

**POST-CABINET PRESS CONFERENCE: MONDAY, 22 NOVEMBER 2021
HANSARD TRANSCRIPT**

PM: Kia ora koutou katoa. Good afternoon. First, the week ahead. I'll be in Wellington tomorrow and Wednesday for Parliament before returning to Auckland on Thursday to meet with business leaders, and health and social support service providers. We're back in the capital on Friday and then through the weekend.

New Zealand will soon move into the COVID-19 Protection Framework, or, as it's otherwise been called, the traffic light system. This week we'll be setting out some of the key information that people, communities, and businesses need to ensure that life runs as smoothly as possible once we transition. The hard truth is that Delta is here and it is not going away, and while no country to date has been able to eliminate Delta completely once it's arrived, New Zealand is better positioned than most to tackle it, because of our high vaccinate rate, and the in-built safety measures in the traffic light system, like the use of vaccine passes.

First up, we'll provide extra guidance to help businesses prepare. Minister Wood will release a tool kit for businesses who choose to make it a requirement for their staff to be vaccinated. Already, businesses like Air New Zealand and The Warehouse have taken this step, so this new assessment tool will help others who wish to keep their workforce and customers safe from the virus. Legislation will be introduced and passed this week to enable this framework and assist businesses.

Tomorrow, we will also launch the verifier app for businesses that require proof of a vaccine pass for entry and to operate. While a business will not be mandated to use the verifier, it is a very handy tool.

On Thursday, Ministers Little, Sepuloni, and Verrall will set out the end-to-end support, someone who gets COVID and those around them will receive in the community. This will include greater levels of testing, more targeted contact-tracing, how health during the community will work—something that already there have been initial briefings around—and what social services are available if required.

The vast majority of people who get COVID in the future will experience mild to moderate symptoms that won't require hospital-level care. So what matters is that we make sure they get the best care and support they possibly can, from testing, through isolation, and into recovery.

Also this week, we'll be releasing detailed sector guidance, so business and other organisations can see how they will operate at each level of the traffic level system. The new system is safer and simpler than the alert level framework, with business able to stay open at each level. Guidance will set out how they can operate safely to ensure that can happen.

In addition to these announcements, Cabinet is aware businesses are seeking greater certainty around the date of the transition to this next stage in our response, so they can prepare for the reopening. As you know, we've already stated that our Cabinet meeting on 29 November will determine which levels of the traffic light system that different parts of the country will move into, and that Auckland will move in at red. Vaccine levels will determine what level the rest of the country moves into.

In order to provide further certainty, though, Cabinet has decided today that the whole country will move into the new traffic light system, at 11.59 p.m. on Thursday, 2 December, making Friday, 3 December the first day that the traffic light system will be operationalised. That is 11 days from now, and it's important everyone gets prepared. You'll know that we have been long signalling that after 29 November meeting, that it would be soon after that the country would shift. This date provides the ability for businesses in particular to now plan.

The number one thing every New Zealander can do to prepare for the new system is to get vaccinated. If you're due your second shot, get it as soon as possible. Vaccine passes will operate in the traffic light system, and if you aren't fully vaccinated, you'll find you aren't able

to access a range of places like bars, gyms, and restaurants, from 3 December, when proof of vaccination will be required. Eighty-three percent of eligible New Zealanders are fully vaccinated, but nearly 200,000 people, or 4.6 percent of the eligible population, are more than three weeks since their first shot and will start missing out on going to places where passes are required. So to that group, I do urge you to get your second dose and download your pass as soon as possible.

If all those people overdue for their second shot got it today in New Zealand would be 88 percent fully vaccinated. That would make our transition so much safer.

Cabinet has also decided that to ensure the transition to the new system is as smooth as possible, and to iron out any issues with the use of vaccine passes in advance of the whole country moving, we will undertake a trial period by allowing hairdressers and barbers in Auckland to open from this Thursday, 25 November, so long as they require proof of vaccination from customers. This means fully vaccinated Aucklanders can get their hair cut so long as they present their My Vaccine Pass.

We will be posting and sending out detailed sector guidance, but, in short, hairdressers will need to operate with vaccine passes, take bookings only, so no walk-ins. That means that we can ensure we don't have large amounts of congestion. Staff must also be fully vaccinated and they must operate broadly as they do under alert level 2, which they'll be familiar with, with staff wearing masks and putting in place 1 metre distancing between chairs. Customers can remove their masks during their cut. Again, familiar settings to all of us from alert level 2.

We've chosen hairdressers to trial vaccine passes because out of all the venues still closed they pose the lowest risk by reopening. There are fewer staff employed, generally numbers in this space are constrained by the number of chairs and hairdressers available, and distancing between customers can be easily maintained. I know this will offer some relief for this sector and customers. Most importantly, it offers us a decent trial of the vaccine pass in advance of that date of 3 December. So far 1.2 million people have already downloaded their vaccine pass, which is great, but I encourage everyone to grab theirs and prepare now for the movement into the new framework.

As I said at the start, Delta is here and we are now in the closing stages of preparations for the move to a new system that offers both greater protections from the virus as well as greater certainty for business to stay open regardless of the level. I know that there will be some who may have some anxiety about these changes, but I can assure you we will continue to operate in the cautious and careful way that has served us so well right since the start of the pandemic, with our number one priority the protection of lives and livelihoods. But as will be clear from today, we are fast approaching the next phase in our COVID response that delivers more freedoms and recognises the hard work Kiwis have done to get vaccinated. It's based on the values that have served us so well and I hope gives people the space and confidence they have the summer break that they all so deserve. We're now happy to take questions.

Media: If we were going to move into the level 3.3 system as planned, hospitality would have been included sooner in this group. Why did you just decide to go with hairdressers and not include hospitality this week as well?

PM: Two points: what we've demonstrated is that there is certainty now for businesses so that they will be able to reopen from 3 December. In the meantime, we have made a decision to allow one group to open. That is a group where by default the numbers are smaller, more confined, allows us to safely test the vaccine pass system before we all move on 3 December.

Media: Why did you only announce the date today? Why didn't you do it last week? You said it would be 24, 48 hours. Why not give people the certainty that they've been calling for?

PM: So Cabinet has made the decision today that that will be the date, and that's allowed us to consider the advice from officials around just the legal requirements—gazetting, signing of the orders, the notice period required. So 3 December is the date we can confidently move the entire country into the new COVID protection framework.

Media: Dr Bloomfield, there's been another COVID death, a man in his 40s. Is this the youngest person in New Zealand to die from COVID?

Dr Ashley Bloomfield: I'd have to come back to you on the latter, but I do want to just acknowledge the death, which is obviously very sad for this person's family. This is someone who's been in hospital for a while and, unfortunately, has died from COVID-19. We'll check on that—whether this is the youngest death.

Media: And COVID modeller Shaun Hendy says Auckland is past its peak of COVID cases. What do you think?

Dr Ashley Bloomfield: What I would say is that the signs are very promising in Auckland, and on Wednesday, when I joined Minister Hipkins, I'm planning to show the updated figures of what R value looks like, what the modelled number of cases, hospitalisations, and ICU admissions look like. But what I can say is that you saw through last week that the hospital admissions and ICU bed numbers were not increasing; in fact, they'd dropped towards the end of the week and they're hovering around 80 at the moment. This is a really good sign and it's a reflection of the good work that Aucklanders have been doing by abiding by the alert level 3.2 rules but also the impact of vaccination, which is quite profound. So I'll update on Wednesday about what the modelling is showing.

Media: Prime Minister, just quickly on another topic, would you ever back down on the three waters?

PM: Oh, look, we've made our decisions for all the right reasons. We cannot continue to have thousands of New Zealanders getting sick from drinking water every year. We cannot continue to have a situation where infrastructure is holding back our ability to build the houses we need or a continuation of the situation where sewage is routinely released into our waterways. The status quo is not an option. If we maintain the status quo, ratepayers would be facing larger bills. We don't want that. That is what three waters is all about.

Media: So will you ever back down on three waters?

PM: No. We didn't take these decisions lightly. They've taken years of consideration and they are designed in such a way that we retain all the things people care about: safe drinking water, the ability locally for them to be owned and managed, but us to actually turn around all of the issues we've had with water infrastructure to date.

Media: Prime Minister, you're allowing hairdressers to test the vaccination passport system. You talked a couple of weeks ago about al fresco dining. You've got 25 groups in Auckland; why not do it now? Why not allow them to do the test, or is the vaccine test not up to scratch yet?

PM: No, no. That's not the rationale. Here we've got an entire sector who are able to undertake this test as a sector, and where we know that, actually, of all the groups that we're able to open up, this is amongst the lower risk, because the ones that we already have that have not yet reopened are all of hospitality, gyms, a wide range of close personal services. This is a sector where, by default, the number of people at any given time in a venue is going to be limited by default, where the number of workers are limited by default, and where we believe, actually, we can at this earlier stage safely test the vaccine certificates. One of the issues for hospitality and outdoor settings—one of the asks we had is whether or not we could change bylaws to enable a larger range of hospitality being used to be able to legally hold al fresco dining. We looked at that. There wasn't a simple legislative fix. It's quite a complex area of law. We haven't finished looking into those options, but it wasn't a straightforward option.

Media: So you're saying—essentially, you're saying that the restaurant sector can't test as effectively at the moment as the hairdressing sector?

PM: No, no, that wasn't what I was saying, forgive me. What I was saying was I hear the call separately that the sector has asked around us to explore enabling them to have more outdoor settings, because we've already said that they are safer than indoors. No, what

I was setting out was the reason that we chose hairdressers is because, of all of the current sectors unable to operate, this is probably the lowest risk one, because, of course, then defining that only those hospitality who have outdoor settings might sound straightforward, but when you're drafting a legal order isn't necessarily.

Media: Are you going to ask Stuart Nash to apologise for calling the Groundswell movement racist and anti-vax?

PM: Well, of course, look, it's for Minister Nash to explain the context of his own comments. Of course, his point was that he was referring to some of the material that he had seen in online forums which led him to that view. I've said I wouldn't use that language; I wouldn't describe generally an entire group of people in that way, but I'm not going to ask him to apologise for his comments. He's given his context; that's his view. I take a different one.

Media: Why not? Why didn't you ask him to apologise? You're his boss.

PM: I've just set out the reason.

Media: Do you think it's acceptable that Kāinga Ora is not evicting some tenants, despite police callouts, prosecutions, violence, no evictions over three years, and some pretty bad examples of their behaviour towards neighbours, but they are allowed to remain there?

PM: Yeah, and look, you know, here we have two roles that we need to take very seriously. Of course we need to make sure that in a neighbourhood we're doing everything we can to ensure a neighbourhood and a community is safe, that neighbours aren't duly impacted by behaviour that people would just, frankly, consider antisocial. The issue we also have, though, is that we are the final provider of housing in many respects. Once you're evicting someone from State housing in that way, there are very few options left.

Media: Does that mean that—you know, should that situation override the right in some case of, you know, elderly people, vulnerable people, to be terrorised?

PM: Oh, I hear you on that, and, as I say, I caveat that with the fact that there is a competing need for us, of course, to make sure that communities are safe, and we have a role to play there as well. As a local MP, I've come across circumstances like this, and we do have to make sure people feel safe. We do have to make sure that people in our State housing are respecting basic expectations in a community and, as you say, not terrorise people around them.

Media: Should there be a change in policy, though, because there's no sort of deterrent at the moment, there have been no evictions, so people are carrying on, so should Kāinga Ora actually be—

PM: Yeah, that's not to say that Kāinga Ora will not move people on into more suitable circumstances if there are issues that they identify. So I don't think it's fair to say that there are no interventions; there are interventions, and they should be utilised, particularly if they're causing, you know, concerns in a community and people are feeling vulnerable.

Media: On Marsden Point, the refinery up there closing down. Should or could the Government have intervened to save those jobs, and also to protect, potentially oil prices in the future for New Zealanders?

PM: So one of the concerns that we had were twofold—you know, just the impact on the community, and there we'll continue to do work locally with the regional economic development teams around ensuring that those high-skilled workers, that we're doing everything we can to make sure that they are utilised and retained, and supporting that work.

The second concern that we had was security of supply. The advice that we've received is that these changes pose no greater risk to security of supply than what already existed with the terminal acting as a refinery. So those were some concerns we've had. Those have been worked through, but there's obviously an extra piece now we need to do alongside to support the workforce. Yeah, Henry.

Media: Prime Minister, in hindsight do you have any regrets about the way that you communicated and implemented the level 3 step changes? Polling that DPMC commissioned for your COVID response showed that you went from really high level of compliance and understanding within the four rules to widespread confusion about the level 3 step changes.

PM: Well, of course, first of all to point out, what's really important is people understand them when we move into them. I don't think that there's any suggestion that when we moved into those that it's been problematic. That's when we need people to really engage so they understand what's expected of them when they're there.

Look, the call on us was twofold: if we can ease safely, to do so, and it's not unusual—all the way through, we've at least been flexible enough to step into new alert level shifts, and that's what we kept open. We signalled to people that if we were able to move, that is what it would look like, so that we could balance the need for people to plan and prepare, but also not to set an unrealistic expectation that it would be a straight move to 2.

Media: On the traffic light system, a lot of community events that are coming up have cancelled. These are places where vax passes won't really be workable because they're unfenced—things like school galas. Are they covered by this specified outdoor community event exception—

PM: Yeah.

Media: —and can you set that out a bit clearly—

PM: So across all of the traffic light framework, for the most part, if you're vaccinated, you can go about doing all the things you usually expect. So that's the most important thing to communicate about the new system. If you're vaccinated, you can go to hospitality, you can get your hair cut, you can go to a gym, you can go to large gatherings. What varies is just how large those gatherings are at different levels, and that's exactly the same as what we've had through our alert level system.

Where we are making sure that we put out specific sector guidance is, as you can imagine, we do have to be quite particular in the way we're treating schools, because we've got large groups of unvaccinated children and we've got parents who need to supervise them. So that's an area where we will be putting out sector guidance this week that is quite particular to those venues. We'll do the same for local government where they have events that are outdoor and where you don't have entry and exit points to check certificates.

Media: Just finally, New Zealand doesn't publish, at this point, the vaccination status of its COVID deaths. Most other countries do. Is there a privacy concern there, and is there any move to maybe do that—maybe more anonymised every month or something so you couldn't pick one person out?

PM: Dr Bloomfield.

Dr Ashley Bloomfield: Yeah, the issue to date has been it's been attributable to individuals, so obviously there is a privacy issue. I'm not going to say "As the numbers increase" because we're wanting to keep our deaths to a minimum, but it is something we will look at, and we do publish, every day, the vaccination status of our hospital admissions in proportion to the fully vaccinated and also can provide that for those in ICU, and of course we also publish, every day, the vaccination status of our overall cases for the day. But it's just the very small numbers with deaths.

Media: One of the things that would be monitored in the traffic light system would obviously also be tangihanga. How would you be able to man tangihanga, you know, if it's not requiring vaccination certificates? How do you kind of keep a handle on that?

PM: Yeah, and in the same way that we already do with gathering limits. You'll see there's the option if people don't want to use passes, then they don't have to, but then the size and scale is limited. But, again, we already have the use of funeral directors supporting the management of gathering limits for funeral and tangihanga. And at the same time, marae,

of course, have played a role as well. So it'll be no different. There will be guidance that goes out to support, as was under the alert level system, marae in the choices that they will make. But we expect that marae will choose how they wish to roll out these options that they will have.

Media: Are you concerned that there might be a backlash that the Government's trying to control how Māori are allowed to grieve for their loved ones?

PM: No. No, because this is exactly why we've created a framework where there are choices. If people choose not to use vaccine certificates, then they don't have to, but the gathering limits will be lower as a result.

Media: Can I just ask you about Auckland?

PM: Oh, I'll just kind of scan, pan around—

Media: Can I just ask you one—

PM: Barry, if you don't mind, I'm just going to come to a few people who haven't had a chance and then I'll double back to you.

Media: Well, no, I've just got to go. Can I ask you one question?

PM: Barry, quite a few people need to go, so I just want to be fair.

Media: No, I've got to be on air, Prime Minister. Can I ask you—

PM: Yeah—Mark.

Media: —one quick question about—

PM: Barry, if you're just a little bit more patient, and then I'll double back to those on time limits, which I think include the TV, but Mark.

Media: Prime Minister, do you agree with the public health experts who say that as a result of opening the border on 15 December, Māori will die as a result of that decision?

PM: I've, of course, been asked a number of times around modelling, where we actually don't have that level of specificity around the impact on different groups. We do, of course, across regions but not to that level, and I don't know how accurately models would be able to determine that. What we do know is going to make the biggest difference is vaccination rates. We know now that the area where we're making the most significant progress at the moment is with our Māori vaccination rates, and that's, of course, where a lot of people are working very hard to ensure that's the case. We're now at 79.3 percent for first dose, but every day and every vaccine counts as a layer of protection as we move into the new framework.

The final point I'd make is, yes, the boundary opens on that date, but we also have requirements around the movement of those individuals, and we will also be in the COVID protection framework, and those areas where there are lower vaccination rates will be using vaccine passes to protect those who are unvaccinated as well. OK, I will come—Jessica then Barry and then Jenna.

Media: Well, no. Can I ask you just one quick question about Auckland?

PM: Barry—

Media: About Auckland?

PM: TVs are on deadlines as well. Jessica.

Media: Jessica's had one earlier.

PM: And so did you.

Media: Yes. Can I ask you a quick question—

PM: Barry, I'm going to ask for a little decorum.

Media: It's a press conference, Prime Minister.

PM: Jessica and then Barry.

Media: Dr Bloomfield, we know that Auckland's going to go to red. So what's your advice around the rest of the country? Is Wellington definitely going to orange, for example?

Dr Ashley Bloomfield: That's what we're working on and my understanding is Cabinet will consider that. Of course, the public health advice is one of the inputs. Cabinet's already agreed other criteria to consider as well. What I would say is that, as you can imagine, because this is the first time we're going into this framework, as we have in the past and as has served us well, we will be looking at it with a very sort of precautionary lens and with a view to thinking about where we go in might be different from where things end up. So we want to not only give good advice about where we are to start with, particularly as the boundary opens in Auckland, but then thinking about what are the really clear criteria for moving both up and down within the framework.

Media: We've also heard that there's a case in a Tauranga rest home. What other details can you give us about that?

Dr Ashley Bloomfield: I don't have any more detail about that. The only thing I can say is there are five cases from the Bay of Plenty this morning. Just one was unlinked and the others were all known contacts, but I don't have any information about a case in a rest home.

PM: OK, would anyone like to take ZB's question? Jason.

Media: Yeah, just around your trip to Auckland this week. Would you just give us a little bit more information about the places that you'll be visiting? You were criticised last time for not going to—

PM: Everywhere, all at once! We're just finalising some of that meeting schedule. We'll put in a media advisory a bit more detail, but what I am hoping to do in particular is, yes, connect with, again, business representatives, as I did remotely last week, but a bit of a focus for me on social service providers. I haven't had a chance to engage extensively with them in person recently. So that will be one of the elements of the visit.

Media: Just on today's decision, what does this mean for the stepped change level? Does this mean that Auckland will never see level 3.3 or is that still on the table?

PM: It means: now plan for the COVID protection framework. You've got certainty on the date, certainty on where we're moving, and certainty that at that point we see everything reopen. So that's what we're steering everyone towards now.

Media: So that's a no to 3.3?

PM: Yeah. We're so close to the new COVID protection framework, and that gives far more scope for reopening than the other step changes. As you'll recall, particularly for hospitality, they had caps on the numbers able to reopen, and in many cases, I imagine it may even have been uneconomic for some. Going into the COVID-19 Protection Framework gives much more certainty, and that's something they can plan for for the future. We don't intend to move from that.

Media: Can you just quickly clarify on the hairdresser trial? Are beauty salons included in that?

PM: It's just hairdressers and barbers. We've kept it quite confined.

Media: Why is that?

PM: Again, because we are operating a trial here. We are able to define quite neatly who falls into that category, which is something we're required to do in order to provide the exemption for them to operate. And, of course, we know that it is of all of the things we can open the one that we can do with a good understanding of the public health risk. A limited number of people can be in a facility at any given time, by the very nature of those—by that

industry. A limited number of workers—we can run booking regimes and it gives us good feedback on the operation of vaccine certificates.

Media: Just to follow up on the question to Dr Bloomfield, I was looking at the stats at the moment you said regions that hit 90 percent double-dosed will go into orange. But none of us look all that close. Have you got any data which suggests that we could actually get that?

PM: Yeah, so, look, vaccine levels will play a key determining factor. We've already given some very strong suggestions about what we expect. Obviously Auckland's going into red because of the outbreak. We will not be placing any region into green, and that is because we're in a transition environment. We don't want regions yo-yoing, and starting in green is an unlikely place for people to stay while we're transitioning at the moment, particularly with boundary changes. So as for the rest of the decisions which are made on the 29th, with a couple of days for people to then see where they will be moving, we will look at vaccine certificates, we will look at vaccine rates, we'll look at case rates, and that will be the major determining factor. But we'll also be pragmatic. So, you know, a good indication is if you've hit 90 percent first doses is a good indication of where you're heading.

Media: If all of the people who have had their first dose and are due for their second got it today, how close would we be?

PM: Well, I think at that point we end up at something like 86 percent double-dosed for New Zealand. So for many regions, they would be doing really well. But that's a strong message: 200,000 people are due their second dose. Please go out and get it. Make sure you're prepared for vaccine passes because they're coming very soon. Anything further on that, Dr Bloomfield?

Media: Just on Auckland regional travel under the red system, some of the earlier COVID-19 information said that there'd be restrictions. So if a, for example, area outside of Auckland were to be put into red, could they expect regional travel restrictions such as vaccination or—

PM: No. No, regional travel restrictions, no, will not be the norm. Hard borders will not be the norm. There may be occasions where there are localised lockdowns, where there may be some limitation on movements. But they will not be the norm.

Media: And just on the hairdressing from Thursday, what sort of trials were there for the vaccination pass?

PM: Yeah, so, actually, perhaps Dr Bloomfield could speak to this. But the team had been trialling the use of the verifier app. I believe they did work with a small number of businesses early on to trial the use of the pass, so it has been trialled on a small scale. The trial with hairdressers and barbers in Auckland give us a much larger scale to work with, but before the whole country moves, which we thought would be valuable to the rest of the country to have that larger operation.

Dr Ashley Bloomfield: So just to confirm, there's been already some testing of the verifier app and it becomes available this week for people to—we'll announce that for people to use and get loaded up and get ready to go. So we're making good progress there.

Media: Did any issue arise from those trials?

PM: I think small tweaks.

Dr Ashley Bloomfield: Always—I mean, the key issue here is not so much the app; it's just how you make it easy in operation for businesses who are doing the checking, so learning all the time.

Media: Just going back to Jenna's question earlier about deciding who goes into red and who goes into amber, how much of that is going to be sort of a decision at the Cabinet table for Ministers, or is it a case of Dr Bloomfield and his public health team will do it on a case by case for each region and each DHB?

PM: We will be provided with advice. Cabinet will then consider that advice and make those decisions, and then they will immediately, in essence, then be required, once we're notified, to be written into orders and gazetted.

Media: In terms of that advice, is it sort of a—Dr Bloomfield, will you go with your team through each DHB, look at how many have got vaccinated, how many have got vaccine passes downloaded, etc.—bundle all of that together? What level of detail are you going to be providing?

Dr Ashley Bloomfield: Oh, well, we'll provide our recommendations and some rationale for that, but we will be looking at vaccination rates, we will be looking at an equity dimension to those vaccination rates; in particular, vulnerable populations in regions, as the Prime Minister said, whether there are any cases in those regions, and also health system preparedness, which we've got a big piece of work under way on as well.

Media: Which will conclude with an orange or red per DHB, basically. Can I also just ask, last week you talked about doing some work around the next move with opening up the border in early next year. Have Cabinet had an opportunity today to look at that work and will there be decisions this week around that?

PM: That hasn't been finalised but I do expect that we'll have decisions shortly.

Media: So would this week be likely?

PM: I don't want to give you a specific date, but we do anticipate it will be shortly. Again, we're wanting to constantly give as much forewarning for planning purposes as we can. We've already, of course, indicated first quarter, though, as you can recall.

Media: Yeah, just on Hannah's question around travel: we've already seen some communities ask holiday makers to stay away, citing their vulnerable populations, vaccination rates, and access to healthcare. What is your view on that? Should people be just staying away from these areas over summer and will the Government be working with these communities if they want to have a localised lockdown?

PM: Yeah, so here my message would be that, actually, we've put in mechanisms to ensure that movement around the country can be as safe as possible. So firstly, we actually, as a nation, by that time will have very high vaccination rates. We also, as an extra layer, in communities where, perhaps, the resident population, the rate might be lower, we, for instance, would expect that that would be an area that would operate in red, and red means that, basically, if you're unvaccinated, you're unable to go to those higher risk settings. And so there are protections there. So to anyone who has concerns, I'd say we've prepared to meet those concerns, to make sure that we've got measures that do ensure that those who are not protected by the vaccine are protected in other ways.

Media: I guess, Prime Minister, if these checkpoints do, I mean, start up again like we've had happen earlier in the year, what would be your—

PM: So we do expect, of course, the police—we've already said will work with local communities and iwi, particularly in the North, because that is an area where we expect there to be checks regardless, because that is where, of course, we will have Aucklanders potentially moving through, and they have a requirement to either be tested or vaccinated. So that is an area where we do expect there to be checks in place and will continue to work with communities on that. For the rest of the country, any community there, I would, again, just ask that they work with their local police, because, of course, you do have to make sure that you're operating legally and safely with anything like that.

Media: Just possibly looking quite far ahead: when New Zealand does open up to international tourists, is it expected that they will need to have a My Vaccine Pass to enter venues, or, because they'll be mandated to have vaccines coming into the country, is there going to be a different sort of regime?

PM: Ah, yes. So, of course, we've ensured that our vaccine pass is able to be used—and I know from the experience of other travellers, they've often used supplementary ways to demonstrate that they are vaccinated. We'll need to work through a bit more of the sector guidance, because it will be easier for them to produce their domestic vaccine pass than it will for them to log into a New Zealand process, but that's something I might just need to go away and get the official view. I know they will have thought through some of that level of detail, even if I don't have it to hand.

Media: A question for Dr Bloomfield: it appears that there's been a decision to move to once a week saliva testing at the Auckland boundary—I'm unsure if that's the same in the border facilities. What's the reasoning for this? Is this being driven by science or by the strain that lab networks are under?

PM: Always science.

Dr Ashley Bloomfield: Always. So yes, so we sought advice from our testing group. And the main reason for this is now a high level of confidence from both our experience here and the evidence that a saliva-based PCR test is as good from a diagnostic perspective as a nasopharyngeal test. Previously we had it twice a week, and then if someone returned a positive saliva test, they had a nasopharyngeal PCR test for confirmation, but we've agreed on the basis of scientific advice that, actually, they can be treated similarly, which means we can go down to weekly saliva testing for the boundary.

PM: Which is what we're doing for PCR for nasal.

Media: So why can you go to weekly? I'm just not clear on that.

Dr Ashley Bloomfield: Weekly because that's the same as what's required, expected, around the nasopharyngeal PCR.

PM: Yeah, so we're not doing twice a week for nasal.

Media: And is that the same in the—so it's not the same in the border facilities, I take it?

Dr Ashley Bloomfield: It will be the same for our people working in the border facilities, that's right.

Media: Can I just ask a really quick nuts and bolts—just a Hawke's Bay - related question, sorry. Apparently, the DHB there was possibly only alerted to a case in the region because a family member contacted the DHB. What do you know about this? Is it correct? Why did the Ministry of Health—was the Ministry of Health aware of the case prior to, and why did they not alert the DHB?

Dr Ashley Bloomfield: Yeah, so what happened is this person was tested in Auckland and then travelled from Auckland down to Hawke's Bay. When the positive test was notified by the lab and the person was notified and isolated, they were in Hawke's Bay by that time. The ongoing follow-up care was transferred to Healthline, and Healthline was making daily calls to that person. One of the things that hadn't happened in the system, and we've had a look about making sure we correct that, is they assumed the person was—I don't know if they assumed the person was still in Auckland, but we now have a flag in the system so that they will notify the local public health unit. But the daily follow-up was happening by Healthline anyway.

Media: So the DHB was kind of caught unawares. I mean, is that—well, in those daily follow-up calls and stuff, should it not be obvious where a person is?

Dr Ashley Bloomfield: Yes, and we've had our public health units right around the country looking after people in Auckland, for example, and doing the follow-up of those cases and whānau where they've required daily sort of public health unit follow-up. So this was just something that the system should have notified the local public health unit. It didn't, and we've followed that up to make sure that the system will do that in the future.

Media: Prime Minister, sorry, you have been asked this question before, but can I ask you to be more specific around why the police aren't being mandated to get vaccinations when Andy Coster says he's up for it?

PM: Oh, well, no, to actually be fair, all I've indicated is it was just that we just haven't concluded decision making on that yet. But I expect a decision to be communicated on that this week.

Media: OK. Can I also ask just about Australia is moving to quarantine-free travel systems with Japan and South Korea—

PM: And South Korea, I think I saw, yep.

Media: I mean, do you see the benefits of this? Are you keen to do this sooner than later to re-establish New Zealand to the world?

PM: Well, of course, you know, we fully appreciate the importance of us reconnecting safely. We're quite focused on making sure that as we do that that the changes we make stick. We don't want the uncertainty for New Zealanders, for businesses, and for airlines of changing settings. So that does mean that we will step through our changes very carefully, and based on, you know, the very strong advice of those experts who have supported every step of our COVID response, I have observed that you've seen overseas there's been openings and then the re-imposition of requirements, and I think that does make it very difficult for operators, for travellers, and for Kiwis. So we will be careful and deliberate.

Media: Just on that, you've made a couple of references to making changes that stick, and, like, I think that's a very laudable goal; are you making these changes—sorry, I didn't mean to be funny—

PM: No, no, no, I just—laudable, yes.

Media: Are you making these changes with a view to winter next year? Like, a lot of these changes—you know, the resurgences in Europe seem to be because it's winter. Can you make changes now, or make policy goals now, that last the whole of next year?

PM: Well, it's a really good point. Yes, we are thinking about winter, and we are looking at Europe and what's happening there. And this is where I would point to, actually, the importance of the COVID protection framework. It doesn't say, "Here's a date where all bets are off and we go back to some kind of normal." It accepts that COVID is around, it's showing that it is still very problematic in some parts of the world. We want a framework that actually can see us through that—that people will know, that, actually, if we do have outbreaks that are proving problematic and difficult, they'll know what will happen. So we've tried to think ahead, we've tried to think about seasons, actually, giving other countries a tough time and how we can prepare for that. Because one of the benefits we have as a country is that the rest of the world is a season ahead, and it allows us to plan for that. Ah yeah, do you mind if I just take a couple who haven't had one, Jason, and then come back to you. So I think I had Bernard, and then I'll come back to you.

Media: Prime Minister, on Murupara, it has a vaccination rate—this is a full vaccination rate—of 38.6 percent.

PM: Yes.

Media: Would you be comfortable opening up Auckland on December the 15th and going to the traffic light system while a place like Murupara has a vaccination rate that's less than 50 percent?

PM: Yes, because one of the things that, of course, we'll be considering when we move different parts of the country are vaccination levels in different parts of the country. And so we'll be considering, of course—that will mean we'll consider what happens for that particular region, and the settings that they move into. And that means gathering limits and, of course, the use of the vaccine pass. Keeping in mind that, actually, we have a higher rate of vaccine

for those in Auckland who will be moving than in some cases the communities that they might go to.

Media: But you went there to get the vaccination rates up.

PM: Yes.

Media: And it's clear there's 800 people who aren't vaccinated.

PM: So it's a population of, if I recall correctly, some 1,200 to 1,500, if I can recall. So a small population, that's correct. We have a situation in that community where a trusted individual has taken a particular—a trusted health professional has taken a particular position on vaccines, which may be contributing to the rates that we're seeing in that community. And that's actually a reason why things like making sure that vaccine passes are used is a way that we can protect the unvaccinated.

Media: Do you think that opening up will see Murupara have many cases and deaths?

PM: I'm not going to simply assume that that will be the case. As I say, Aucklanders will be sitting on rates close to or over 90 percent at that point. We'll be requiring them to be tested if they are not vaccinated, before they leave. We are putting protection mechanisms in place to ensure the safety of the rest of New Zealand. But, at the same time, we are asking people to also be vaccinated, and we're working very hard to make sure they are.

Media: Prime Minister, just on the legislative timetable going forward on the traffic light system, the Opposition say that, basically, because of how the timing has aligned, it has to go through the House this week, rushed under urgency, which means that there'll be no select committee process. They're crying foul at the fact that this is undemocratic. What's your response?

PM: Oh, well, I would disagree. The COVID protection framework has been publicly available and able to be discussed, debated, and considered since October. The very Opposition who are choosing to criticise us also have been asking us, of course, to just move arbitrarily. Of course, we've got a process here where there's able to be debate on the framework. But, ultimately, the decisions on when we move are actually based on the health situation, based on the outbreak, based on vaccination levels rather than what's happening in Parliament.

Media: So we'll have all three readings this week, this legislation?

PM: The timelines are, yes, that's my recollection for the legislative timetable. Let me go and just double check whether it's not all the way through to completion, but that's my recollection.

Media: Surely they have a point in the fact that, yes, it's been in the public arena for a long time now, but the nitty-gritty details, the part that politicians have to work through to forge law, really needs to have a more fulsome discussion?

PM: Well, of course, I would also argue that this is not too dissimilar. In fact, more time has been available to debate and discuss the COVID protection framework than there was the alert level framework. Even before it was publicly announced, we went out and engaged with different sectors. We've canvassed it and tested it with public health experts and those who are observing what's going on in the international environment. So there has been good engagement around it, and now it is coming before Parliament.

Media: Dr Bloomfield, on the [*Inaudible*] there are a range of countries in Europe that are seeing resurgences with COVID. If you look at Belgium or Holland, they have higher vaccination rates than we do, across the full population, and they're going back into lockdowns. What are the lessons that you're taking from this, for both summer and for next winter?

Dr Ashley Bloomfield: Yes, indeed. I had a very useful discussion with Professor Tony Blakely in Melbourne last night. We did our training together. So he had some very useful

observations. A couple of things here. First of all, and this goes to the earlier question about opening the borders, the risk presented by even fully vaccinated travellers coming in, especially if the volume is high, is not trivial. And, in fact, if you can imagine in our situation, people travelling in—and if they were self-isolating, even, in different parts of the country and there were cases there, and each one of those is in fact seeding another little outbreak, which is different from our current situation, where most of our cases, of course—well, they're all coming from known cases, and many of those we can still epidemiologically link.

I think the second thing here is, Professor Blakely emphasised a lot the impact of waning immunity from the vaccine. So this is why our booster programme is very timely in that we're starting at that six-month point in summer and then the vast majority of our population will have had that booster before we head into next winter. And, likewise, we will be placing a great emphasis too on flu vaccination at that point. But you're right. We are watching very closely what is happening in Europe because there is no doubt that seasonality plays a very important role here in terms of the transmission of the virus.

PM: Sorry, Mark, do you want to finish and then I'll come to Jenèe?

Media: Thanks. For you, Prime Minister, can you say by 15 December whether Māori in any one DHB area will have hit 90 percent double dose rate? Right now, we only have a first dose rate.

PM: Unfortunately, Mark, I can't off the top of my head recall the individual vaccine rates in the different DHBs. I do recall that in Counties it's higher than the national average, for instance, but if you wouldn't mind I'd rather go away and check the latest breakdown.

Dr Ashley Bloomfield: Auckland is very close. They're likely to be there within the next week or so.

PM: Yeah, it is higher in Auckland than the rest of the country and also the numbers are larger as well. Sorry, Jenèe.

Media: Prime Minister, and Dr Bloomfield, over this pandemic you must be getting used to making some pretty massive life and death decisions which I'm not sure if you fully thought you were signing up for this time of job when you took the positions. But up until now, a lot of the political decisions have actually been aligning with health decisions, and we might be seeing a bit of shift now, I guess. I'm just wondering—

PM: Are we?

Media: Yeah, that's a contested point.

PM: Yes, I'd say that would be a contested point.

Media: Sure, OK. But I'm just wondering if you could explain to us, I guess, the toll that it might take on you, making these decisions, and whether that toll feels a little bit heavier now, going forward?

PM: Oh, sorry, was that for me or Dr Bloomfield?

Media: Both.

PM: Would you like to—you go first, Dr Bloomfield.

Dr Ashley Bloomfield: Yes, the decisions have felt weighty right from the start, in the advice, in my case, the decisions taken by the Government. Look, they've felt weighty all the way through, and I guess the challenge now is that we're at this period of transition. I guess the thing that—there are two things that I find help keep me as calm as possible. The first thing is we have got access to, and the Government has listened to, I think, excellent advice from our science community. The second thing is we're going into this next phase in, one could argue, the best possible position. We've got a controlled outbreak, we're going into summer, and we've got high and are still increasing vaccination rates, and that is as good a position as I would have hoped we would be in at this point in the year.

PM: Yeah, I would absolutely concur with Dr Bloomfield. You know, I think as much as I can speak on behalf of Cabinet, we've always had, you know, really fulsome advice. We've always had an evidence base that extends beyond our borders. We've been able to look at what's happening in the rest of the world and we've been able to learn from that, but we've also never been afraid to do things differently and all the way through we have. But that's only been possible through the support of the public as well. And even though this next phase may present a situation where there will be more contested views, where you will hear some voices who might take a perspective that we should operate differently, for the most part the vast majority of people still can see relative to the rest of the world that we're doing really well and that we're making all the decisions in the best interests of New Zealanders. OK, so Jo.

Media: Just coming back to the questions about the areas that have the low vaccination rates, the sort of overwhelming factor seems to be, if you talk to the likes of Shane Reti, Debbie Ngarewa-Packer, who have got ears on the ground in some remote areas, is access being the issue—

PM: I would disagree.

Media: And a lot of that being roading, people being far away and having to make a call between the petrol price and whether you go to the supermarket or whether you go and get vaccinated, those sort of factors, health issues. Short of, I guess, paying for a whole heap of off-road vehicles, how are you actually going to get the rates up in some of these remote isolated places and what work are you doing to make it a health perspective and a political perspective to ensure that you can do that?

PM: Well, I would actually disagree. We've worked very hard to overcome the access issue. In fact, you know, take the East Coast. When I visited Tai Rāwhiti just a few days ago, they now have multiple mobile vaccination clinics operating where they have the ability—previously they were using horse floats. They are now using camper vans on top of that. Everything that they do is able to be taken into remote parts of the community, and even a population as small as Ruatōria has had multiple vaccination events going up into the region now, and will continue to do so. And I've seen that up and down the country. I think, unfortunately, what we're coming up against now is where it previously may have been access, it's moving now more to issues of hesitancy. Now, that doesn't mean it can't be overcome, but it takes multiple efforts. We can't just go once, and we can't just go once to vaccinate. We have to go in first to be available with information, with trusted providers, and be willing to go back and follow up. That's the challenge now.

Media: Sorry, can I just ask a supp on that. That seems really unfair to someone like Shane who's been out on the ground for weeks on end, and that's the message that he's hearing, for you to say, who's not out there doing that, to say that what he is saying is absolutely incorrect.

PM: Well, also what he's saying is contesting what we're hearing from some of the providers. Actually, I don't take my view just from what I've seen; I take it from the likes of Minister Peeni Henare, who's been on a constant road trip for a number of days now—up and down the country. He's been in Northland, he's been in Tai Rāwhiti, he's been across the country in areas where access otherwise might be an issue. And we know, of course, and we've seen already, the additional funding that's been distributed has gone into long-term mobile clinics to be able to access otherwise rural and remote areas. And I have been to Northland, and yes, it's not my home and I don't live there, but I have spoken to providers there and heard what they are doing around remote access. I've spoken to the Hokianga Hauora, I've been to Kawakawa and seen the mobile clinics operating there, rugby clubs they have clinics at. I can see a lot of work on the ground.

Media: So access is no longer an issue and in your mind it's hesitancy and anti-vax—

PM: Ah, no, I think, look, so access can mean that it's harder to have those repeat engagements that are becoming necessary. So as much as that impacts it—but I don't think it's fair to say that there are parts of the country that we're just not reaching, and I know that

huge effort's gone into that. OK, I might then just finish—Henry and then Bernard, you can be my last.

Media: If it isn't isolation and access issues, then how do you explain the fact that highly correlated with lower vaxxed areas is isolation and deprivation—that poorer people in more isolated communities are far more likely to be less vaccinated than those in urban areas—this is a stat. So are poor people more likely to be hesitant? Is that what you're saying?

PM: I just think it's—all I'm arguing is it's overly simplified just to say that there hasn't been access. For instance, you know, I know that there's been multiple clinics in Murupara. That is a remote community. But there have been multiple clinics, drive-through opportunities, but there is more at play there, and it will be different in different communities, but there are some contributing factors. But, again, you framed it—I would never ever say that this—it's not an excuse; they're just challenges, challenges that we all have to work hard to try and overcome. Bernard, we'll finish with you.

Media: Prime Minister, in Europe, Austria has decided to mandate vaccination for everyone.

PM: Yes.

Media: Do you think there's ever a situation where New Zealand might have to—

PM: No, no. That is just not something we would do. OK, thank you, everyone.

conclusion of press conference