly basis—

Hon Grant Robertson: I think I can do it.

Dr Caroline McElnay: Can you? That's great.

Hon Grant Robertson: Here you go. So Jason, you're asking about the 81 today—that's correct. Of those, you want to know how many of them were fully vaccinated. Five—one who was fully vaccinated but second dose was less than 14 days, 20 who had received one dose, and 51 who had had none; so 51 out of the 81 who had had none.

Sorry, I did say I'd come back over—

Media: Dr McElnay, can you confirm that Medsafe's now considering an application from Pfizer in regards to the vaccine for 5- to 11-year-olds, and when is the soonest children could be vaccinated?

Dr Caroline McElnay: Yes, that is my understanding that Medsafe has received that application. I don't have a time line on when Medsafe would make that determination. They'll be doing that—as they've done with all the other applications—under urgency, but using their due processes, so we'll be able to update you when that happens.

Hon Grant Robertson: And just bear in mind too that the process that occurs there is then it comes through the technical advisory group as well—

Dr Caroline McElnay: That's right.

Hon Grant Robertson: —and then Cabinet makes its decision to use, so there are several steps once the application's been provided. Medsafe also, obviously, require a significant amount of paperwork. Pfizer's, generally speaking, been pretty good at providing all of that, but there can be the odd delay getting that through, and I think it's really important that we get this right. You know, a lot of New Zealanders want their children to be able to get the vaccine, but they also want to know that we've gone through all of the robust steps. So it will take a little bit of time, but this is a milestone in the sense that their application has been provided.

I'll just take a follow-up.

Media: Would New Zealand wait to receive child-sized vials, or could we dilute the adult vials, and so in that way we could get started sooner?

Dr Caroline McElnay: My understanding is that it's a different preparation, so it's not something that you can take the adult vial and use less of; it's actually a specific paediatric formulation. But, obviously, that's what we will await Medsafe's view on, on that.

Hon Grant Robertson: By the way, I'm just conscious of our time here, because both Dr McElnay and I have a meeting that we need to get to for 2 o'clock. So I'm going to take people who haven't asked a question yet, and I'm going to go to Amelia and then over there.

Media: Thank you. Dr McElnay, how can you say that the Auckland healthcare system can cope with the cases when the nursing organisation's just put out a statement saying that severe staffing shortages are impacting patient care because they do not have the staff, even if the healthcare system has the depth?

Dr Caroline McElnay: Well, I base my statement on the conversations that we've had with the district health boards and the chief executives there and the senior managers, and that's what they have been telling us with the numbers that we're seeing. And what we project in the near term is that we do have the capacity.

Media: Dr McElnay—

Hon Grant Robertson: Sorry, no, we're not going to take a different question. I said we'd come over here. Yep? It's a different question—I said we've got to move around. So, yep?

Media: It seems inevitable that Māori vaccination rates will probably still not be as desirable once the traffic light system kicks in, so has the Government reached out to iwi Māori to resource them for ways to keep their people safe while the country keeps moving?

Hon Grant Robertson: Absolutely, and it's really important to remember that the vaccination campaign doesn't stop when we reach 90 percent anywhere. It's vitally important that we continue to see people vaccinated, and especially in groups such as Māori, where the rates are lower than the nationwide average. The two parts of the \$120 million funding that we announced on 22 October—the first half of it was about straight-out vaccination campaigns; the second part of it was specifically designed to do what you're talking about, which is to support not only iwi but other Māori groupings to be able to help us design some of the ways in which we're going to be able to manage the traffic light system.

Media: Does the Government support iwi, for instance, putting up a roadblock to stop Aucklanders from going into some areas just because of the vaccination rates—would that be something that they'd support?

Hon Grant Robertson: That's a discussion that obviously would involve the police significantly, but also we want to move, obviously, very carefully if that was a consideration. We've had really good relationships, particularly in the Far North, with the iwi groups who've been involved in the roadblocks there. We want to make sure that if that were to be a consideration, it'd be worked through with everybody. But at this point, no, that's not something we'd be putting money towards. If that's happened, and where it has happened, we've seen really good cooperation between the police and those running those checkpoints.

I'll just come down the front.

Media: Minister, you said—

Hon Grant Robertson: Sorry, Amelia, no.

Media: I've had one question!

Hon Grant Robertson: Yep, and *Newshub's* had several and we've only got a limited amount of time, and other agencies have had none.

Yes.

Media: On Taranaki, are any of the cases under 12, or have any of them been to schools? Are there any possibilities that it's been into quite large exposure sites?

Dr Caroline McElroy: Ah, yes, there are three who are aged under 12. From the information from this morning, there didn't seem to be any schools that had been identified as locations of interest. Obviously, those are the details that we want to go back and just check, and we'll be getting further updates this afternoon, but at this point, there's—not that I'm aware of—any locations of interest that are schools.

Hon Grant Robertson: OK, here and then here.

Media: What is the current—Minister or Dr McElroy, what's the current average waiting time or processing time for tests, and what happens if somebody who needs one of those 72-hour pre-departure tests to leave Auckland doesn't get it before they leave? Because we've heard from people who say it's been 72 hours and they haven't got it back, and I heard from someone else who didn't get their result and the clock was ticking—they went to the testing centre themselves and were told that somebody just forgot to text them the result.

Hon Grant Robertson: Well, obviously in situations like that, there is going to be the odd example of a human error that might cause something like that. The timing—the median processing time for swabs [*Inaudible*] lab and being reported, at the moment, is 21 hours.

Media: How satisfied are you with that—is that a good level?

Hon Grant Robertson: Well, we try to keep it under 24, and so that is under the target that we have.

Media: Can I ask you, Minister—

Hon Grant Robertson: Hang on—Jenée, and then we'll come up to the back and do another round for anyone who hasn't—

Media: Is the Government considering mandating vaccines for any other types of the workforce?

Hon Grant Robertson: At this point, we're still working through the process that was outlined a wee while back, which is around the law change that will actually enable people—most employers—to be able to do that themselves. We're having ongoing conversations with the police to work out where they sit within that framework. I would note that the police, I think, are now up to close to 90 percent first dose, so that's been progressing really well. So those conversations are ongoing.

Media: OK, and just in terms of the Auckland border, can you be any more specific as to when that might open, and just confirm whether what's happening with the borders is still going to be separate to what happens with the movement in your framework—that those two things will be considered—

Hon Grant Robertson: The Auckland boundary.

Media: Sorry, yeah, the boundary.

Hon Grant Robertson: So as the Prime Minister indicated, we'll have something to say next week about the date around the Auckland boundary. It's important for us that we give people plenty of warning about that, and so therefore they can make their future plans. As we've said before, what happens outside of the Auckland boundary is a factor for us, but we'll be making announcements about that next week.

Media: Minister, can I ask you: have you had a discussion with the Prime Minister about her visit to Auckland?

Hon Grant Robertson: Yes—yes, I have.

Media: She said she had visited, casually, hospitality. Was that when she went to the Crave Cafe in the morning, or did she do it on a wider basis, because hospitality in Auckland don't seem to be aware of her talking to anyone.

Hon Grant Robertson: I didn't get into that level of detail with her, Barry, sorry.

We'll come back to Jess, because we haven't been back there, and then down.

Media: Dr McElnay, with the 11 cases in ICU, how much fat is there with ICU beds in Auckland at the moment?

Dr Caroline McElnay: I do have those details. But ICU is one of the ones where there is capacity, and certainly in terms of the ventilators in ICUs, there's significant capacity at the moment.

Hon Grant Robertson: So ICU occupancy is around 70 percent at the moment, so there is room, and, as Dr McElnay said in her opening comments, the thing you have to remember about ICU capacity is it changes every day. So whilst we have COVID and we're concerned about COVID patients in ICU, there are other reasons that people come in and out of ICU, but we are confident about the capacity there.

Media: Just one quick point of clarification: with the six Stratford cases, one's vaccinated. Are any of the other cases under 12, or is it five eligible people who are not vaccinated?

Hon Grant Robertson: No, there are three people who are not eligible to be—three children who are not eligible to be vaccinated.

I said I'd come here—yep.

Media: Just on home isolation, in light of concerns from the nurses' union—so they've said, as well, that community nurses are so under pressure in Auckland, they're worried that home isolation is growing at a rate that they can't keep up with, and that it's going to potentially lead to more deaths. Can you give a sense of how under pressure the system is at the moment, with nearly 3,000 isolating at home, and how much headroom there is?

Hon Grant Robertson: Well, again, to reiterate what Dr McElnay has already said, we have a conversation every single day about how the outbreak's being managed, and one of the things we talk about every single day is the capacity of the system to be able to do that. Workforce is clearly a really critical part of that, and the assurances that we've been given by the district health boards is that they are able to manage. Of course when something like COVID comes along, it puts additional pressure on the system and on workforce. Throughout this outbreak, we've had people from other parts of New Zealand come in and support in Auckland, and we continue to look at how we can move workforce around. I am not underestimating the pressure that the health workforce in New Zealand has been under—in particular, our nursing workforce—and they have done a magnificent job, and we continue to work with them to be able to make sure that we can support them. But the information we have, that we request on a daily basis, is that the system can cope.

Media: Why isn't the ministry recording the number of pregnant people getting vaccinated when we know they're at a higher risk from COVID and the College of Midwives has said that that data would help target vaccine campaigns and care planning?

Hon Grant Robertson: I don't have any information at all on that.

Dr Caroline McElnay: Yes, I—I couldn't see who asked that question, sorry. I'll follow that up for you, because I think the issue there is that we would need to have that information collected, and once it's on our database, then that is something that, in theory, you can produce. But it's only a moment in time—you'd get numbers rather than percentages.

Hon Grant Robertson: What I would say is that in terms of risk assessments, when people either present at hospital or whether they're coming through the testing system and now through the home and community isolation system, these are the kinds of assessments that are done. So while that data is not routinely collated, it is one of the questions that will be being asked about where people are in terms of their health vulnerabilities or their health risks.

I'm just going to take a few more, so I'll do Craig and—yes, I will come back here.

Media: Just a very quick question on behalf of a colleague. Christmas is fast approaching—

Hon Grant Robertson: I've heard.

Media: I wonder whether a space has been set aside for Santa Claus in MIQ, or whether he has an exemption?

Hon Grant Robertson: You're getting in early with that question, Craig, but suffice to say that as we've done in the past with the Easter Bunny as well, I'm quite confident that Santa will be able to make his presence felt.

Media: If Santa's fully vaccinated, will he have a better chance of getting an exemption, because I—

Hon Grant Robertson: I'm pretty confident that Santa will be fully vaccinated, understanding the importance of vaccination for everybody, given—

Media: He's not a New Zealander, though.

Hon Grant Robertson: Isn't he? Can you stop destroying people's myths here, Craig. Back over to Amelia.

Media: Thank you. As Minister for sport, you said you'd look at reopening pools under strict guidelines, but yet you've ignored all attempts from the swimming community. How come?

Hon Grant Robertson: As I recall, that question actually went to Dr McElnay in terms of the way that the Ministry of Health would look at that, so I personally wasn't making that commitment. I don't know if the Ministry of Health has looked at that yet.

Dr Caroline McElnay: I'm not aware that actually we've been asked from a public health perspective to provide our advice on that. Are you specifically talking about Auckland? Auckland—

Media: We asked you last week about reconsidering pools.

Dr Caroline McElnay: Yes, that's right, and I've said that—

Media: Have you reconsidered it?

Dr Caroline McElnay: I've said that if we were asked to reconsider it, we would, and I'm not aware that we have been asked to reconsider it.

Media: So you haven't asked directly for this?

Hon Grant Robertson: It's not come through me, either. So—

Media: So who would be reconsidering it—who do you need to be asked by to reconsider it?

Hon Grant Robertson: That would probably come through Sport New Zealand, or through an application that would come through DPMC would be the way that would happen. Sorry, Amelia—down to Jen, because I've got to finish.

Media: So coming back to the Auditor-General, the Government spends \$55 billion a year on procurement. It's a third of your Budget. What are your expectations about how conflicts of interests should be managed?

Hon Grant Robertson: Oh well, they need to be managed in the same way that they are in any part of what the Government does. They should be identified early by people, an assessment is made as to whether or not they can be mitigated against—because, as I said before, just because you have a conflict of interest, it doesn't mean you have to completely remove yourself. You may, for example, remove yourself from one part of a process where you have a conflict, and so we would expect that. Where those conflicts can't be managed, then alternative people should be able to be brought in.

Media: And what about disclosure—I mean, it took a lot of effort to find out who was on these selection panels and who was advising them and what their conflicts are. Shouldn't all that be out in the public for the participants to see and for the reassurance that it's going to be kosher?

Hon Grant Robertson: Yeah, I guess we try to release as much information as we can. When it comes more generically to appointments, often that is very personal information, and so we do have to sometimes be a little bit judicious about the way in which personal information relating to appointments comes—but as a matter of practice, we should be releasing as much information as is appropriate under the OIA.

OK, folks—oh sorry, Jenna. We'll just take you, and then we'll finish.

Media: What is the Government's message to groups still trying to get out of being vaccinated? Obviously, another legal challenge of the vaccine mandate has been rejected by the High Court, so what's your message to those trying to get out of their mandate?

Hon Grant Robertson: My message is that we need the maximum number of New Zealanders to be vaccinated, and as I said in my opening remarks today, we haven't taken decisions about mandating lightly. We've looked carefully at the areas where we know we need to protect the vulnerable—those who can't get vaccinated—and make sure that everybody feels safe in those settings. My message is the vaccine we've got is safe. It's a vaccine that's been used all around the world, and we know from the data and statistics we've got in our own outbreak it has a demonstrable role in making sure you don't get as sick; that you are less likely to pass on the virus to others. So I really just ask and urge people to think of those in the communities that they work in and get vaccinated.

Media: Do you regret not being able to give the country more certainty as events start cancelling in the lead-up to Christmas?

Hon Grant Robertson: Look, we are moving to give as much certainty as we possibly can. We obviously announced during the week the underwrite scheme for the larger events, and we are providing the information as soon as we get it. As we've said before, with COVID there are no easy decisions. There are no decisions that you can make with all the information, but we will continue to move forward in a careful and a balanced way.

Thanks everyone.

conclusion of press conference