



SITREP 41

NOVEL CORONAVIRUS COVID-19

Issued: **1300 hrs 01 March 2020,**

IN CONFIDENCE


New information in red text

Unless otherwise specified, all information is current as of **1300 hours 01 March 2020.**

SUMMARY

1. An outbreak of novel coronavirus (COVID-19) is ongoing in mainland China with the epicentre in Hubei Province. The numbers of confirmed cases and deaths in Republic of Korea, Iran and Italy continue to rise. **There is one confirmed case in New Zealand.**
2. Since **29 February 2020, globally** there has been an increase of **1753** confirmed cases and **66 new** deaths reported globally. Of the confirmed cases, there has been an increase of **1318** cases outside of **mainland** China. In total, **58** countries have reported confirmed cases. The three main regions that have reported new cases are **Western Pacific with 836 new cases, European region with 321 new cases, and 151 new cases reported in the Eastern Mediterranean region. 8 new cases have been reported in the Americas region.**
3. On 31 January 2020, the World Health Organization (WHO) declared a Public Health Emergency of International Concern (PHEIC). New Zealand's risk assessment is that the likelihood of one or more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high and the likelihood of sustained transmission **is moderate**, and **the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.**

KEY MESSAGES

4. As of 1300 hrs **29** February 2020, there is one confirmed case of COVID-19 in New Zealand. The person is in isolation in hospital in Auckland. The individual has recently travelled through Iran and Bali before entering New Zealand earlier this week. Infection prevention and control protocols are being used to prevent onward spread of COVID-19 in the hospital. The individual is in a negative pressure room, and their condition is improving. The NHCC are in close contact with health care providers looking after the patient and their whanau.
5. **The crew members with flu like symptoms on the cruise ship that is scheduled to arrive into Tauranga tomorrow are confirmed to have cases of influenza-A, not COVID-19.**
6. The case definition has now been updated as a result of the Technical Advisory Group's recommendations. Under the revised case definition, category one includes mainland China and Iran, people who have travelled from or via countries in category one in the last 14 days are required to register with Healthline and self-isolate for 14 days.
7. s 6(a)  People who have travelled from or via countries listed in category two who develop symptoms of fever, cough or shortness of breath should seek medical advice by first phoning Healthline's dedicated COVID-19 number **0800 358 5453** or contacting their GP including phoning ahead of their visit.

8. As part of the continued response to COVID-19, from today New Zealanders will begin to see and hear a public health campaign focused on what they can do to protect themselves, their family and whanau.

OUTBREAK SITUATION

9. As of 29 February 2020, there is one confirmed case of COVID-19 in New Zealand.
10. As of 29 February 2020, there are 85,403 confirmed cases of COVID-19 reported globally, an increase of 1,753. Of the 435 new confirmed cases in mainland China 423 are from Hubei Province.
11. There are 2,924 confirmed deaths globally, 2,727 in Hubei Province, 104 in the rest of mainland China, and 89 outside mainland China. Based on the confirmed cases reported globally, the case fatality rate is approximately 3.4 percent (no increase from yesterday).
12. There have been 6,152 confirmed cases reported outside of mainland China, an increase of 1,326. Italy has reported 888 confirmed COVID-19 cases (238 new cases) and 21 deaths (4 new). Iran has reported 388 confirmed COVID-19 cases (143 new cases) and 34 deaths (8 new). South Korea has reported a total 3,150 confirmed COVID-19 cases (813 new cases) and 17 deaths (4 new).
13. Two new countries (Mexico and San Marino) have reported confirmed cases of COVID-19 in the past 24 hours.
14. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
15. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 28 February 2020 in light of developments in Italy:
- The risk associated with COVID-19 infection for people in the EU/EEA and UK is currently considered to be **moderate**.
 - The risk of the occurrence of clusters, similar to the ones in Italy, associated with COVID-19 in other countries in the EU/EEA and the UK, is currently considered to be **moderate to high**.
 - The risk for people from the EU/EEA and the UK travelling/resident in areas with presumed community transmission is currently **high**.
 - The risk for healthcare systems capacity in the EU/EEA and the UK during the peak of the influenza season is **moderate**.
16. Environment, Science and Research Limited (ESR) issued a risk assessment summary for 20 February 2020 that determined (currently under review):
- **Importation risk:** Even with the containment measures in place in China and the border measures currently in place for arrivals from mainland China, the likelihood of one or more cases being imported into New Zealand from China was **HIGH**.
 - Given our geographic accessibility to other countries where there are confirmed cases but only limited transmission and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from outside of China was **LOW-MODERATE**.
 - **Transmission risk:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **HIGH**, the likelihood of sustained transmission is **MODERATE** and the likelihood of widespread outbreaks is **LOW** This assessment assumes that cases are detected in a timely

manner and that infection prevention and control measures are implemented promptly.

- **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand will be **HIGH** both for public health staff, the wider health sector and the community.
- **Public health risk:** Now that the virus has been imported into New Zealand, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is **HIGH**.

WHOLE OF GOVERNMENT RESPONSE

New Zealand Border Response

18. The WHO does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
19. On 02 February 2020 New Zealand implemented additional border measures to extend the travel history in the case definition for COVID-19 infection to include travel to mainland China (previously only Hubei province) and to deny entry into New Zealand to people who departed or transited through mainland China from 02 February 2020. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand. The additional border measures aim to reduce the chances of COVID-19 spreading within New Zealand, ie by reducing the number of potentially infected people arriving in NZ and asking those who do arrive from mainland China to self-isolate for 14 days.
20. On 24 February 2020 the New Zealand Government announced a second 8-day extension of temporary border measures restricting travel by people who have left or transited through mainland China in the previous 14 days. This position is reviewed every 48 hours. On 28 February, the Government announced Iran would be included in the temporary border restrictions with mainland China. In addition, a second category of countries was identified which are experiencing sustained community transmission. Travellers from these countries will receive advice on symptoms of concern and what to do if they become unwell. They will not be required to self-isolate.
21. Current border-related measures include:
 - Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO
 - Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers
 - Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea
 - Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
 - Airlines **have been** asked to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
 - Asking travellers using E-gates if they have been in or transited mainland China in the last 14 days. This **has been** updated to include Iran.
 - Supporting public health staff at Auckland, Wellington Christchurch, **Dunedin and Queenstown** International Airports who are meeting and providing information to travellers from mainland China. Health staff are available to provide advice on self-

isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.

- Healthline has established a dedicated phone line for persons self-isolating to register and will be regularly checking on the welfare and wellbeing of those persons registered
 - Registering passengers with Healthline as they arrive at airports
 - Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels
 - Responding to reports of ill travellers
 - Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.
22. On **01 March 2020**, the New Zealand Customs Service data reported **no flights** arriving from mainland China. Several flights from other countries had passengers or crew who had departed or transited through mainland China in the last 14 days. Passengers are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to passengers who had left mainland China more than fourteen days ago, as well as to other travellers with general health queries.
23. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure.

New Zealand Health Sector Response

24. The Ministry of Health remains the single point of truth for COVID-19.
25. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
26. The ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition (<https://www.health.govt.nz/our-work/diseases-and-conditions/novel-coronavirus-covid-19/case-definition-2019-ncov-infection>).

National Telehealth Service Update

27. On **29 February**, total Healthline saw **1,667** inbound calls managed – one of the highest days ever. Many callers to the helpline refuse to identify themselves. On **29 February** there were **315** callers concerned about COVID-19 who did disclose some information. In addition to this, **70** callers diverted to the Healthline COVID-19 self-serve micro-site for information. **56** people registered for self-isolation yesterday – **this excludes those who registered via the border process. Border cards were not processed today.**
28. Of the callers concerned about Coronavirus who did disclose some information:
- **69** callers were experiencing cold or flu-like symptoms.
 - **145** were regarding people who had been outside NZ in the previous 4 weeks
 - **14** required the use of an interpreter

- 88% received self-care advice or information
- 2,060 registered (people or households) and currently in isolation
- 4,749 completed isolation
- 7,556 total registrations

(See Figure 3 – 4 in the Appendices for information on self-isolation)

Other Country Responses

Australia

29. As at 1500 hours on 29 February 2020 there had been 25 laboratory confirmed cases of COVID-19 in Australia. A case reported from Queensland had recent travel history to Iran. On 29 February 2020 the Australian Government announced new measures in the response to the coronavirus outbreak in Iran. This includes:
- a travel advisory – do not travel
 - foreign nationals who are in Iran on or after 1 March 2020 will not be allowed to enter Australia for 14 days from the time they have left or transited through Iran
 - Australian citizens and permanent residents and immediate family members will be able to enter and will be required to self-isolate at home for 14 days from the day they left Iran.

Samoa

30. All travellers entering Samoa from or transit through all ports (New Zealand, Australia, Fiji, Am. Samoa, Hawaii and Tonga) are required to **undergo medical examination** by a Registered Medical Practitioner **within (3) days before ARRIVAL**. This medical clearance report is required for check-in prior to issuing of boarding passes.

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 28 February 2020

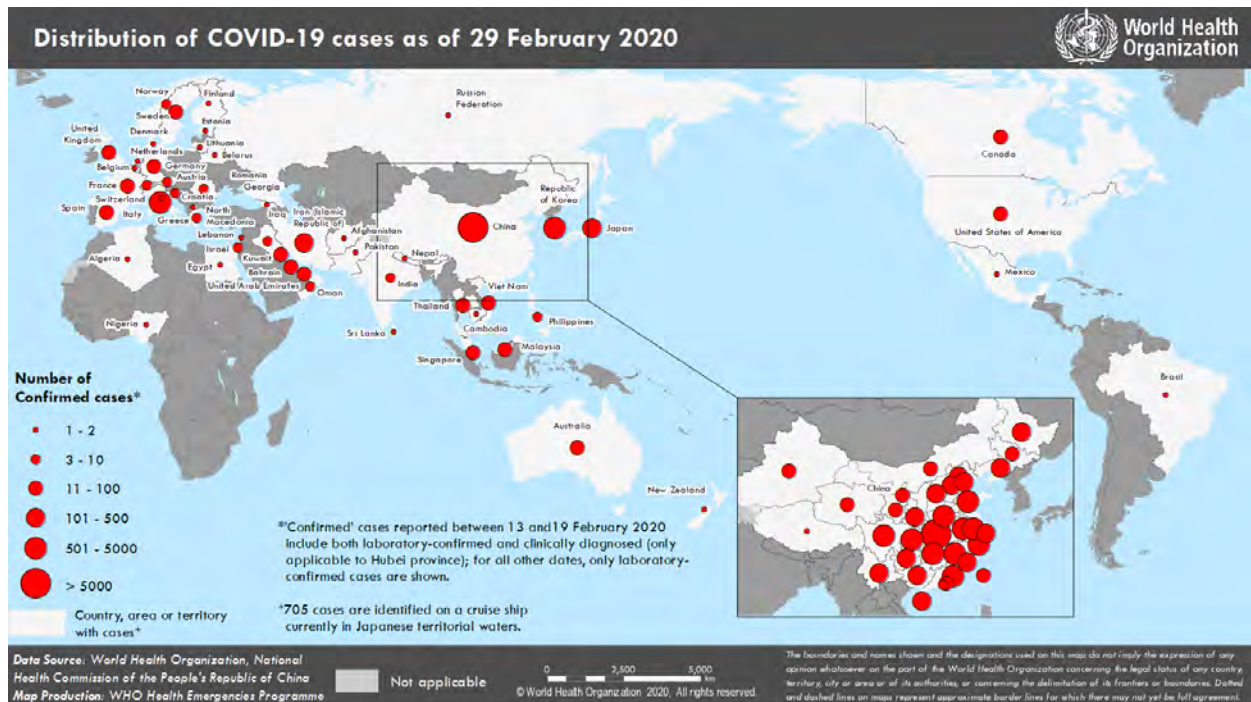


Figure 2: Epidemic curve of confirmed COVID-19 cases (n=4072) reported outside of China, by date of report and WHO region with complete date of reporting through 28 February 2020

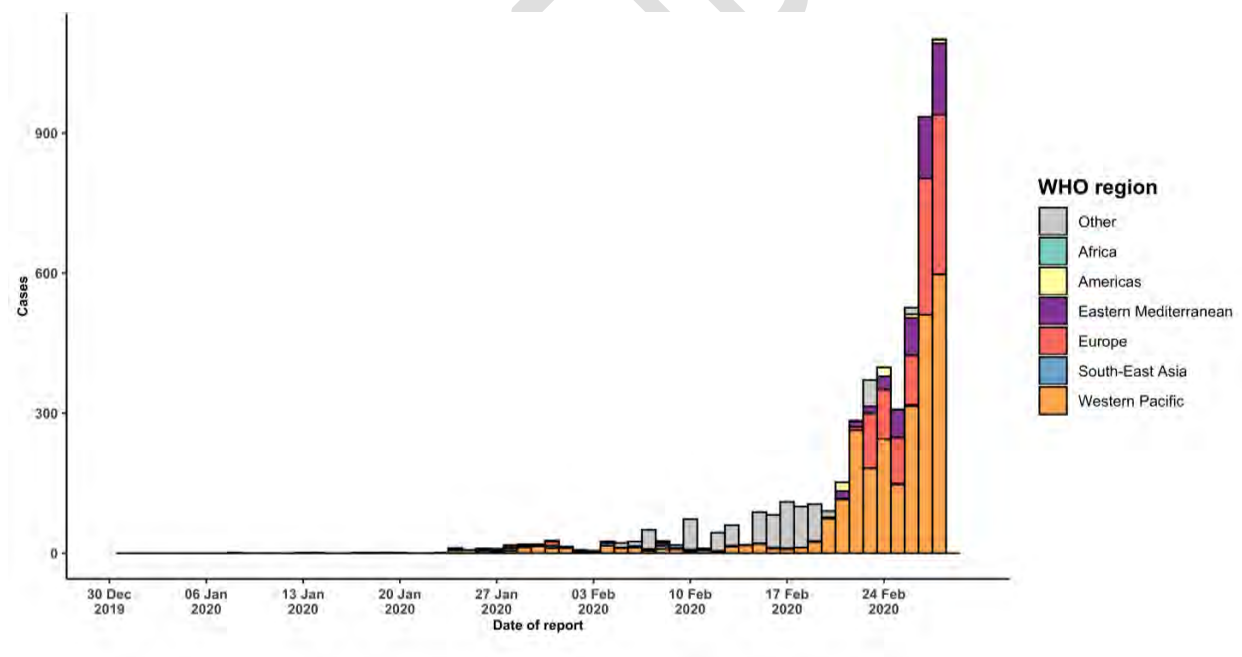


Figure 3: Healthline COVID-19 related call outcomes

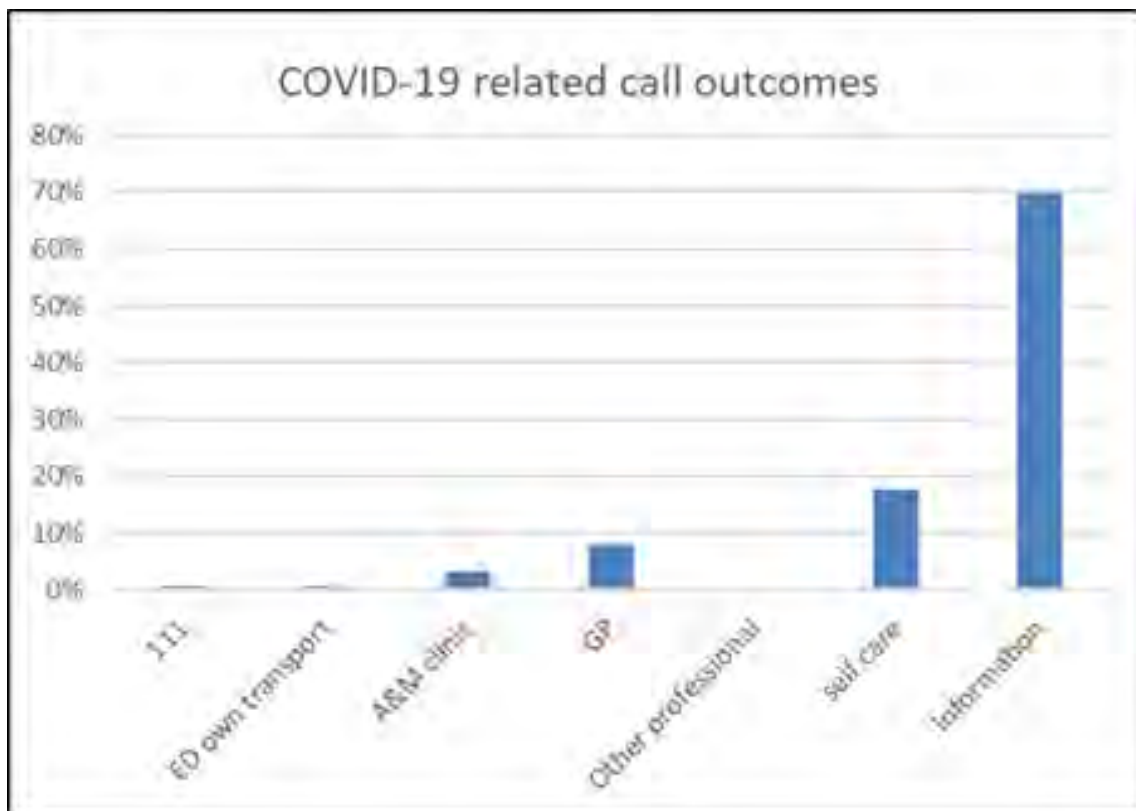
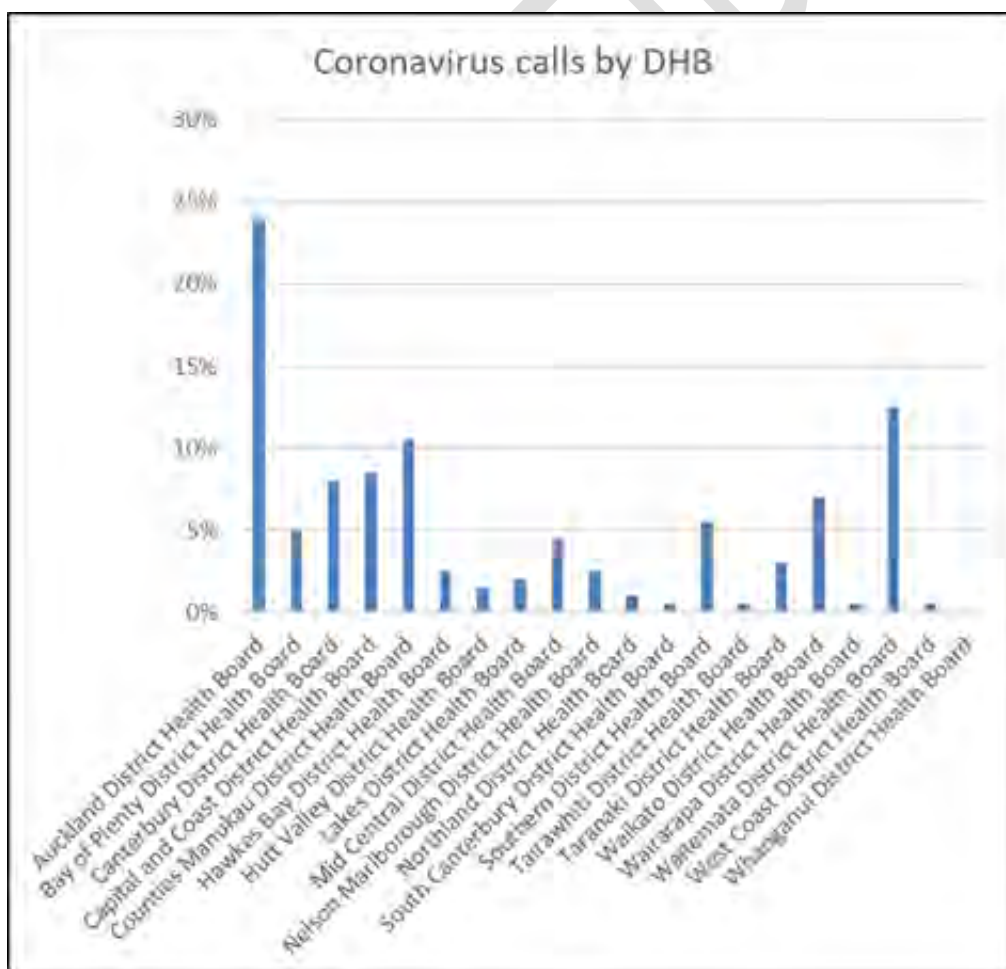


Figure 4: Healthline COVID-19 calls by DHB



NHCC Contact Information:

IN CONFIDENCE

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Monday 02 March 2020.**

Prepared by: Martin Anderson and Kenneth Gustafson, NHCC Intelligence

Approved by: Jane Kelley, NHCC Response Manager

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, **Dunedin and Queenstown** International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), including those who have transited through China or Iran is that they should self-isolate for a period of 14 days. People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at 29 February 2020, 7,556 people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan) and Iran but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet (https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Consideration / tracking for those who arrived before the border closure (from mainland China)

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 02 February 2020?

A: No.

d. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.



SITREP 42
NOVEL CORONAVIRUS COVID-19
Issued: 1300 hrs 02 March 2020
IN CONFIDENCE

New information in red text

Unless otherwise specified, all information is current as of 1300 hours 02 March 2020.

SUMMARY

1. An outbreak of novel coronavirus (COVID-19) is ongoing in mainland China with the epicentre in Hubei Province. The numbers of confirmed cases and deaths in Republic of Korea, Iran and Italy continue to rise. **There is one confirmed case in New Zealand.**
2. Since 01 March 2020, globally there has been an increase of 1739 confirmed cases and 53 new deaths reported globally. Of the confirmed cases, there has been an increase of 1166 cases outside of mainland China. In total, 63 countries have reported confirmed cases. The three main regions that have reported new cases are Western Pacific with 600 new cases, European region with 338 new cases, and the Eastern Mediterranean region with 215 new cases. 7 new cases have been reported in the Americas region.
3. On 31 January 2020, the World Health Organization (WHO) declared a Public Health Emergency of International Concern (PHEIC). New Zealand's risk assessment is that the likelihood of more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high, the likelihood of sustained transmission is moderate, and the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.

KEY MESSAGES

4. As of 1300 hrs 01 March 2020, there is one confirmed case of COVID-19 in New Zealand. The person is in isolation in hospital in Auckland. The individual has recently travelled through Iran and Bali before entering New Zealand earlier this week. Infection prevention and control protocols are being used to prevent onward spread of COVID-19 in the hospital. The individual is in a negative pressure room, and their condition is improving. The NHCC are in close contact with health care providers looking after the patient and their whanau.
5. The case definition has now been updated as a result of the Technical Advisory Group's recommendations. Under the revised case definition, category one includes mainland China and Iran, people who have travelled from or via countries in category one in the last 14 days are required to register with Healthline and self-isolate for 14 days.
6. s 6(a) [REDACTED] People who have travelled from or via countries listed in

category two who develop symptoms of fever, cough or shortness of breath should seek medical advice by first phoning Healthline's dedicated COVID-19 number **0800 358 5453** or contacting their GP including phoning ahead of their visit.

7. As part of the continued response to COVID-19, from today New Zealanders will begin to see and hear a public health campaign focused on what they can do to protect themselves, their family and whanau.

OUTBREAK SITUATION

8. As of 01 March 2020, there is one confirmed case of COVID-19 in New Zealand. **Contact tracing protocol has been completed. Confirmation of communication with those who were potentially in close contact is underway.**
9. As of **01 March 2020**, there are **87,137** confirmed cases of COVID-19 reported globally, an increase of **1,739**. Of the **573** new confirmed cases in mainland China **570** are from Hubei Province.
10. There are **2,977** confirmed deaths globally, **2,761** in Hubei Province, **101** in the rest of mainland China, and **92** outside mainland China. Based on the confirmed cases reported globally, the case fatality rate is approximately 3.4 percent (no increase from yesterday).
11. There have been **7,313** confirmed cases reported outside of mainland China, an increase of **1,304**. Italy has reported **1,128** confirmed COVID-19 cases (**240** new cases) and **29** deaths (**8** new). Iran has reported **593** confirmed COVID-19 cases (**205** new cases) and **43** deaths (**9** new). South Korea has reported a total **3,736** confirmed COVID-19 cases (**586** new cases) and **18** deaths (**1** new).
12. **Five** new countries (**Azerbaijan, Ecuador, Ireland, Monaco and Qatar**) have reported confirmed cases of COVID-19 in the past 24 hours.

Risk Assessment – Global / Regional / National

13. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
14. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 28 February 2020 in light of developments in Italy:
 - The risk associated with COVID-19 infection for people in the EU/EEA and UK is currently considered to be **moderate**.
 - The risk of COVID-19 clusters, similar to the ones in Italy, in other countries in the EU/EEA and the UK, is currently considered to be **moderate to high**.
 - The risk for people travelling/resident in areas with presumed community transmission is currently **high**.
 - The risk for healthcare systems capacity in the EU/EEA and the UK during the peak of the influenza season is **moderate**.
15. Environment, Science and Research Limited (ESR) issued a risk assessment summary for 20 February 2020 that determined (currently under review):
 - **Importation risk:** Even with the containment measures in place in China and the border measures currently in place for arrivals from mainland China, the likelihood of one or more cases being imported into New Zealand from China was **high**.

- Given our geographic accessibility to other countries where there are confirmed cases but only limited transmission and considering the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from outside of China was **low-moderate**.
 - **Transmission risk:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **high**, the likelihood of sustained transmission is **moderate** and the likelihood of widespread outbreaks is **low**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
- **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of more cases in New Zealand will be **high** both for public health staff, the wider health sector and the community.
- **Public health risk:** Now that the virus has been imported into New Zealand, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is **high**.

WHOLE OF GOVERNMENT RESPONSE New Zealand Border Response

18. The WHO does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
19. On 02 February 2020 New Zealand implemented additional border measures to extend the travel history in the case definition for COVID-19 infection to include travel to mainland China (previously only Hubei province) and to deny entry into New Zealand to people who departed or transited through mainland China from 02 February 2020. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand. The additional border measures aim to reduce the chances of COVID-19 spreading within New Zealand, i.e. by reducing the number of potentially infected people arriving in NZ and asking those who do arrive from mainland China to self-isolate for 14 days.
20. On 24 February 2020 the New Zealand Government announced a second 8-day extension of temporary border measures restricting travel by people who have left or transited through mainland China in the previous 14 days. This position is reviewed every 48 hours. On 28 February, the Government announced Iran would be included in the temporary border restrictions with mainland China. In addition, a second category of countries was identified which are experiencing sustained community transmission. Travellers from these countries will receive advice on symptoms of concern and what to do if they become unwell. They will not be required to self-isolate.
21. Current border-related measures include:
 - Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO
 - Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers

- Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea
 - Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
 - **health advice cards are being provided to all arriving international passengers at airports.**
 - Airlines have been asked to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
 - Asking travellers using E-gates if they have been in or transited mainland China in the last 14 days. This has been updated to include Iran.
 - Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.
 - Healthline has established a dedicated phone line for persons self-isolating to register and will be regularly checking on the welfare and wellbeing of those persons registered.
 - Registering passengers with Healthline as they arrive at airports.
 - Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.
 - Responding to reports of ill travellers.
 - Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.
- 22.** On **01 March 2020**, the New Zealand Customs Service data reported **one flight** arriving from mainland China **with 63 passengers**. Several flights from other countries had passengers or crew who had departed or transited through mainland China in the last 14 days. Passengers are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to passengers who had left mainland China more than fourteen days ago, as well as to other travellers with general health queries.
- 23.** The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure.

New Zealand Health Sector Response

- 24.** The Ministry of Health remains the single point of truth for COVID-19.
- 25.** Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.

26. The ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition (<https://www.health.govt.nz/ourwork/diseases-and-conditions/novel-coronavirus-covid-19/case-definition-2019-ncovinfection>).
27. At 0840 on 02 March 2020 the ESR reports 1 confirmed case, 146 negative results, 20 cases under investigation and 2 cases as suspect.

National Telehealth Service Update

27. On 01 March 2020, total Healthline saw more than 1,500 inbound calls managed – one of the highest days ever. Many callers to the helpline refuse to identify themselves. On 01 March 2020 there were 236 callers with clinical concerns about COVID-19 who did disclose some information. In addition to this, 36 callers diverted to the Healthline COVID-19 self-serve micro-site for information. 26 people pro-actively registered for self-isolation on 01 March 2020 – this excludes those who registered via the border process. Border cards were not processed today.
28. Of the callers concerned about Coronavirus who did disclose some information:
 - 65 callers were experiencing cold or flu-like symptoms.
 - 93 were regarding people who had been outside NZ in the previous 4 weeks
 - 14 required the use of an interpreter
 - 93% received self-care advice or information
 - 1,710 registered (people or households) and currently in isolation
 - 5,119 completed isolation
 - Approximately 700 additional household members in isolation or completed isolation
 - 7,530 total registrations

(See Figure 3 – 4 in the Appendices for information on self-isolation)

Welfare

29. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
30. NEMA has convened National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. The NHCC Welfare desk has developed guidance and reporting templates to ensure consistency. Guidance for CDEM Group Welfare Managers is being drafted.
31. The next Psychosocial support sub-function meeting will take place on 05 March 2020.
32. An all of government factsheet has been prepared in both English and simplified Chinese to provide information on support available for people who have self-isolated and how to access it. The factsheet is available on the Ministry of Health website and has been shared with agencies and CDEM groups. The factsheet will continue to be updated as needed.

Other Country Responses

Australia

33. As at 0900 hours on 2 March 2020 there had been 25 laboratory confirmed cases of COVID-19 in Australia. Australia reported its first COVID-19 related death on 1 March 2020. A case reported from Queensland had recent travel history to Iran. On 29 February 2020 the Australian Government announced new measures in the response to the coronavirus outbreak in Iran. This includes:
- a. a travel advisory – do not travel
 - b. foreign nationals who are in Iran on or after 1 March 2020 will not be allowed to enter Australia for 14 days from the time they have left or transited through Iran
 - c. Australian citizens and permanent residents and immediate family members will be able to enter and will be required to self-isolate at home for 14 days from the day they left Iran.

Samoa

34. All travellers entering Samoa from or transit through all ports (New Zealand, Australia, Fiji, Am. Samoa, Hawaii and Tonga) are required to **undergo medical examination** by a Registered Medical Practitioner **within (3) days before ARRIVAL**. This medical clearance report is required for check-in prior to issuing of boarding passes.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 1 March 2020

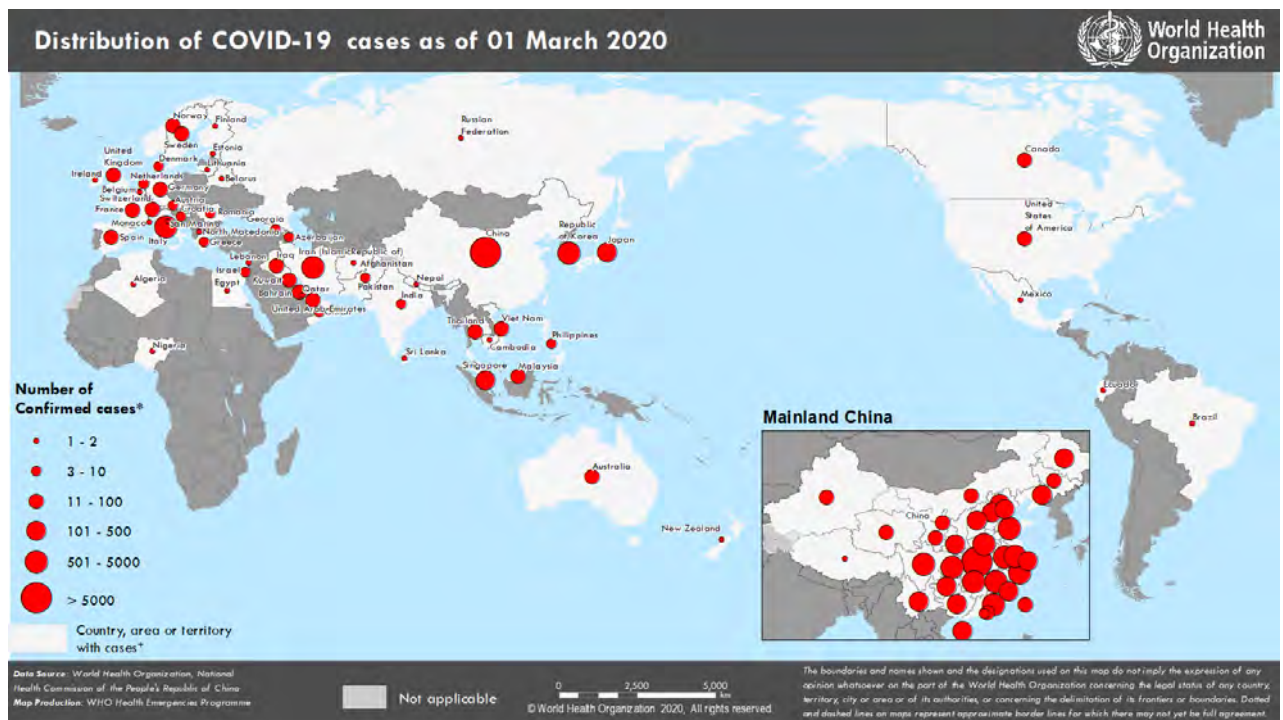


Figure 2: Epidemic curve of confirmed COVID-19 cases (n=6567) reported outside of China, by date of report and WHO region with complete date of reporting through 29 February 2020

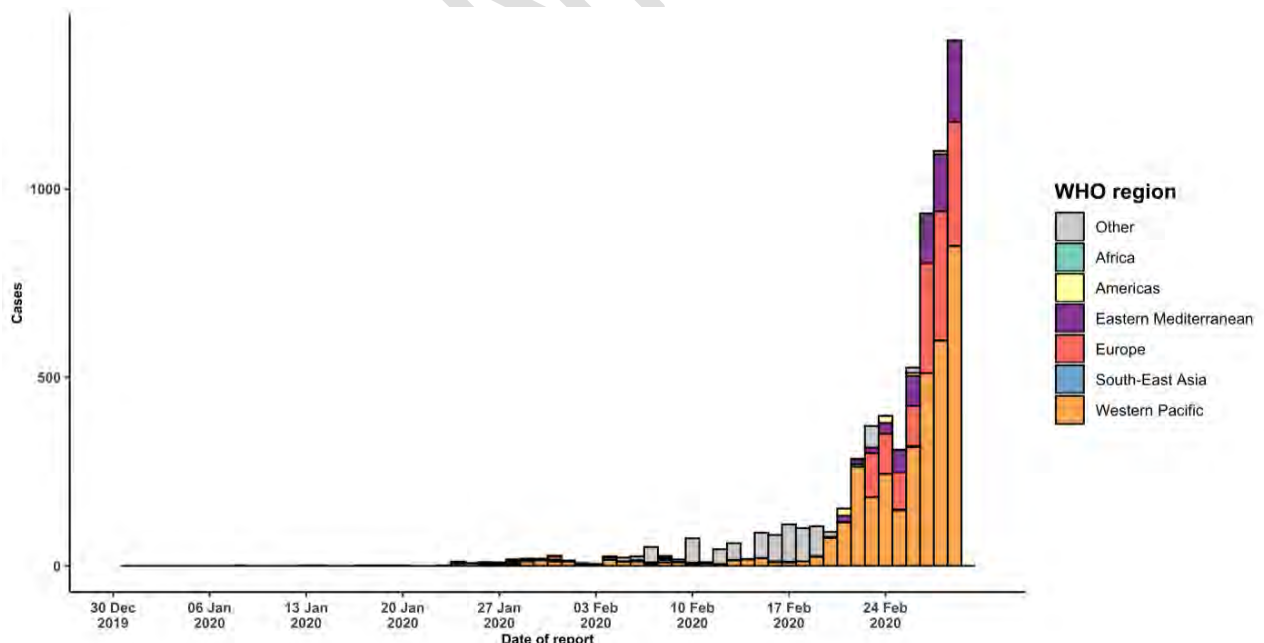


Figure 3: Healthline COVID-19 related call outcomes

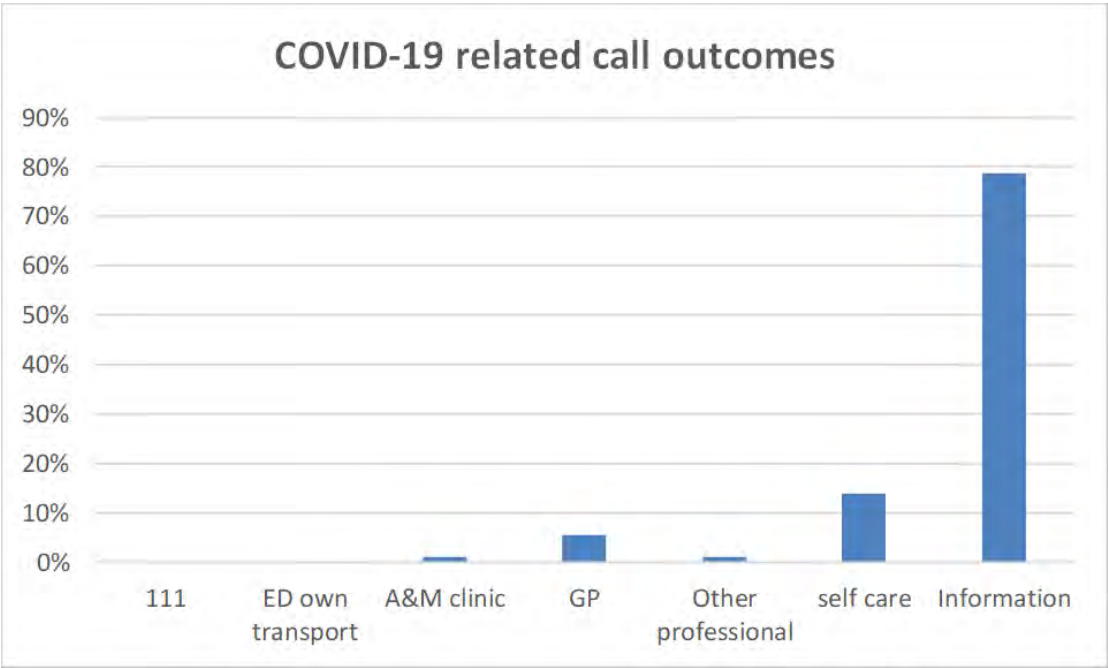
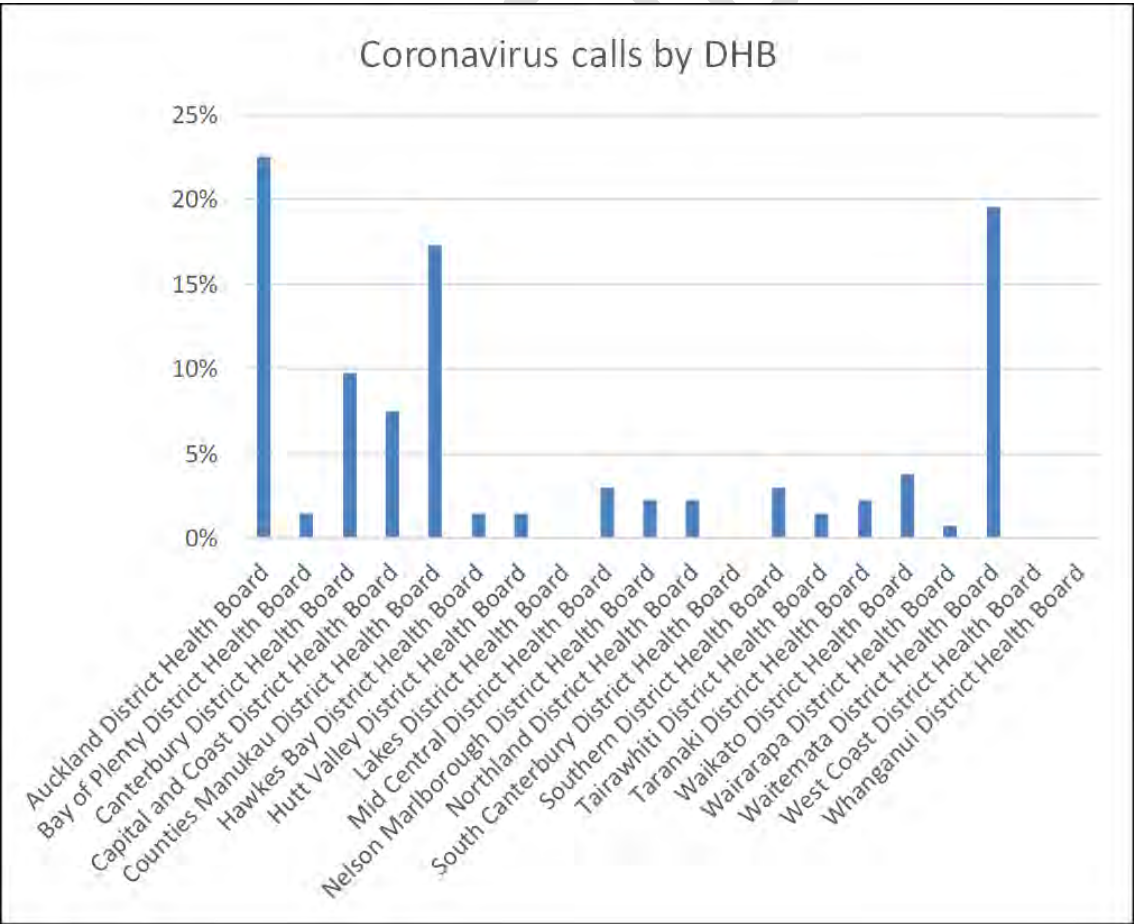


Figure 4: Healthline COVID-19 calls by DHB



NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Tuesday 03 March 2020.**

Prepared by: Martin Anderson, NHCC Intelligence

Approved by: John Hazeldine, NHCC Response Manager

ENDS

KEY MESSAGES

1. The patient, confirmed on Friday as New Zealand's first COVID-19 case, is in a stable and improving condition at Auckland City Hospital.
2. We are confident the public risk from this new infection is being well managed because of the public messaging, awareness of COVID-19 disease and our public health response to managing cases and contacts.
3. Healthline's dedicated COVID-19 number, 0800 358 5453, has seen a surge in activity in the weekend following Friday's confirmation of a case. The last three days have been some of the busiest ever for Healthline.
4. The service is free and available 24 hours a day, 7 days a week.
5. Applications open today for joint Health Research Council/Ministry of Health funding opportunities focused on responding to the current coronavirus disease (COVID-19) threat and strengthening New Zealand's research capacity and response to emerging infectious disease threats. For more information: <https://www.hrc.govt.nz/news-and-events/government-agencies-launch-rapid-research-response-covid-19-threat>
6. As part of our continued response to COVID-19, New Zealanders are beginning to see and hear a public health campaign focused on what they can do to protect themselves, their family and whānau.
7. There has been concern around a cruise ship 'Voyager of the Seas' docking in Tauranga today. Seven passengers are ill with influenza or gastroenteritis. Our current assessment is that there is no risk from COVID-19.
8. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
9. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
10. We continue to regularly review border restrictions and advice around any changes required.

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), including those who have transited through China or Iran is that they should self-isolate for a period of 14 days. People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at 01 March 2020, 7,530 people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan) and Iran but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet

(https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Consideration / tracking for those who arrived before the border closure (from mainland China)

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 02 February 2020?

A: No.

d. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.



SITREP 43
NOVEL CORONAVIRUS COVID-19
Issued: 1300 hrs 03 March 2020
IN CONFIDENCE

New information in red text

Unless otherwise specified, all information is current as of 1300 hours 03 March 2020.

SUMMARY

1. New Zealand is in the Keep it Out phase with border management and containment measures in place.
2. An outbreak of novel coronavirus (COVID-19) continues in mainland China with the epicentre in Hubei Province. The number of confirmed cases reported in mainland China is trending down. The numbers of confirmed cases and deaths in Republic of Korea, Iran and Italy continue to rise. There is one confirmed case in New Zealand.
3. Since 02 March 2020, globally there has been an increase of 1,804 confirmed cases and 66 new deaths reported. Of the confirmed cases, there has been an increase of 1,602 cases outside of mainland China. In total, 69 countries have reported confirmed cases. The three main regions that have reported new cases are Western Pacific with 497 new cases, European region with 697 new cases, and the Eastern Mediterranean region with 415 new cases. 4 new cases have been reported in the Americas region. Australia has reported its first local case person to person transmission.
4. No change to the risk status reported on 31 January 2020, the World Health Organization (WHO) declared a Public Health Emergency of International Concern (PHEIC). New Zealand's risk assessment is that the likelihood of more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high, the likelihood of sustained transmission is moderate, and the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.

KEY MESSAGES

5. New Zealand still has a single recorded case of COVID-19 - the patient remains in a stable and improving condition at Auckland City Hospital.
6. We are confident the public risk from this new infection is being well managed because of the public messaging, awareness of COVID-19 disease and our public health response to managing cases and contacts.
7. Testing is currently underway on two suspected cases of COVID-19 which fit the Ministry's case definition and results are expected back later today.
8. Healthline's dedicated COVID-19 number, 0800 358 5453, is free and available 24 hours a day, 7 days a week.

9. Applications are now open for joint Health Research Council/Ministry of Health funding opportunities focused on responding to the current coronavirus disease (COVID-19) threat and strengthening New Zealand's research capacity and response to emerging infectious disease threats. For more information: <https://www.hrc.govt.nz/news-and-events/government-agencies-launch-rapid-research-response-covid-19-threat>
10. Planning is underway now ahead of the lifting of the 14 day quarantine period at Whangaparāoa Reception Centre on Thursday. All six New Zealanders are in good spirits and showing no signs of COVID-19.
11. As part of our continued response to COVID-19, New Zealanders are now seeing and hearing a public health campaign focused on what they can do to protect themselves, their family and whānau.
12. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
13. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
14. The case definition has now been updated as a result of the Technical Advisory Group's recommendations. Under the revised case definition, category one includes mainland China, Iran, Northern Italy and the Republic of Korea. People who have travelled from or via countries in category one in the last 14 days are required to register with Healthline and self-isolate for 14 days.
15. s 6(a) [REDACTED] People who have travelled from or via countries listed in category two who develop symptoms of fever, cough or shortness of breath should seek medical advice by first phoning Healthline's dedicated COVID-19 number **0800 358 5453** or contacting their GP including phoning ahead of their visit.

OUTBREAK SITUATION

16. As of **03 March 2020**, there is one confirmed case of COVID-19 in New Zealand. Contact tracing protocol has been completed. Confirmation of communication with those who were potentially in close contact is underway and **three individuals have not returned contact**.
17. As of **02 March 2020**, there are **88,948** confirmed cases of COVID-19 reported globally, an increase of **1,804**. Of the **202** new confirmed cases in mainland China **196** are from Hubei Province.
18. There are **2,977** confirmed deaths globally, **2,761** in Hubei Province, **101** in the rest of mainland China, and **92** outside mainland China. Based on the confirmed cases reported globally, the case fatality rate varies from approximately 1 percent to 4 percent.
19. There have been **8,778** confirmed cases reported outside of mainland China, an increase of **1,602**. Italy has reported **1,689** confirmed COVID-19 cases (**561** new cases) and **35** deaths (**6** new). Iran has reported **978** confirmed COVID-19 cases (**385** new cases) and **54** deaths (**11** new). South Korea has reported a total **4,212** confirmed COVID-19 cases (**476** new cases) and **22** deaths (**4** new).

20. A team of WHO experts has arrived in Iran to support the COVID-19 response.
21. Six new countries (Armenia, Czechia, Dominican Republic, Luxembourg, Iceland and Indonesia) have reported confirmed cases of COVID-19 in the past 24 hours.

Risk Assessment – Global / Regional / National

22. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
23. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 28 February 2020 in light of developments in Italy.
- The risk associated with COVID-19 infection for people in the EU/EEA and UK is currently considered to be **moderate**.
 - The risk of COVID-19 clusters similar to the ones in Italy in other countries in the EU/EEA and the UK, is currently considered to be **moderate to high**.
 - The risk for people travelling/resident in areas with presumed community transmission is currently **high**.
 - The risk for healthcare systems capacity in the EU/EEA and the UK during the peak of the influenza season is **moderate**.
24. Environment, Science and Research Limited (ESR) issued a risk assessment summary for 20 February 2020 that determined (currently under review).
- **Importation risk.** Even with the containment measures in place in China and the border measures currently in place for arrivals from mainland China, the likelihood of one or more cases being imported into New Zealand from China was **high**.
 - Given our geographic accessibility to other countries where there are confirmed cases but only limited transmission and considering the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from outside of China was **low-moderate**.
 - **Transmission risk.** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **high**, the likelihood of sustained transmission is **moderate** and the likelihood of widespread outbreaks is **low**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
 - **Public health impact.** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of more cases in New Zealand will be **high** both for public health staff, the wider health sector and the community.
 - **Public health risk.** Now that the virus has been imported into New Zealand, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is **high**.

WHOLE OF GOVERNMENT RESPONSE New Zealand Border Response

25. The WHO does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.

26. On 02 February 2020 New Zealand implemented additional border measures to extend the travel history in the case definition for COVID-19 infection to include travel to mainland China (previously only Hubei province) and to deny entry into New Zealand to people who departed or transited through mainland China from 02 February 2020. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand. The additional border measures aim to reduce the chances of COVID-19 spreading within New Zealand, i.e. by reducing the number of potentially infected people arriving in NZ and asking those who do arrive from mainland China to self-isolate for 14 days.
27. On 2 March 2020 the New Zealand Government announced a third seven day extension of temporary border measures restricting travel by people who have left or transited through mainland China, Iran and the Diamond Princess cruise ship in the 14 days prior to boarding. The government also agreed a new set of temporary border restriction categories and added Category 1b. This new category does not have temporary travel restrictions. All people travelling to New Zealand from Northern Italy (specifically the provinces of Lombardy, Veneto and Emilia-Romagna) and the Republic of Korea are requested to undertake 14 days self-isolation and register with Healthline. People who have been in Northern Italy or Republic of Korea in the last 14 days will be requested to self-isolate for the balance of the 14-day period since they were last in those places and to register with Healthline. A map of Northern Italy with more specific details will be available on Ministry of Health website in due course.
28. Current border-related measures include:
- Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO
 - Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers
 - Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea
 - Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
 - Health advice cards are being provided to all arriving international passengers at airports.
 - Airlines have been asked to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
 - Asking travellers using E-gates if they have been in or transited mainland China in the last 14 days. This has been updated to include Iran.
 - Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China, Iran, Northern Italy and the Republic of Korea. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.

- Healthline has established a dedicated phone line for persons self-isolating to register and will be regularly checking on the welfare and wellbeing of those persons registered.
 - Registering passengers with Healthline as they arrive at airports.
 - Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.
 - Responding to reports of ill travellers.
 - Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.
29. On 03 March 2020 Korean Airlines announced the suspension of flights from Incheon to Auckland until 28 March 2020 to ensure the safety of clients. Travellers wishing to fly from the Republic of Korea to New Zealand will now need to travel via a third country, most likely Australia.
30. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure.

New Zealand Health Sector Response

31. The Ministry of Health remains the single point of truth for COVID-19.
32. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
33. The ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition (<https://www.health.govt.nz/ourwork/diseases-and-conditions/novel-coronavirus-covid-19/case-definition-2019-ncovinfection>).
34. At 0840 on 03 March 2020 the ESR reports 1 confirmed case, 155 negative results and 31 cases under investigation.

National Telehealth Service Update

35. On 02 March 2020 Healthline managed than 1,600 inbound calls – one of the highest days ever. Many callers to the helpline refuse to identify themselves. On 02 March 2020 there were 593 callers with clinical concerns about COVID-19 who did disclose some information. In addition to this, 168 callers diverted to the Healthline COVID-19 self-serve micro-site for information. 92 people pro-actively registered for self-isolation on 01 March 2020 – this excludes those who registered via the border process.
36. Of the callers concerned about Coronavirus who did disclose some information:
- 120 callers were experiencing cold or flu-like symptoms.
 - 49 were regarding people who had been outside NZ in the previous 4 weeks
 - 26 required the use of an interpreter
 - 94% received self-care advice or information

37. Details on people registered and / or in self-isolation are:
- 1,761 registered (people or households) and currently in isolation
 - 5,260 completed isolation
 - Approximately 700 additional household members in isolation or completed isolation
 - 7,720 total registrations

(See Figure 3 – 4 in the Appendices for information on self-isolation)

Welfare

38. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COIVD-19 response.
39. NEMA has convened National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies and is meeting again on 3 March. Guidance for CDEM Group Welfare Managers is being drafted. The next Psychosocial support sub-function meeting will take place on 05 March 2020.
40. An all of government factsheet has been prepared in both English and simplified Chinese to provide information on support available for people who have self-isolated and how to access it. The factsheet is available on the Ministry of Health website and has been shared with agencies and CDEM groups.

Other Country Responses

Australia

41. As at 0900 hours on 2 March 2020 there had been 27 laboratory confirmed cases of COVID-19 in Australia. Australia reported its first COVID-19 related death on 1 March 2020. A case reported from Queensland had recently travelled to Iran. On 29 February 2020 the Australian Government announced new measures in the response to the coronavirus outbreak in Iran. This includes:
- a. a travel advisory – do not travel
 - b. foreign nationals who are in Iran on or after 1 March 2020 will not be allowed to enter Australia for 14 days from the time they have left or transited through Iran
 - c. Australian citizens and permanent residents and immediate family members will be able to enter and will be required to self-isolate at home for 14 days from the day they left Iran.

Samoa

42. All travellers entering Samoa from or transit through all ports (New Zealand, Australia, Fiji, Am. Samoa, Hawaii and Tonga) are required to **undergo medical examination** by a Registered Medical Practitioner **within (3) days before ARRIVAL**. This medical clearance report is required for check-in prior to issuing of boarding passes.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 1 March 2020

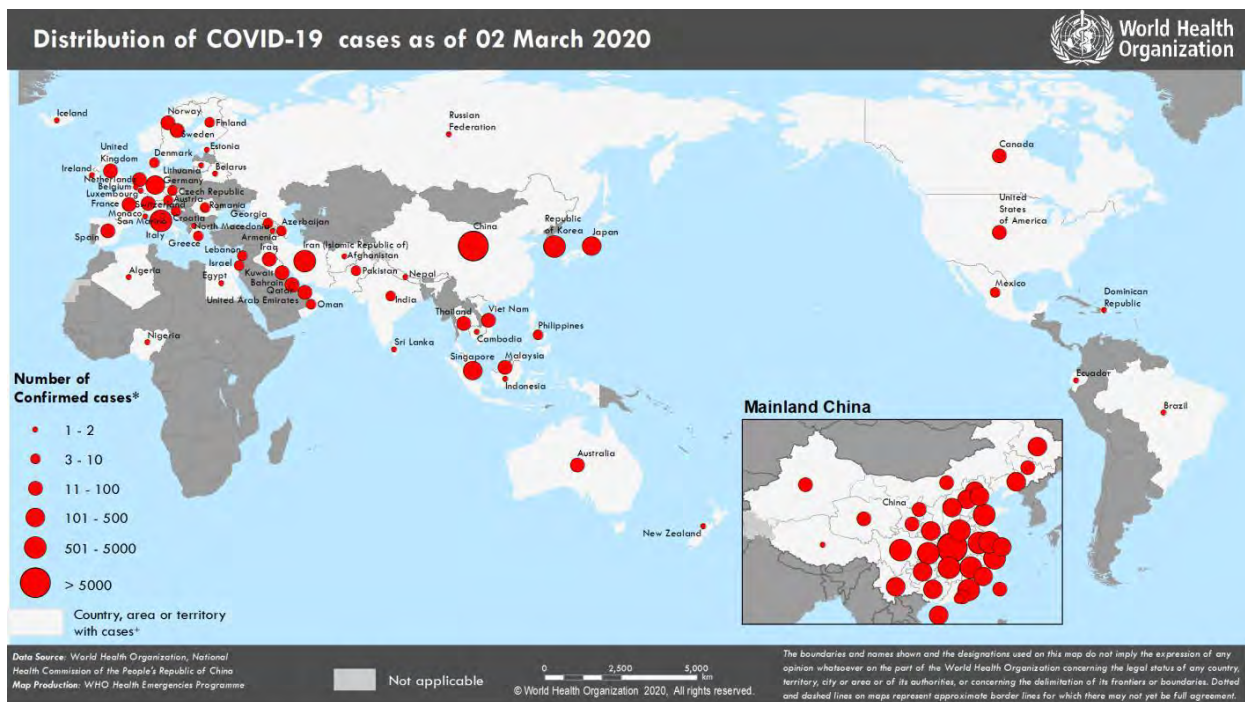


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region with complete date of reporting through 29 February 2020

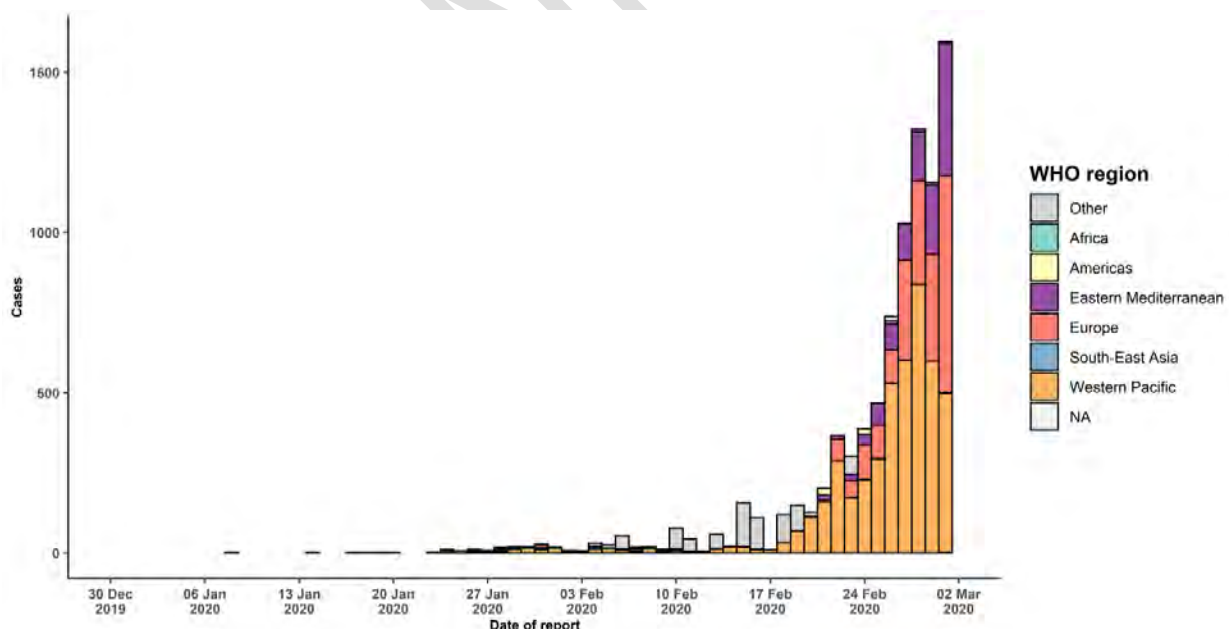


Figure 3: Healthline COVID-19 related call outcomes

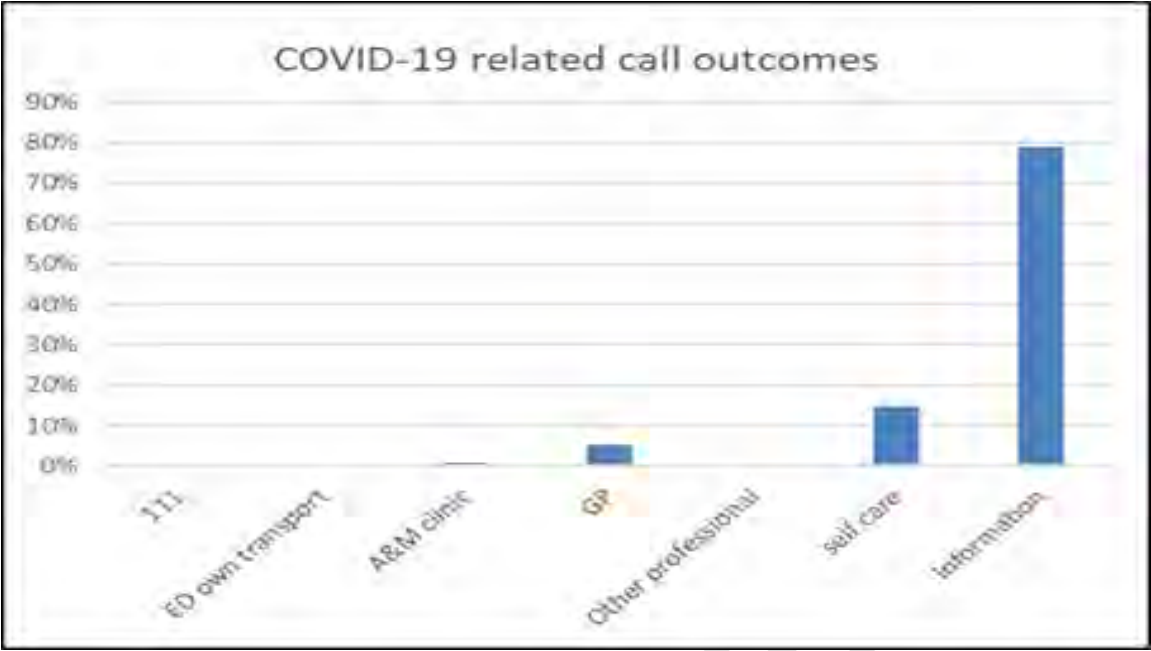
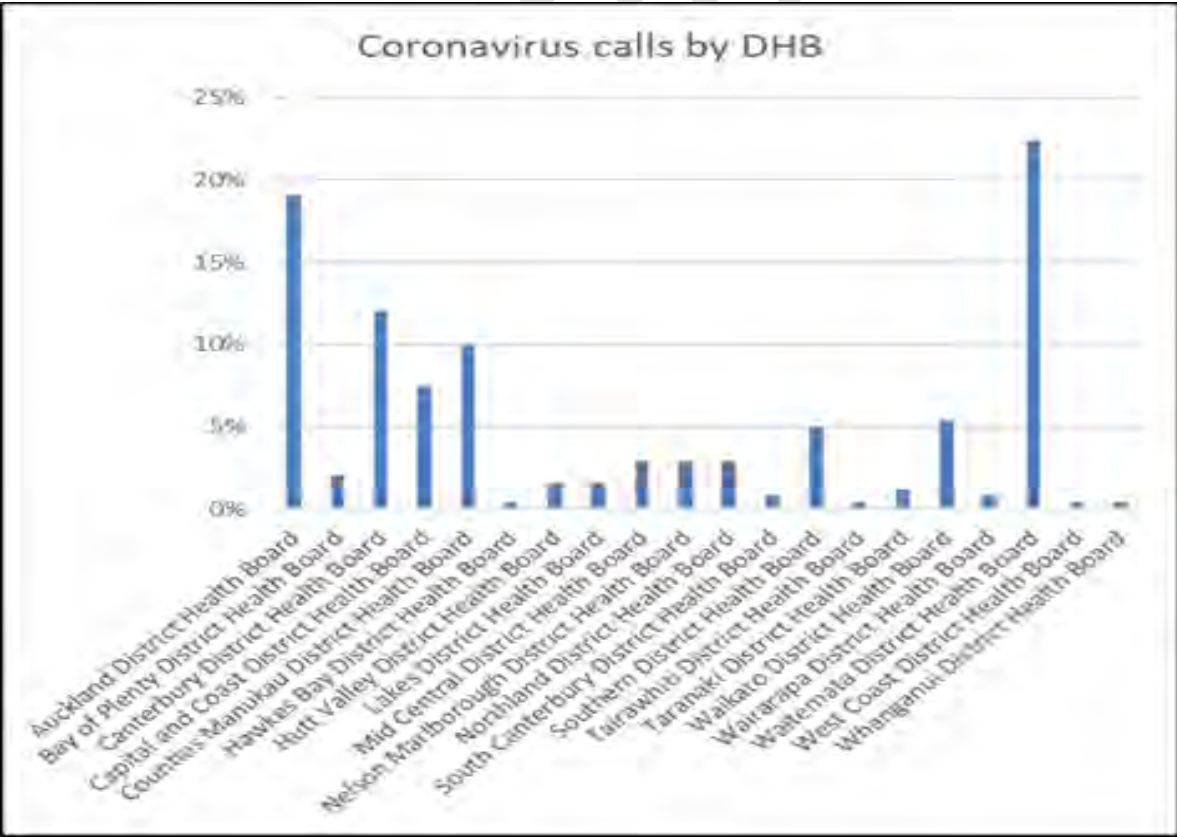


Figure 4: Healthline COVID-19 calls by DHB



NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Wednesday 04 March 2020.**

Prepared by: Christine Nolan and Martin Anderson, NHCC Intelligence

Approved by: John Hazeldine, NHCC Response Manager

ENDS

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), including those who have transited through China or Iran is that they should self-isolate for a period of 14 days. People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at 02 March 2020, 7,720 people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan) and Iran but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet

(https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Consideration / tracking for those who arrived before the border closure (from mainland China)

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 02 February 2020?

A: No.

d. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.



SITREP 44
NOVEL CORONAVIRUS COVID-19
Issued: 1300 hrs 04 March 2020
IN CONFIDENCE

New information in red text

Unless otherwise specified, all information is current as of 1300 hours 04 March 2020.

SUMMARY

1. New Zealand is in the Keep it Out phase with border management and containment measures in place.
2. An outbreak of novel coronavirus (COVID-19) continues in mainland China with the epicentre in Hubei Province. The number of confirmed cases reported in mainland China **continues to trend down**. The numbers of confirmed cases and deaths in Republic of Korea, Iran and Italy continue to rise. **There are two confirmed cases in New Zealand.**
3. Since **03 March 2020**, globally there has been an increase of **1,922** confirmed cases and **68** new deaths reported. Of the confirmed cases, there has been an increase of **1,797** cases outside of **mainland** China. In total, **77** countries have reported confirmed cases. The three main regions that have reported new cases are Western Pacific with **628** new cases, European region with **597** new cases, and the Eastern Mediterranean region with **544** new cases. **15** new cases have been reported in the Americas region. Australia has reported its first local case person to person transmission.
4. No change to the risk status as reported by the World Health Organization (WHO). On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). New Zealand's risk assessment is that the likelihood of more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high, the likelihood of sustained transmission is moderate, and the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.
5. **WHO has provided updated travel advice, details available through this link:**
https://www.who.int/ith/2019-nCoV_advice_for_international_traffic-rev/en/
6. **The significant details include advising against travel restrictions to effected countries, performing hand hygiene frequently, covering the nose and with flexed elbow or paper tissue when coughing or sneezing, refraining from touching the mouth and nose, maintaining a distance of one metre from people exhibiting symptoms, and that it is not necessary to wear a face mask if exhibiting no symptoms.**

KEY MESSAGES

5. **New Zealand now has two recorded cases of COVID-19 - we held a media stand up this morning.**

6. More than 180 tests have returned as negative.
7. Healthline is continuing to put all available resources on the frontline, which has seen unprecedented demand for its services. There were more than 2,000 calls received yesterday 3 March 2020.
8. Healthline's dedicated COVID-19 number, 0800 358 5453, is free and available 24 hours a day, 7 days a week.
9. Planning is underway now ahead of the lifting of the 14-day quarantine period at Whangaparāoa Reception Centre tomorrow. All six New Zealanders are in good spirits and showing no signs of COVID-19. Planning is underway ahead of the lifting of the 14-day quarantine period at Whangaparāoa Reception Centre on Thursday. All six New Zealanders are in good spirits and showing no signs of COVID-19.
10. As part of our continued response to COVID-19, New Zealanders are now seeing and hearing a public health campaign focused on what they can do to protect themselves, their family and whānau.
11. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
12. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
13. We continue to regularly review border restrictions and advice around any changes required.

OUTBREAK SITUATION

14. As of 03 March 2020, there are two confirmed cases of COVID-19 in New Zealand. Contact tracing protocol has been completed. Confirmation of communication with those who were potentially in close contact is underway.
15. As of 03 March 2020, there are 90,870 confirmed cases of COVID-19 reported globally, an increase of 1,922. Of the 125 new confirmed cases in mainland China 114 are from Hubei Province.
16. There are 3,112 confirmed deaths globally, 2,834 in Hubei Province, 109 in the rest of mainland China, and 169 outside mainland China. Based on the confirmed cases reported globally, the case fatality rate varies from approximately 1 percent to 4 percent.
17. There have been 10,566 confirmed cases reported outside of mainland China, an increase of 1,797. Italy has reported 2,036 confirmed COVID-19 cases (347 new cases) and 52 deaths (17 new). Iran has reported 1,501 confirmed COVID-19 cases (523 new cases) and 66 deaths (12 new). South Korea has reported a total 4,812 confirmed COVID-19 cases (600 new cases) and 28 deaths (6 new).
18. A team of WHO experts has arrived in Iran to support the COVID-19 response.
19. Eight new countries (Andorra, Jordan, Latvia, Morocco, Portugal, Saudi Arabia, Senegal and Tunisia) have reported confirmed cases of COVID-19 in the past 24 hours.

Risk Assessment – Global / Regional / National

20. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
21. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 28 February 2020 in light of developments in Italy.
 - The risk associated with COVID-19 infection for people in the EU/EEA and UK is currently considered to be **moderate**.
 - The risk of COVID-19 clusters similar to the ones in Italy in other countries in the EU/EEA and the UK, is currently considered to be **moderate to high**.
 - The risk for people travelling/resident in areas with presumed community transmission is currently **high**.
 - The risk for healthcare systems capacity in the EU/EEA and the UK during the peak of the influenza season is **moderate**.
22. Environment, Science and Research Limited (ESR) issued a risk assessment summary for 20 February 2020 that determined (currently under review).
 - **Importation risk.** Even with the containment measures in place in China and the border measures currently in place for arrivals from mainland China, the likelihood of one or more cases being imported into New Zealand from China was **high**.
 - Given our geographic accessibility to other countries where there are confirmed cases but only limited transmission and considering the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from outside of China was **low-moderate**.
 - **Transmission risk.** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **high**, the likelihood of sustained transmission is **moderate** and the likelihood of widespread outbreaks is **low**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
 - **Public health impact.** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of more cases in New Zealand will be **high** both for public health staff, the wider health sector and the community.
 - **Public health risk.** Now that the virus has been imported into New Zealand, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is **high**.

WHOLE OF GOVERNMENT RESPONSE New Zealand Border Response

23. The WHO does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
24. On 02 February 2020 New Zealand implemented additional border measures to extend the travel history in the case definition for COVID-19 infection to include travel to mainland China (previously only Hubei province) and to deny entry into New Zealand to people who departed or transited through mainland China from 02 February 2020. The exceptions to

this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand. The additional border measures aim to reduce the chances of COVID-19 spreading within New Zealand, i.e. by reducing the number of potentially infected people arriving in NZ and asking those who do arrive from mainland China to self-isolate for 14 days.

25. On 2 March 2020 the New Zealand Government announced a third seven-day extension of temporary border measures restricting travel by people who have left or transited through mainland China, Iran and the Diamond Princess cruise ship in the 14 days prior to boarding. The government also agreed a new set of temporary border restriction categories and added Category 1b. This new category does not have temporary travel restrictions. All people travelling to New Zealand from Northern Italy (specifically the provinces of Lombardy, Veneto and Emilia-Romagna) and the Republic of Korea are requested to undertake 14 days self-isolation and register with Healthline. People who have been in Northern Italy or Republic of Korea in the last 14 days will be requested to self-isolate for the balance of the 14-day period since they were last in those places and to register with Healthline. A map of Northern Italy with more specific details will be available on Ministry of Health website in due course.

26. Current border-related measures include:

- Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO
- Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers
- Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea
- Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
- Health advice cards are being provided to all arriving international passengers at airports.
- Airlines have been asked to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
- Asking travellers using E-gates if they have been in or transited mainland China in the last 14 days. This has been updated to include Iran.
- Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China, Iran, Northern Italy and the Republic of Korea. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.
- Healthline has established a dedicated phone line for persons self-isolating to register and will be regularly checking on the welfare and wellbeing of those persons registered.
- Registering passengers with Healthline as they arrive at airports.

- Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.
 - Responding to reports of ill travellers.
 - Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.
27. On 03 March 2020, the New Zealand Customs Service data reported one flight arriving from mainland China with 46 passengers. On 03 March 2020 Korean Airlines announced the suspension of flights from Incheon to Auckland until 28 March 2020 to ensure the safety of clients. Travellers wishing to fly from the Republic of Korea to New Zealand will now need to travel via a third country, most likely Australia. One final Korean Airlines flight is arriving into Auckland airport today 3 March 2020.
28. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure.

New Zealand Health Sector Response

29. The Ministry of Health remains the single point of truth for COVID-19.
30. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
31. The ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition
- <https://www.health.govt.nz/ourwork/diseases-and-conditions/novel-coronavirus-covid19/case-definition-2019-ncovinfection>.
32. At 0900 on 04 March 2020 the ESR reports 2 confirmed cases, 181 negative results and 19 cases under investigation.

National Telehealth Service Update

33. On 03 March 2020 Healthline managed than 2,000 inbound calls – the highest day ever. Many callers to the helpline refuse to identify themselves. On 03 March 2020 there were 593 callers with clinical concerns about COVID-19 who did disclose some information. In addition to this, 168 callers diverted to the Healthline COVID-19 self-serve micro-site for information. 92 people pro-actively registered for self-isolation on 01 March 2020 – this excludes those who registered via the border process.
34. Of the callers concerned about Coronavirus who did disclose some information:
- 120 callers were experiencing cold or flu-like symptoms.
 - 49 were regarding people who had been outside NZ in the previous 4 weeks
 - 26 required the use of an interpreter
 - 94% received self-care advice or information.

35. Details on people registered and / or in self-isolation are:

- 1,662 registered (people or households) and currently in isolation
- 5,388 completed isolation
- 7,750 total registrations.

(See Figure 3 – 4 in the Appendices for information on self-isolation)

Welfare

36. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
37. NEMA has convened National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. **The NWCG met on 3 March and is undertaking further scenario-based planning on 4 March.** Guidance for CDEM Group Welfare Managers is being drafted. The next Psychosocial support sub-function meeting will take place on 05 March 2020.
38. An all of government factsheet has been prepared in both English and simplified Chinese to provide information on support available for people who have self-isolated and how to access it. **Further translations are in progress.** The factsheet is available on the Ministry of Health website and has been shared with agencies and CDEM groups.

Other Country Responses

Australia

39. As at 0900 hours on 3 March 2020 there had been 38 laboratory confirmed cases of COVID-19 in Australia. Australia reported its first COVID -19 related death on 1 March 2020. A case reported from Queensland had recently travelled to Iran.

On 29 February 2020 the Australian Government announced new measures in the response to the COVID -19 outbreak in Iran. This includes:

- a. a travel advisory – do not travel
- b. foreign nationals who are in Iran on or after 1 March 2020 will not be allowed to enter Australia for 14 days from the time they have left or transited through Iran
- c. Australian citizens and permanent residents and immediate family members will be able to enter and will be required to self-isolate at home for 14 days from the day they left Iran.

Samoa

40. All travellers entering Samoa from or transit through all ports (New Zealand, Australia, Fiji, Am. Samoa, Hawaii and Tonga) are required to **undergo medical examination** by a Registered Medical Practitioner **within (3) days before ARRIVAL**. This medical clearance report is required for check-in prior to issuing of boarding passes.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 1 March 2020

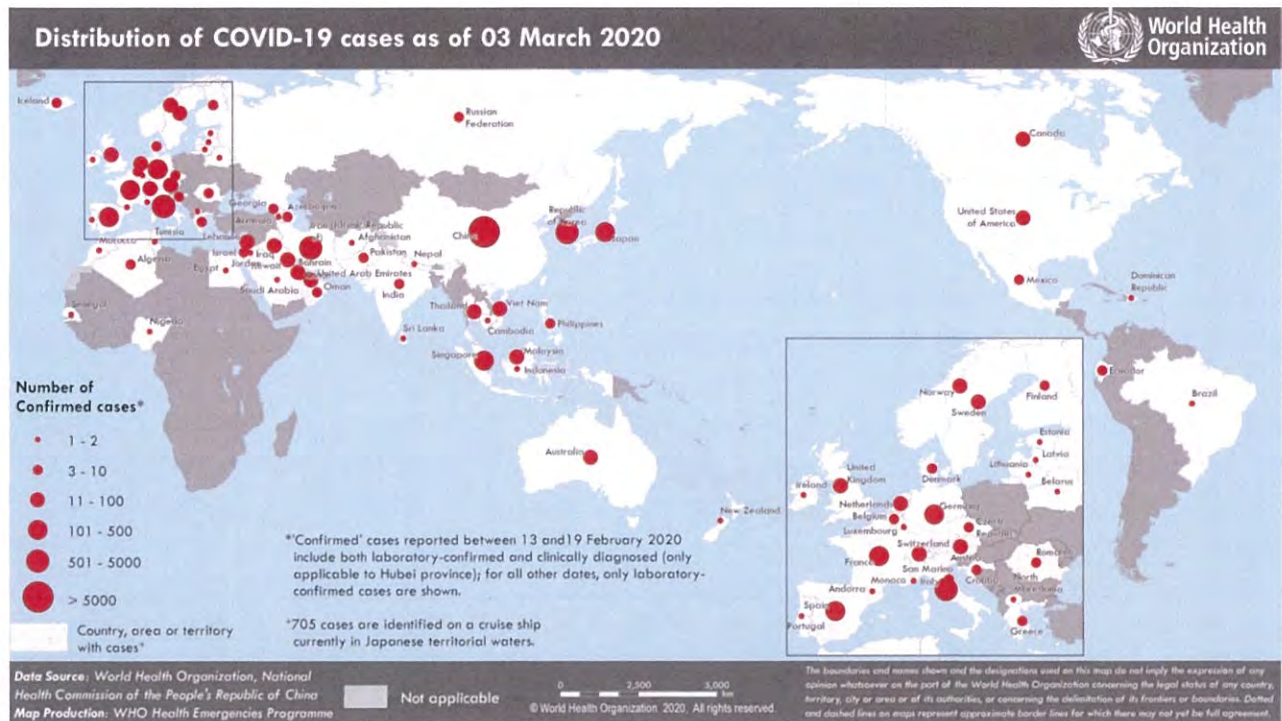


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region with complete date of reporting through 29 February 2020

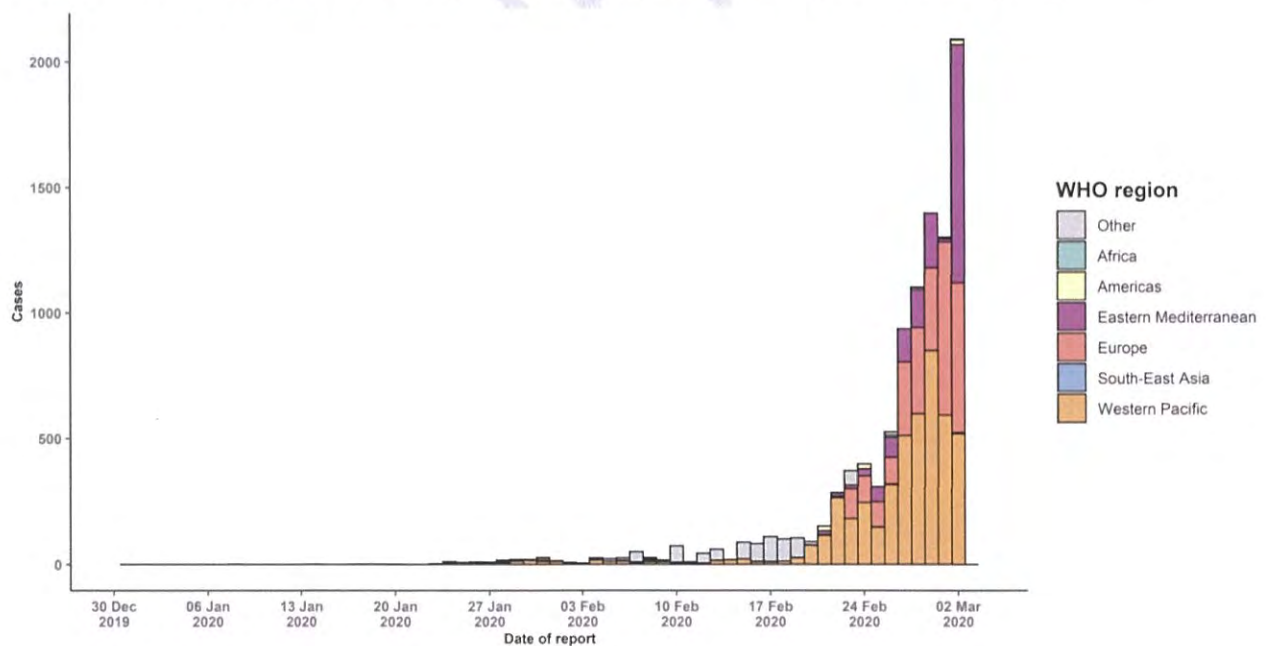
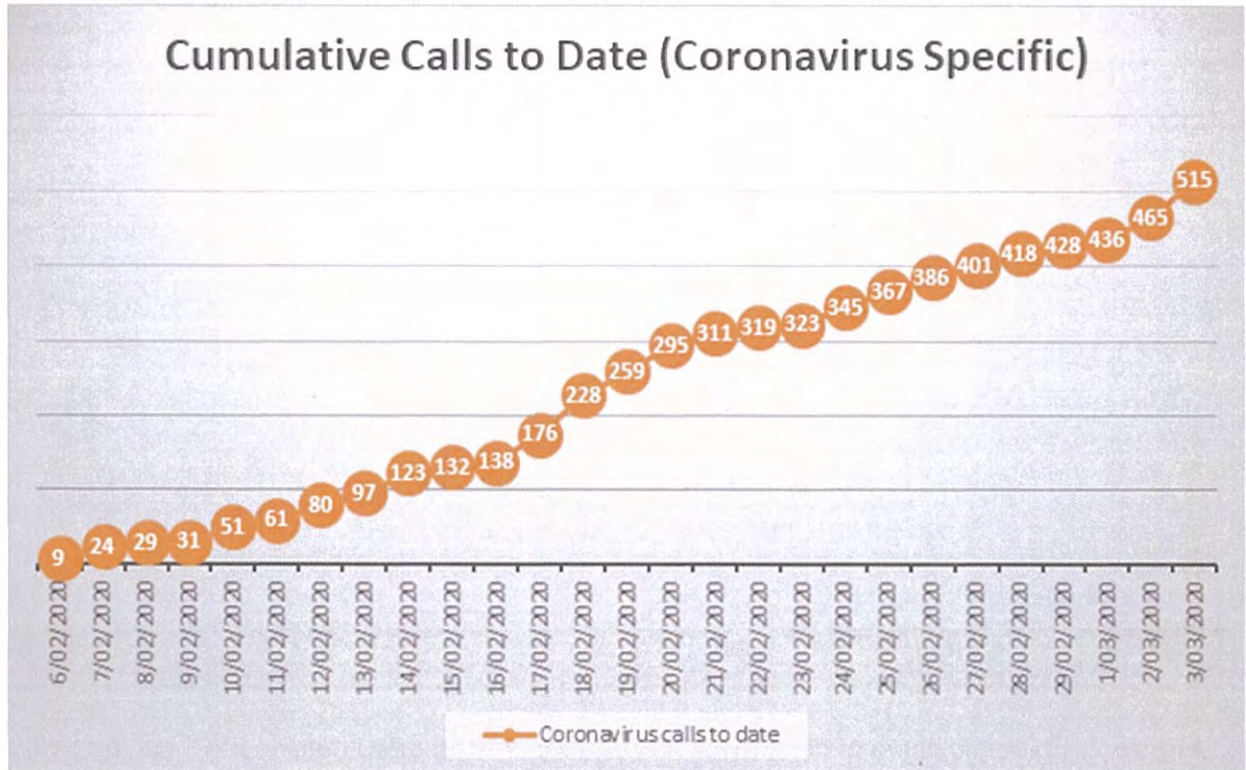


Figure 3: Healthline COVID-19 related call outcomes

Figure 4: Healthline COVID-19 calls by DHB

Figure 5: Government Helpline Reporting



NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Thursday 05 March 2020.**

Prepared by: Christine Nolan and Martin Anderson, NHCC Intelligence

Approved by: John Hazeldine, NHCC Response Manager

ENDS

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, **northern Italy and South Korea** (including those who have transited through China, Iran, **northern Italy and South Korea**) is that they should self-isolate for a period of 14 days. People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at 03 March 2020, 7,750 people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet

(https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Consideration / tracking for those who arrived before the border closure (from mainland China)

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 02 February 2020?

A: No.

d. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.

IN CONFIDENCE



SITREP 45

NOVEL CORONAVIRUS COVID-19

Issued: **1300 hrs 05 March 2020**

IN CONFIDENCE

New information in red text

Unless otherwise specified, all information is current as of **1300 hours 05 March 2020**.

SUMMARY

1. New Zealand is in the Keep it Out phase with border management and containment measures in place.
2. An outbreak of novel coronavirus (COVID-19) continues in mainland China with the epicentre in Hubei Province. The number of confirmed cases reported in mainland China **continues to trend down**. The numbers of confirmed cases and deaths in Republic of Korea, Iran and Italy continue to rise. **There are three confirmed cases in New Zealand**.
3. Since **04 March 2020**, globally there has been an increase of **2,223** confirmed cases and **86** new deaths reported. Of the confirmed cases, there has been an increase of **2,104** cases outside of **mainland** China. In total, **80** countries **and territories** have reported confirmed cases. The three main regions that have reported new cases are Western Pacific with **565** new cases, European region with **634** new cases, and the Eastern Mediterranean region with **853** new cases. **50** new cases have been reported in the Americas region. Australia has reported its first local case person to person transmission.
4. No change to the risk status as reported by the World Health Organization (WHO). On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). New Zealand's risk assessment is that the likelihood of more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high, the likelihood of sustained transmission is moderate, and the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.
5. WHO has provided updated travel advice, details available through this link: https://www.who.int/ith/2019-nCoV_advice_for_international_traffic-rev/en/
6. The significant details include advising against travel restrictions to affected countries, performing hand hygiene frequently, covering the nose and with flexed elbow or paper tissue when coughing or sneezing, refraining from touching the mouth and nose, maintaining a distance of one metre from people exhibiting symptoms, and that it is not necessary to wear a face mask if exhibiting no symptoms.

KEY MESSAGES

7. **New Zealand now has three recorded cases of COVID-19: a media statement was scheduled for 1300 hrs on 5 March 2020.**

8. 193 tests have returned as negative.
9. Healthline is continuing to put all available resources on the frontline, which has seen unprecedented demand for its services. There were more than 2,200 calls received yesterday 4 March 2020.
10. Healthline's dedicated COVID-19 number, 0800 358 5453, is free and available 24 hours a day, 7 days a week.
11. The 14-day quarantine period at Whangaparāoa Reception Centre was lifted today. All six New Zealanders are in good spirits and showing no signs of COVID-19 and leave the facility today.
12. As part of our continued response to COVID-19, there is a public health campaign focused on what they can do to protect themselves, their family and whānau.
13. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
14. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
15. We continue to regularly review border restrictions.

OUTBREAK SITUATION

16. As of 05 March 2020, there are three confirmed cases of COVID-19 in New Zealand. Confirmation of communication with those who were potentially in close contact is underway.
17. As of 04 March 2020, there are 93,090 confirmed cases of COVID-19 reported globally, an increase of 2,233. Of the 119 new confirmed cases in mainland China 115 are from Hubei Province.
18. There are 3,198 confirmed deaths globally, 2,871 in Hubei Province, 110 in the rest of mainland China, and 217 outside mainland China. Based on the confirmed cases reported globally, the case fatality rate varies from approximately 1 percent to 4 percent.
19. There have been 12,820 confirmed cases reported outside of mainland China, an increase of 2,104. Italy has reported 2,502 confirmed COVID-19 cases (466 new cases) and 80 deaths (28 new). Iran has reported 2,336 confirmed COVID-19 cases (835 new cases) and 77 deaths (11 new). South Korea has reported a total 5,328 confirmed COVID-19 cases (516 new cases) and 32 deaths (4 new).
20. Four new countries (Argentina, Chile, Poland and Ukraine) have reported confirmed cases of COVID-19 in the past 24 hours.

Risk Assessment – Global / Regional / National

21. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
22. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 2 March 2020 in light of developments in Italy.

- The risk associated with COVID-19 infection for people in the EU/EEA and UK is currently considered to be **moderate to high**.
- The risk of COVID-19 clusters similar to the ones in Italy in other countries in the EU/EEA and the UK, is currently considered to be **moderate to high**.
- The risk for people travelling/resident in areas with presumed community transmission is currently **high**.
- The risk for healthcare systems capacity in the EU/EEA and the UK during the peak of the influenza season is **moderate**.

23. Environment, Science and Research Limited (ESR) issued a risk assessment summary for 20 February 2020 that determined the following (currently under review).

- **Importation risk.** Even with the containment measures in place in China and the border measures currently in place for arrivals from mainland China, the likelihood of one or more cases being imported into New Zealand from China was **high**.
- Given our geographic accessibility to other countries where there are confirmed cases but only limited transmission and considering the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from outside of China was **moderate**.
- **Transmission risk.** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **high**, the likelihood of sustained transmission is **moderate** and the likelihood of widespread outbreaks is **low**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
- **Public health impact.** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of more cases in New Zealand will be **high** both for public health staff, the wider health sector and the community.
- **Public health risk.** Now that the virus has been imported into New Zealand, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is **high**.

WHOLE OF GOVERNMENT RESPONSE New Zealand Border Response

24. The **WHO** does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
25. New Zealand has implemented temporary border measures to reduce the chances of COVID-19 spreading within New Zealand. People who have left or transited through mainland China, Iran and the Diamond Princess cruise ship (Category 1a countries) in the 14 days prior to boarding are denied entry into New Zealand. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand.
26. Countries in Category 1b are northern Italy (specifically the provinces of Lombardy, Veneto and Emilia-Romagna) and the Republic of Korea. People who have travelled in these countries in the past 14 days may enter New Zealand but are requested to undertake 14

days self-isolation and register with Healthline. The additional border measures aim to reduce the chances of COVID-19 spreading within New Zealand, i.e. by reducing the number of potentially infected people arriving in NZ and asking those who do arrive from mainland China to self-isolate for 14 days. A map of Northern Italy with more specific details will be available on Ministry of Health website in due course.

27. Current border-related measures include the following:

- Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO.
- Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers.
- Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea.
- Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
- **Arranging for St John Ambulance to be present at Auckland International Airport when international flights are arriving. Once arrangements are confirmed, paramedics will be available to check any unwell travellers reported from arriving aircraft, to take temperatures of any passengers referred by border officials and will also be present for travellers to speak to if they have concerns about their health. This will enhance the health presence already at the airport.**
- Providing health advice cards to all arriving international passengers at airports.
- Asking airlines to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
- Asking travellers using E-gates if they have been in or transited mainland China, Iran, **northern Italy or the Republic of Korea** in the last 14 days.
- Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China, Iran, Northern Italy and the Republic of Korea. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.
- Establishing a dedicated Healthline phone line for persons self-isolating to register and Healthline will be regularly checking on the welfare and wellbeing of those persons registered.
- Registering passengers with Healthline as they arrive at airports.
- Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.
- Responding to reports of ill travellers.
- Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.

28. On 04 March 2020, the New Zealand Customs Service data reported two flights arriving from mainland China with 60 passengers.

29. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate

the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure.

New Zealand Health Sector Response

30. The Ministry of Health remains the single point of truth for COVID-19.
31. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
32. The ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition

(<https://www.health.govt.nz/ourwork/diseases-and-conditions/novel-coronavirus-covid19/case-definition-2019-ncovinfection>).
33. At 0900 on 05 March 2020 the ESR reports 3 confirmed cases, 193 negative results and 8 cases under investigation.

National Telehealth Service Update

34. On 04 March 2020 Healthline managed than 2,200 inbound calls. Many callers to the helpline refuse to identify themselves. On 04 March 2020 there were 625 callers with clinical concerns about COVID-19 who did disclose some information. In addition to this, 178 callers diverted to the Healthline COVID-19 self-serve micro-site for information. 86 people pro-actively registered for self-isolation on 01 March 2020 – this excludes those who registered via the border process.
35. Of the callers concerned about Coronavirus who did disclose some information:
 - 122 callers were experiencing cold or flu-like symptoms.
 - 271 were regarding people who had been outside NZ in the previous 4 weeks
 - 37 required the use of an interpreter
 - 93% received self-care advice or information.
36. Details on people registered and / or in self-isolation are:
 - 2,011 registered (people or households) and currently in isolation
 - 5,523 completed isolation
 - 8,234 total registrations.

(See Figure 3 – 4 in the Appendices for information on self-isolation)

Welfare

37. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.

38. NEMA has convened National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. The NWCG met on 4 March to confirm the information reporting requirements and process, agree operational processes, and begin long term welfare planning for COVID-19. Guidance for CDEM Group Welfare Managers is being drafted. The first advice document, focusing on shelter & accommodation, will be shared with Group Welfare Managers and District Health Boards. The Psychosocial support sub-function meeting will take place on 05 March 2020.
39. An all of government factsheet has been prepared in both English and simplified Chinese to provide information on support available for people who have self-isolated and how to access it. Further translations are in progress. The factsheet is available on the Ministry of Health website and has been shared with agencies and CDEM groups.

Other Country Responses

Australia

40. As at 1800 hours on 4 March 2020 there had been 45 laboratory confirmed cases of COVID-19 in Australia. Australia reported its first COVID -19 related death on 1 March 2020. A case reported from Queensland had recently travelled to Iran.

On 29 February 2020 the Australian Government announced new measures in the response to the COVID -19 outbreak in Iran. This includes:

- a. a travel advisory – do not travel
- b. foreign nationals who are in Iran on or after 1 March 2020 will not be allowed to enter Australia for 14 days from the time they have left or transited through Iran
- c. Australian citizens and permanent residents and immediate family members will be able to enter and will be required to self-isolate at home for 14 days from the day they left Iran.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 1 March 2020

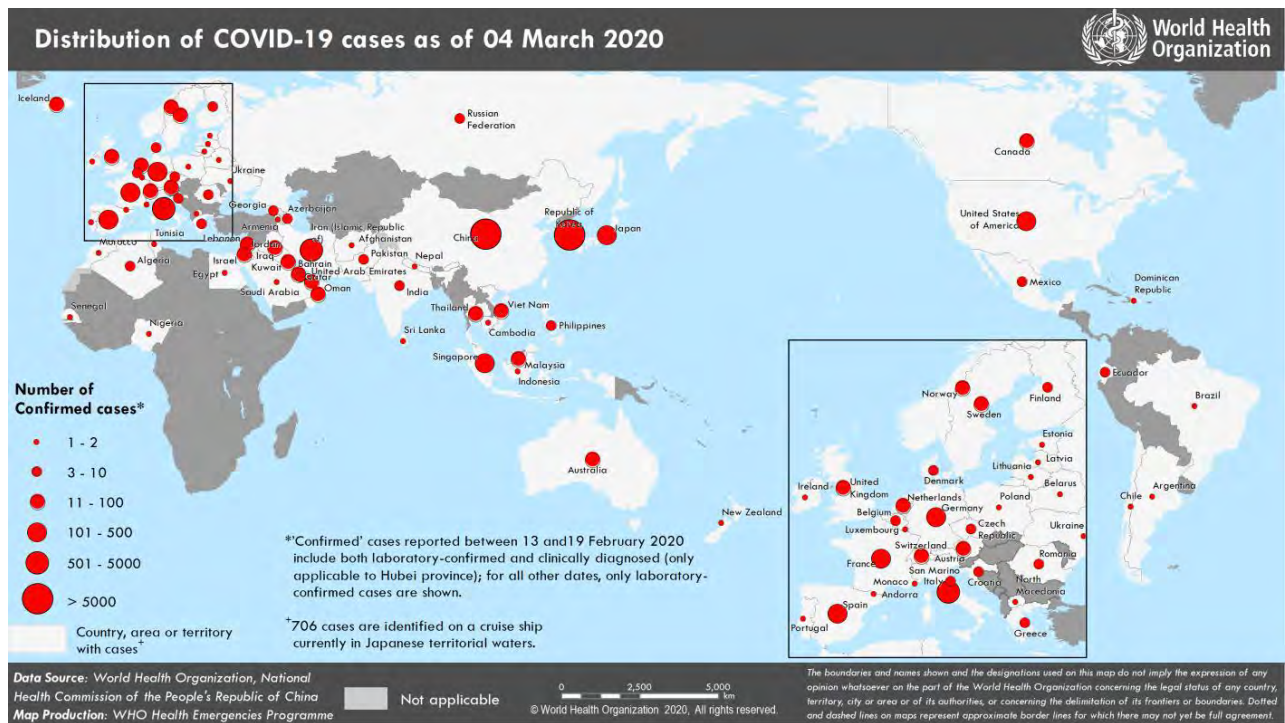


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region with complete date of reporting through 03 March 2020

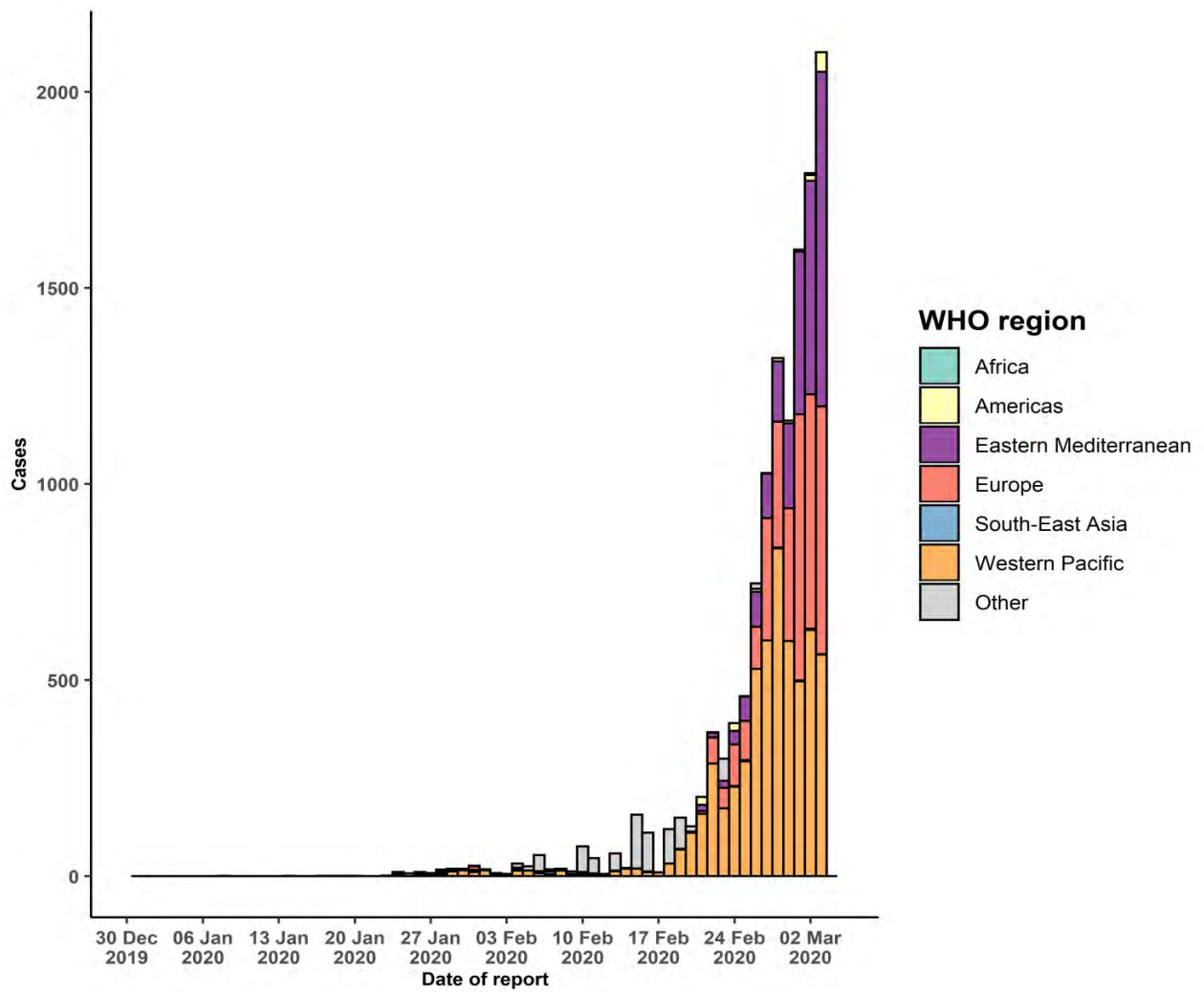


Figure 3: Healthline COVID-19 related call outcomes

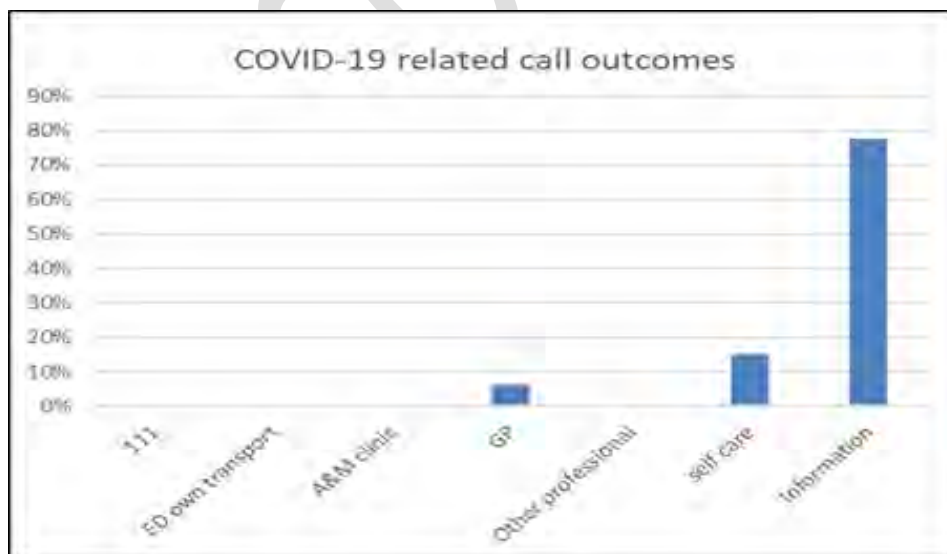
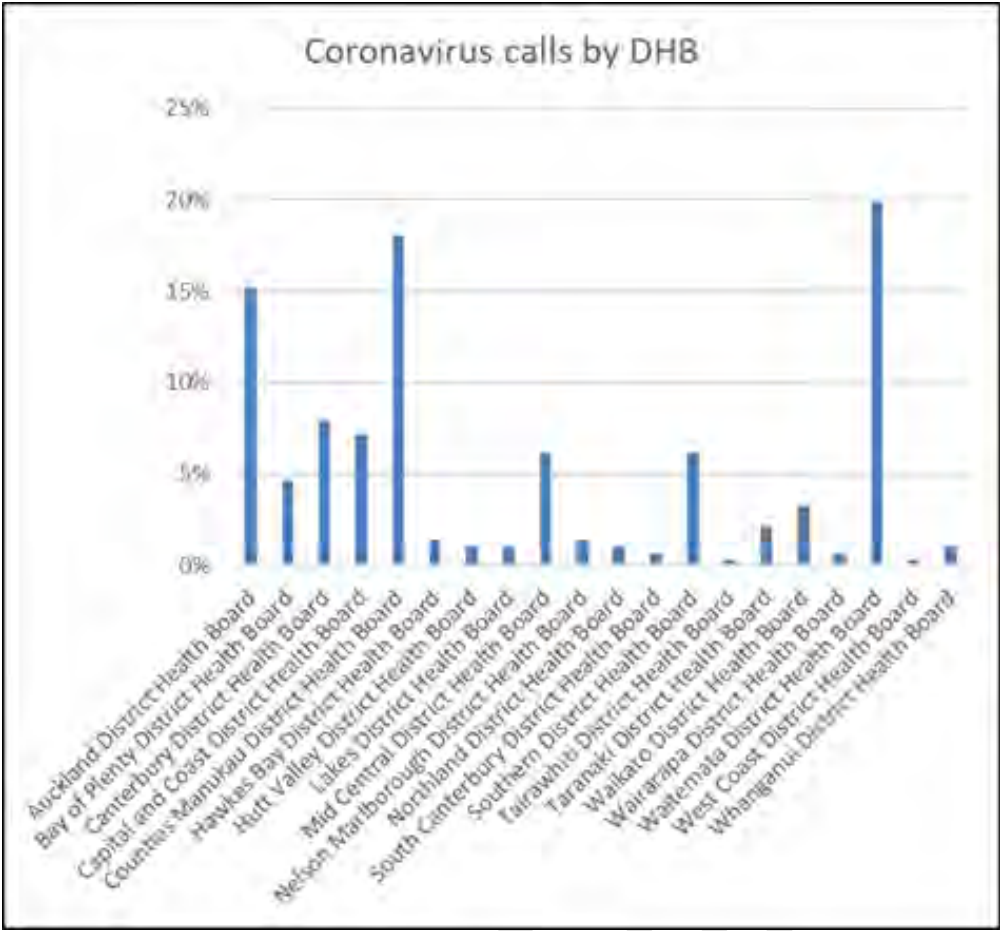


Figure 4: Healthline COVID-19 calls by DHB



NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Friday 06 March 2020.**

Prepared by: Christine Nolan and Martin Anderson, NHCC Intelligence

Approved by: John Hazeldine, NHCC Response Manager

ENDS

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14

days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, **northern Italy and South Korea** (including those who have transited through China, Iran, **northern Italy and South Korea**) is that they should self-isolate for a period of 14 days. People are asked to register their details with Healthline on **0800 358 5453** so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at **04 March** 2020, **8,234** people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet (https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Consideration / tracking for those who arrived before the border closure (from mainland China)

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 02 February 2020?

A: No.

d. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.

IN CONFIDENCE

IN CONFIDENCE



SITREP 46
NOVEL CORONAVIRUS COVID-19
Issued: 1300 hrs 06 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 06 March 2020.

SUMMARY

1. New Zealand is in the Keep it Out phase with border management and containment measures in place.
2. An outbreak of novel coronavirus (COVID-19) continues in mainland China with the epicentre in Hubei Province. The number of confirmed cases reported in mainland China has been trending down for the last two weeks though there was a slight increase in reported cases in the last 24 hours. The numbers of confirmed cases and deaths in Republic of Korea, Iran and Italy continue to rise. **There are four confirmed cases in New Zealand.**
3. **As reported on 05 March 2020**, globally there has been an increase of **2,241** confirmed cases and **84** new deaths reported. Of the confirmed cases, there has been an increase of **2,102** cases outside of **mainland** China. In total, **85** countries and territories have reported confirmed cases. The three main regions that have reported new cases are Western Pacific with **494** new cases, European region with **943** new cases, and the Eastern Mediterranean region with **598** new cases. **22** new cases have been reported in the Americas region.
4. No change to the risk status as reported by the World Health Organization (WHO). On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). New Zealand's risk assessment is that the likelihood of more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high, the likelihood of sustained transmission is moderate, and the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.
5. WHO has provided updated travel advice, details available through this link: https://www.who.int/ith/2019-nCoV_advice_for_international_traffic-rev/en/

6. The significant details include advising against travel restrictions to affected countries, performing hand hygiene frequently, covering the nose and with flexed elbow or paper tissue when coughing or sneezing, refraining from touching the mouth and nose, maintaining a distance of one metre from people exhibiting symptoms, and that it is not necessary to wear a face mask if exhibiting no symptoms.

KEY MESSAGES

7. We have now confirmed a fourth COVID-19 case and tests continue to be carried out daily. This positive result is for a New Zealand citizen in his 30s, the partner of the second case announced earlier this week.
8. Immediate details of the case history of the Auckland couple, who recently arrived home from northern Italy, were outlined on Tuesday. Contact tracing is underway and close contacts are already in self-isolation.
9. More than 200 tests have returned as negative.
10. The quarantine at Whangaparāoa Reception Centre has now been lifted. All six New Zealanders repatriated from the Diamond Princess cruise ship have undergone their final health checks; they are all well and have left the centre.
11. Healthline's dedicated COVID-19 number, 0800 358 5453, is free and available 24 hours a day, 7 days a week.
12. Healthline's latest advice shows 5,648 people have now completed self-isolation, while 2,031 people (or households) are currently registered as being in self-isolation.
13. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
14. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
15. We continue to regularly review border restrictions.

OUTBREAK SITUATION

16. As of 06 March 2020, there are four confirmed cases of COVID-19 in New Zealand. Confirmation of communication with those who were potentially in close contact is underway.
17. As reported on 05 March 2020, there are 95,333 confirmed cases of COVID-19 reported globally, an increase of 2,241. Of the 139 new confirmed cases in mainland China 134 are from Hubei Province.

18. As reported on 05 March 2020, there are 3,282 confirmed deaths globally, 2,902 in Hubei Province, 110 in the rest of mainland China, and 270 outside mainland China. Based on the confirmed cases reported globally, the case fatality rate varies from approximately 1 percent to 4 percent.
19. As reported on 05 March 2020, there have been 14,924 confirmed cases reported outside of mainland China, an increase of 2,254. Italy has reported 3,089 confirmed COVID-19 cases (587 new cases) and 107 deaths (27 new). Iran has reported 2,922 confirmed COVID-19 cases (586 new cases) and 92 deaths (15 new). South Korea has reported a total 5,766 confirmed COVID-19 cases (438 new cases) and 35 deaths (3 new).
20. As reported on 05 March 2020, five new countries and territories (Bosnia and Herzegovina, Gibraltar, Hungary, Slovenia and occupied Palestinian territory) have reported confirmed cases of COVID-19 in the past 24 hours.

Risk Assessment – Global / Regional / National

21. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
22. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 2 March 2020 in light of developments in Italy.
 - The risk associated with COVID-19 infection for people in the EU/EEA and UK is currently considered to be **moderate to high**.
 - The risk of COVID-19 clusters similar to the ones in Italy in other countries in the EU/EEA and the UK, is currently considered to be **moderate to high**.
 - The risk for people travelling/resident in areas with presumed community transmission is currently **high**.
 - The risk for healthcare systems capacity in the EU/EEA and the UK during the peak of the influenza season is **moderate**.
23. Environment, Science and Research Limited (ESR) issued a risk assessment summary on 02 March 2020 that determined the following (currently under review).

Risk Summary:

This assessment is undertaken based on the information available on 02 March 2020. This is a rapidly evolving situation and there is currently limited information available to inform this risk assessment. Therefore, the level of uncertainty is high, and this assessment takes a precautionary approach.

- **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains **high**.

- Given the daily increase in countries reporting cases and the number of countries reporting limited transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently **moderate**. If transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
- **Transmission risk:** Based on the current global situation and on the available evidence, including evidence of pre-symptomatic spread and super spreader events, the likelihood of limited transmission in New Zealand is HIGH, the likelihood of sustained transmission is **moderate**, and the likelihood of widespread outbreaks is **low**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
- **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **high** both for public health staff, the wider health sector and the community.
- **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **high**.

WHOLE OF GOVERNMENT RESPONSE New Zealand Border Response

24. The **WHO** does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
25. New Zealand has implemented temporary border measures to reduce the chances of COVID-19 spreading within New Zealand. People who have left or transited through mainland China, Iran and the Diamond Princess cruise ship (Category 1a countries) in the 14 days prior to boarding are denied entry into New Zealand. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand.
26. Countries in Category 1b are northern Italy (specifically the provinces of Lombardy, Veneto and Emilia-Romagna) and the Republic of Korea. People who have travelled in these countries in the past 14 days may enter New Zealand but are requested to undertake 14 days self-isolation and register

with Healthline. The additional border measures aim to reduce the chances of COVID-19 spreading within New Zealand, i.e. by reducing the number of potentially infected people arriving in NZ and asking those who do arrive from mainland China to self-isolate for 14 days. A map of Northern Italy with more specific details will be available on Ministry of Health website in due course.

27. Current border-related measures include the following:

- Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO.
- Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers.
- Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea.
- Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
- Arranging for St John Ambulance to be present at Auckland International Airport when international flights are arriving. Once arrangements are confirmed, paramedics will be available to check any unwell travellers reported from arriving aircraft, to take temperatures of any passengers referred by border officials and will also be present for travellers to speak to if they have concerns about their health. This will enhance the health presence already at the airport.
- Providing health advice cards to all arriving international passengers at airports.
- Asking airlines to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
- Asking travellers using E-gates if they have been in or transited mainland China, Iran, northern Italy or the Republic of Korea in the last 14 days.
- Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China, Iran, Northern Italy and the Republic of Korea. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.
- Establishing a dedicated Healthline phone line for persons self-isolating to register and Healthline will be regularly checking on the welfare and wellbeing of those persons registered.
- Registering passengers with Healthline as they arrive at airports.
- Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.

- Responding to reports of ill travellers.
 - Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.
28. On **05 March 2020**, the New Zealand Customs Service data reported **no** flights arriving from mainland China.
29. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure.

New Zealand Health Sector Response

30. The Ministry of Health remains the single point of truth for COVID-19.
31. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
32. The ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
33. At **0800** on **06 March 2020** the ESR reports **4 confirmed cases, 1 probable case, 212 negative results and 13 cases under investigation**. Note that **probable is not a new category, it is the first time a case meets the criteria for reporting this category**.

National Telehealth Service Update

34. On **05 March 2020** Healthline managed more than **2,500** inbound calls. **There were 254 calls to the registration line**. Many callers seeking information do not wish to disclose any information about themselves. On **05 March 2020** there were **622** callers with clinical concerns about COVID-19 who disclosed some information. **192** callers diverted to the Healthline COVID-19 website for information. **86** people pro-actively registered for self-isolation on 01 March 2020 – this excludes those who registered via the border process.
35. Of the callers concerned about Coronavirus who did disclose some information:

- 145 callers were experiencing cold or flu-like symptoms
- 223 (36%) were regarding people who had been outside NZ in the previous 4 weeks
- 34 required the use of an interpreter
- 89% received self-care advice or information.

36. Details on people registered and / or in self-isolation are:

- 2,031 registered (people or households) and currently in isolation (includes an estimated 100 arrival cards not received or keyed)
- 5,648 completed isolation
- 8,399 total registrations.

See Figures 3 and 4 in the Appendices for information on self-isolation.

Welfare

37. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
38. NEMA has convened National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. The NWCG met on 4 March to confirm the information reporting requirements and process, agree operational processes, and begin long term welfare planning for COVID-19. Guidance for CDEM Group Welfare Managers is being drafted. The first advice document, focusing on shelter & accommodation, will be shared with CDEM Groups and District Health Boards. The Psychosocial support sub-function met on 05 March 2020 and will continue to meet fortnightly. Ministry of Health will encourage DHB Psychosocial Support sub-function over the coming week.
39. An all of government factsheet has been prepared in both English and simplified Chinese to provide information on support available for people who have self-isolated and how to access it. Further translations are in progress. The factsheet is available on the Ministry of Health website and has been shared with agencies and CDEM groups.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 5 March 2020

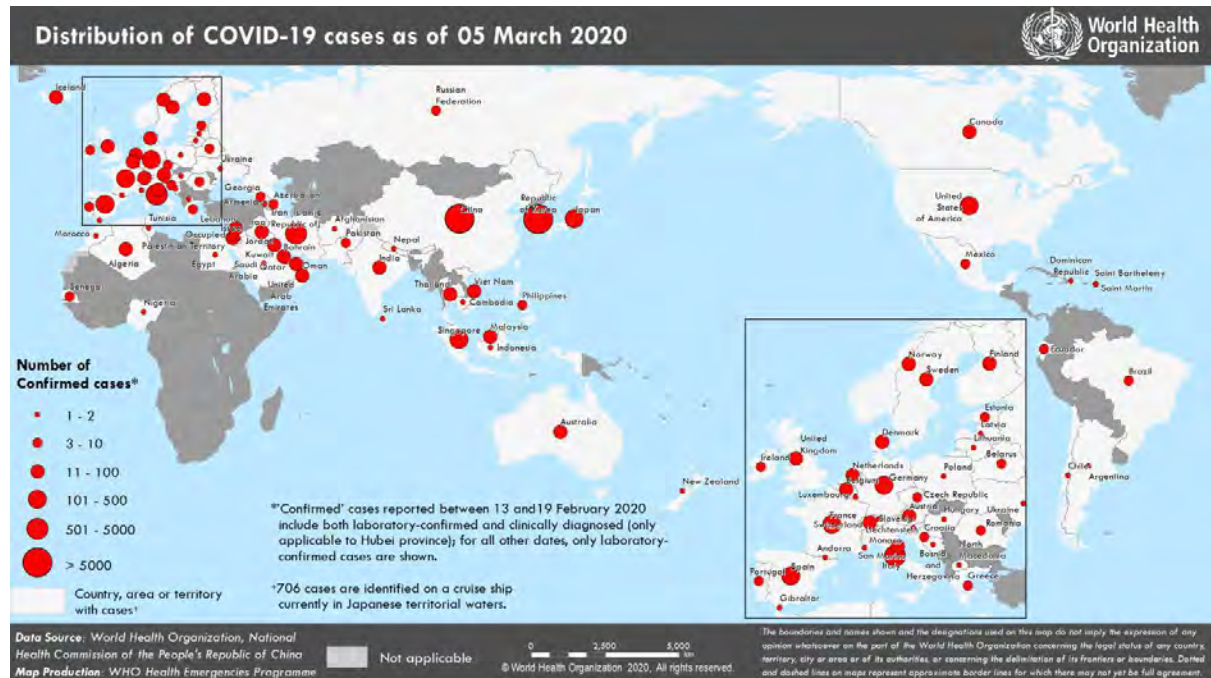


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region with complete date of reporting through 04 March 2020

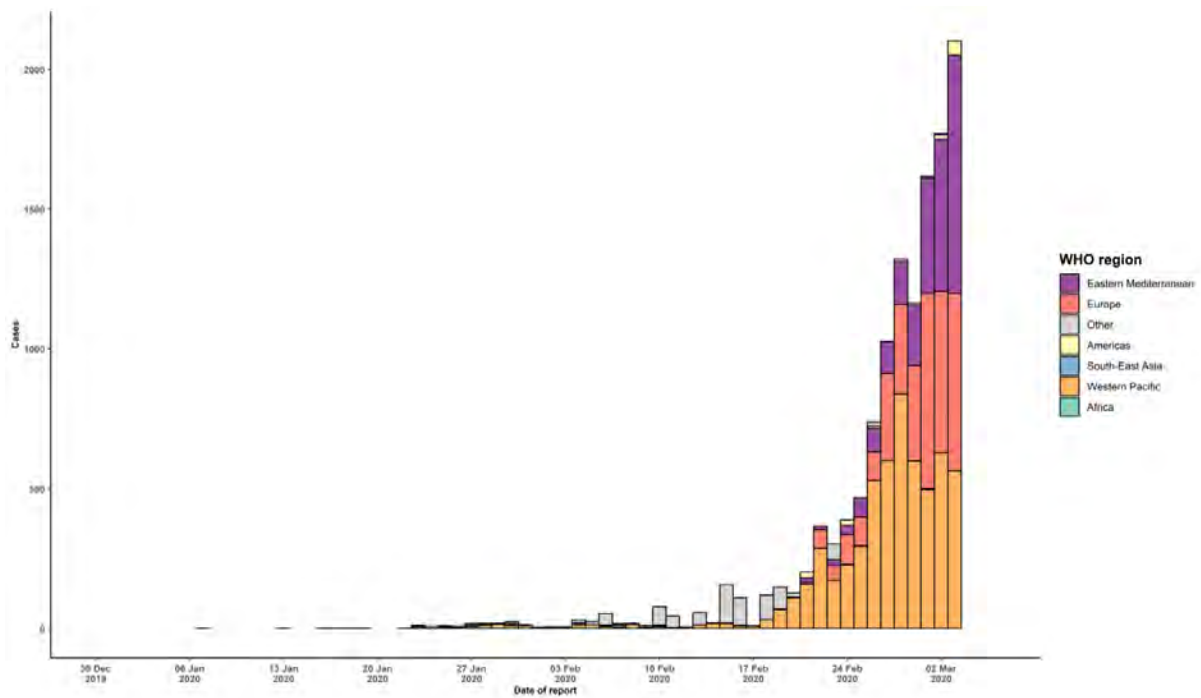


Figure 3: Healthline COVID-19 related call outcomes

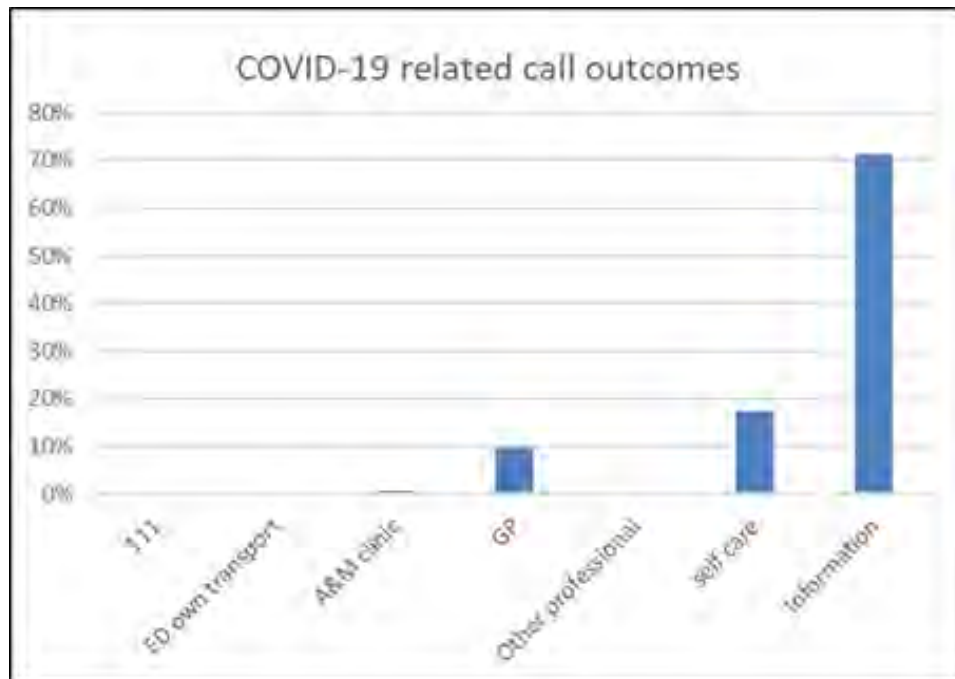
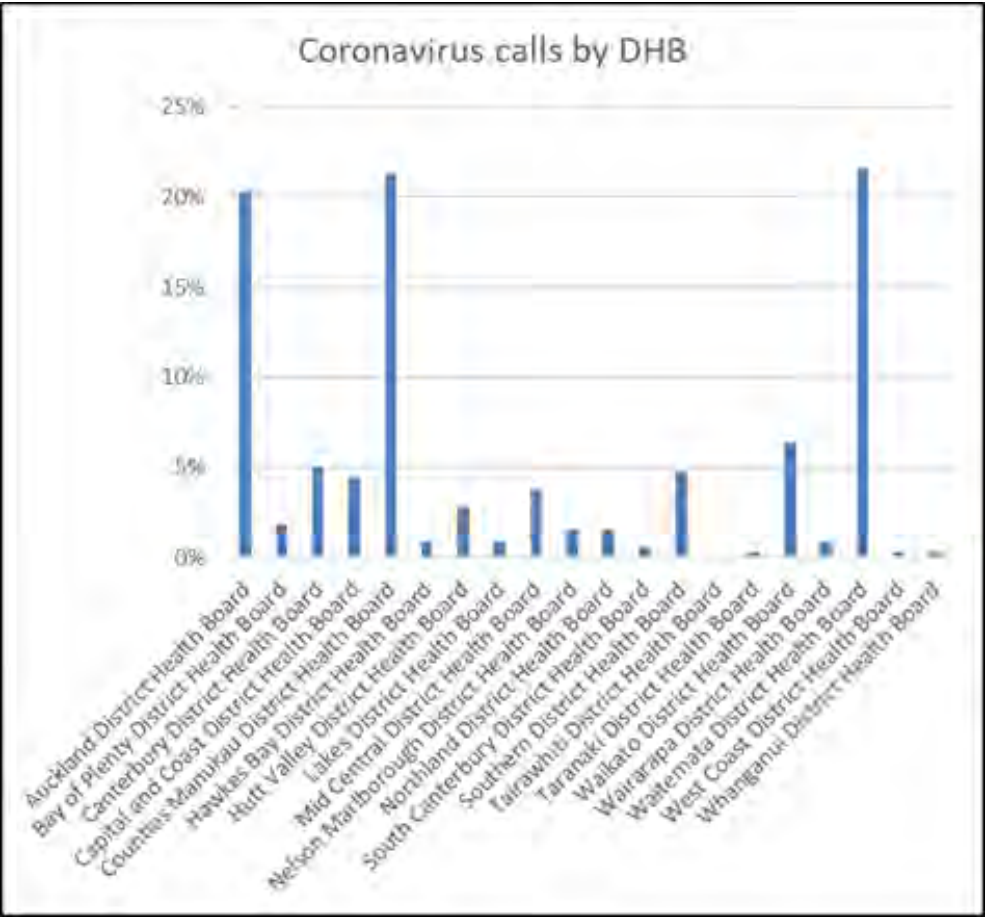


Figure 4: Healthline COVID-19 calls by DHB



NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Saturday 07 March 2020.**

Prepared by: Christine Nolan and Martin Anderson, NHCC Intelligence

Approved by: Hamish Gibson, NHCC Response Manager

ENDS

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea (including those who have transited through China, Iran, northern Italy and South Korea) is that they should self-isolate for a period of 14 days. People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at **05 March** 2020, **8,399** people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet (https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.

d. Number of countries that have reported COVID-19

Q: Why do the country numbers used by New Zealand vary from the World Health Organisation numbers?

A: The WHO includes Hong Kong, Taipei / Taiwan and Macau under mainland China. New Zealand counts these territories as outside mainland China.

IN CONFIDENCE



SITREP 47
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 07 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 07 March 2020.

SUMMARY

1. New Zealand is in the Keep it Out phase with border management and containment measures in place.
2. An outbreak of novel coronavirus (COVID-19) continues in mainland China with the epicentre in Hubei Province. The number of confirmed cases reported in mainland China **has been trending down for the last two weeks**. The numbers of confirmed cases and deaths in the Republic of Korea, Iran and Italy continue to rise. **There are five confirmed cases in New Zealand.**
3. **As reported on 06 March 2020**, globally there has been an increase of **2,873** confirmed cases and **99** new deaths reported. Of the confirmed cases, there has been an increase of **2,730** cases outside of **mainland** China. In total, **88** countries and territories have reported confirmed cases. The three main regions that have reported new cases are Western Pacific with **566** new cases, European region with **1,511** new cases, and the Eastern Mediterranean region with **602** new cases. **44** new cases have been reported in the Americas region.
4. No change to the risk status as reported by the World Health Organization (WHO). On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). New Zealand's risk assessment is that the likelihood of more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high, the likelihood of sustained transmission is moderate, and the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.

5. WHO has provided updated travel advice, details available through this link: https://www.who.int/ith/2019-nCoV_advice_for_international_traffic-rev/en/
6. The significant details include advising against travel restrictions to affected countries, performing hand hygiene frequently, covering the nose and with flexed elbow or paper tissue when coughing or sneezing, refraining from touching the mouth and nose, maintaining a distance of one metre from people exhibiting symptoms, and that it is not necessary to wear a face mask if exhibiting no symptoms.

KEY MESSAGES

7. We have now confirmed a fifth COVID-19 case and tests continue to be carried out daily. This positive result is for a New Zealand citizen in her 40s, the partner of the third case announced earlier this week. This woman is already in self-isolation at home and has been since Thursday. She has appropriate clinical support from public health and district health board staff.
8. Immediate details of the case history of the Auckland couple, whose family members recently arrived home from Iran on 23 February 2020, were outlined on Thursday. Casual contact tracing is underway for this individual and close contacts are already in self-isolation.
9. More than 200 tests have returned as negative.
10. The quarantine at Whangaparāoa Reception Centre has now been lifted. All six New Zealanders repatriated from the Diamond Princess cruise ship have undergone their final health checks; they are all well and have left the centre.
11. Eight New Zealand passengers disembarked the Grand Princess cruise ship on 21 February 2020. Four had no symptoms and have completed self-isolation period, thus no further action required. The remaining four are in Auckland region, two of them are unwell and tests are undergoing and in self-isolation. One is well with negative test result and in self-isolation. One is well and in self-isolation.
12. Healthline's dedicated COVID-19 number, 0800 358 5453, is free and available 24 hours a day, 7 days a week.
13. Healthline's latest advice shows 5,455 people have now completed self-isolation, while 2,091 people (or households) are currently registered as being in self-isolation.
14. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
15. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
16. We continue to regularly review border restrictions.

OUTBREAK SITUATION

17. As of 07 March 2020, there are five confirmed cases of COVID-19 in New Zealand. Confirmation of communication with those who were potentially in close contact is underway.
18. As reported on 06 March 2020, there are 98,192 confirmed cases of COVID-19 reported globally, an increase of 2,873. Of the 143 new confirmed cases in mainland China 126 are from Hubei Province.
19. As reported on 06 March 2020, there are 3,380 confirmed deaths globally, 2,931 in Hubei Province, 111 in the rest of mainland China, and 338 outside mainland China. Based on the confirmed cases reported globally, the case fatality rate varies from approximately 1 percent to 4 percent.
20. As reported on 06 March 2020, there have been 17,640 confirmed cases reported outside of mainland China, an increase of 2,730. Italy has reported 3,858 confirmed COVID-19 cases (769 new cases) and 148 deaths (41 new). Iran has reported 3,513 confirmed COVID-19 cases (591 new cases) and 107 deaths (15 new). The Republic of Korea has reported a total 6,284 confirmed COVID-19 cases (518 new cases) and 42 deaths (7 new).
21. As reported on 06 March 2020, four new countries and territories (Bhutan, Cameroon, Serbia and South Africa) have reported confirmed cases of COVID-19 in the past 24 hours.

Risk Assessment – Global / Regional / National

22. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
23. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 2 March 2020 in light of developments in Italy.
 - The risk associated with COVID-19 infection for people in the EU/EEA and UK is currently considered to be **moderate to high**.
 - The risk of COVID-19 clusters similar to the ones in Italy in other countries in the EU/EEA and the UK, is currently considered to be **moderate to high**.
 - The risk for people travelling/resident in areas with presumed community transmission is currently **high**.
 - The risk for healthcare systems capacity in the EU/EEA and the UK during the peak of the influenza season is **moderate**.
24. Environment, Science and Research Limited (ESR) issued a risk assessment summary on 02 March 2020 that determined the following (currently under review).

Risk Summary:

This assessment is undertaken based on the information available on 02 March 2020. This is a rapidly evolving situation and there is currently limited information available to inform this risk assessment. Therefore, the level of uncertainty is high, and this assessment takes a precautionary approach.

- **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains **HIGH**.
- Given the daily increase in countries reporting cases and the number of countries reporting limited transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently **MODERATE**. If transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
- **Transmission risk:** Based on the current global situation and on the available evidence, including evidence of pre-symptomatic spread and super spreader events, the likelihood of limited transmission in New Zealand is **HIGH**, the likelihood of sustained transmission is **MODERATE**, and the likelihood of widespread outbreaks is **LOW**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
- **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
- **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

WHOLE OF GOVERNMENT RESPONSE New Zealand Border Response

25. The **WHO** does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
26. New Zealand has implemented temporary border measures to reduce the chances of COVID-19 spreading within New Zealand. People who have left or transited through mainland China, Iran and the Diamond Princess cruise ship (Category 1a countries) in the 14 days prior to boarding are denied entry into

New Zealand. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand.

27. Countries in Category 1b are northern Italy (specifically the provinces of Lombardy, Veneto and Emilia-Romagna) and the Republic of Korea. People who have travelled in these countries in the past 14 days may enter New Zealand but are requested to undertake 14 days self-isolation and register with Healthline. The additional border measures aim to reduce the chances of COVID-19 spreading within New Zealand, i.e. by reducing the number of potentially infected people arriving in NZ and asking those who do arrive from mainland China to self-isolate for 14 days. A map of Northern Italy with more specific details [is on Ministry of Health website at
https://www.health.govt.nz/sites/default/files/images/our-work/diseases-conditions/map-showing-specified-areas-of-italy.png](https://www.health.govt.nz/sites/default/files/images/our-work/diseases-conditions/map-showing-specified-areas-of-italy.png)
28. Current border-related measures include the following:
- Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO.
 - Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers.
 - Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea.
 - Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
 - Arranging for St John Ambulance to be present at Auckland International Airport when international flights are arriving. Once arrangements are confirmed, paramedics will be available to check any unwell travellers reported from arriving aircraft, to take temperatures of any passengers referred by border officials and will also be present for travellers to speak to if they have concerns about their health. This will enhance the health presence already at the airport.
 - Providing health advice cards to all arriving international passengers at airports.
 - Asking airlines to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
 - Asking travellers using E-gates if they have been in or transited mainland China, Iran, northern Italy or the Republic of Korea in the last 14 days.
 - Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China, Iran, Northern Italy and the Republic of Korea. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland

China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.

- Establishing a dedicated Healthline phone line for persons self-isolating to register and Healthline will be regularly checking on the welfare and wellbeing of those persons registered.
 - Registering passengers with Healthline as they arrive at airports.
 - Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.
 - Responding to reports of ill travellers.
 - Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.
29. On **06 March** 2020, the New Zealand Customs Service data reported **three flights** arriving with 121 passengers from mainland China into Auckland International Airport. Several flights from other countries had passengers or crew who had departed or transited through mainland China, Iran, the Republic of Korea or northern Italy in the last 14 days. Passengers are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries.
30. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure.

New Zealand Health Sector Response

31. The Ministry of Health remains the single point of truth for COVID-19.
32. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
33. The ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>

34. At 0800 on 07 March 2020 the ESR reports 5 confirmed cases, 1 probable case, 218 negative results and 43 cases under investigation. Note that probable is not a new category, it is the first time a case meets the criteria for reporting this category.

National Telehealth Service Update

35. On 06 March 2020 Healthline managed more than 3,500 calls. This is a new record for the service and circa 1,000 calls higher than the last record. Many callers seeking information do not wish to disclose any information about themselves. On 06 March 2020 there were 730 callers with clinical concerns about COVID-19 who disclosed some information. 208 callers diverted to the Healthline COVID-19 website for information.
36. Of the callers concerned about Coronavirus who did disclose some information:
- 177 callers were experiencing cold or flu-like symptoms
 - 198 (36%) were regarding people who had been outside NZ in the previous 4 weeks
 - 66 required the use of an interpreter
 - 98% received self-care advice or information.
37. Details on people registered and / or in self-isolation are:
- 2,091 registered (people or households) and currently in isolation (includes an estimated 200 arrival cards not received or keyed)
 - 5,455 completed isolation
 - 8,246 total registrations.

See Figures 3 and 4 in the Appendices for information on self-isolation.

Welfare

38. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
39. NEMA has convened National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. The NWCG met on 4 March to confirm the information reporting requirements and process, agree operational processes, and begin long term welfare planning for COVID-19. Guidance for CDEM Group Welfare Managers is being drafted. The first advice document, focusing on shelter & accommodation, will be shared with CDEM Groups and District Health Boards. The Psychosocial support sub-function met on 05 March 2020 and will continue to meet fortnightly. Ministry of Health will encourage DHB Psychosocial Support sub-function over the coming week.

40. An all of government factsheet has been prepared in both English and simplified Chinese to provide information on support available for people who have self-isolated and how to access it. Further translations are in progress. The factsheet is available on the Ministry of Health website and has been shared with agencies and CDEM groups.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 6 March 2020

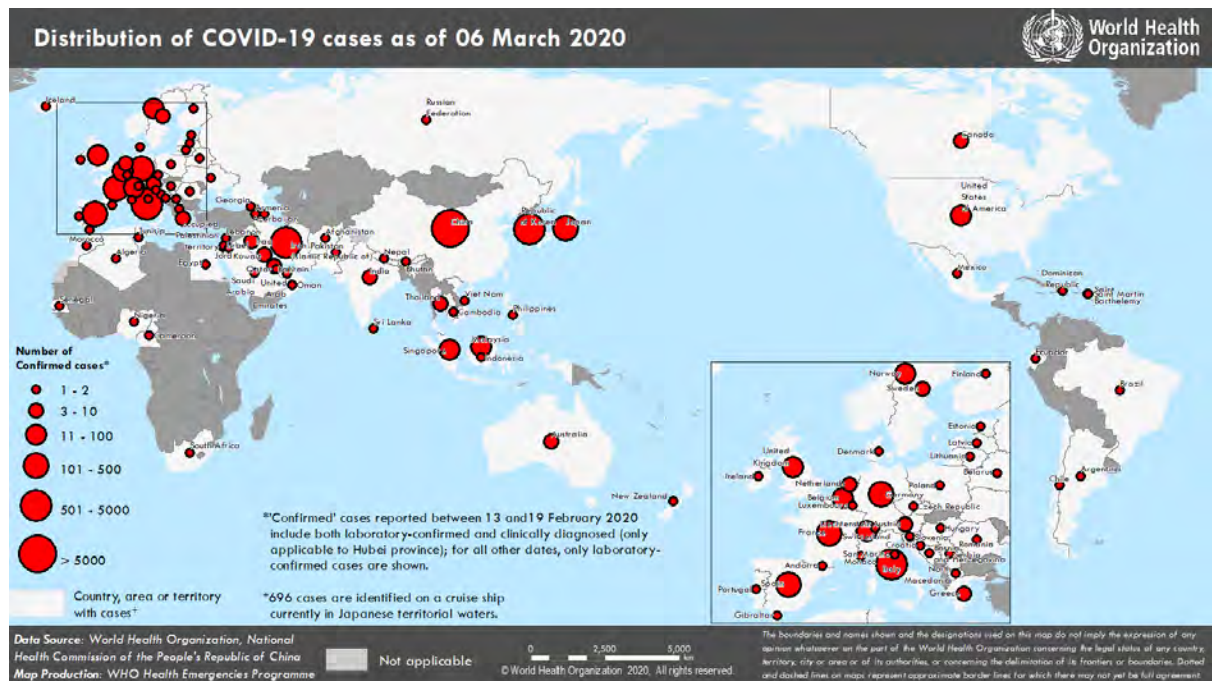


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region with complete date of reporting through 06 March 2020

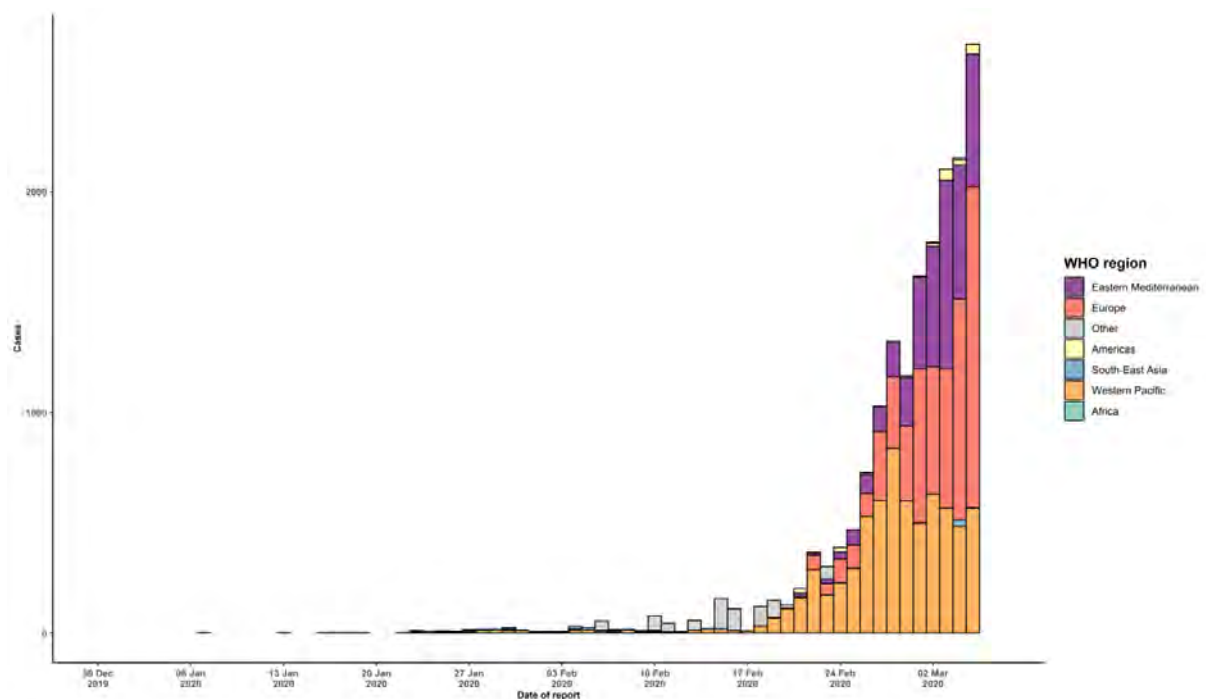


Figure 3: Healthline COVID-19 related call outcomes

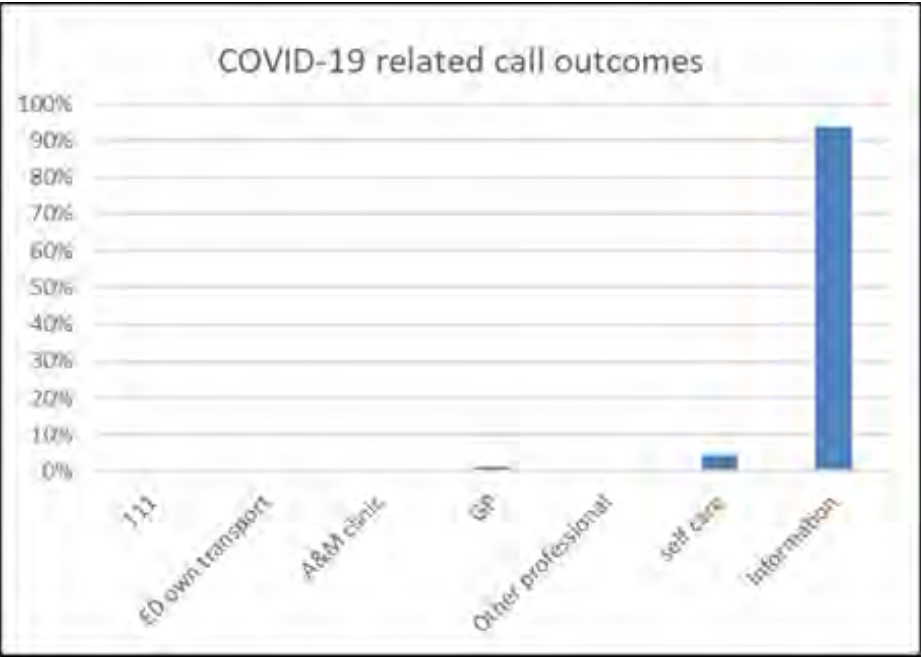
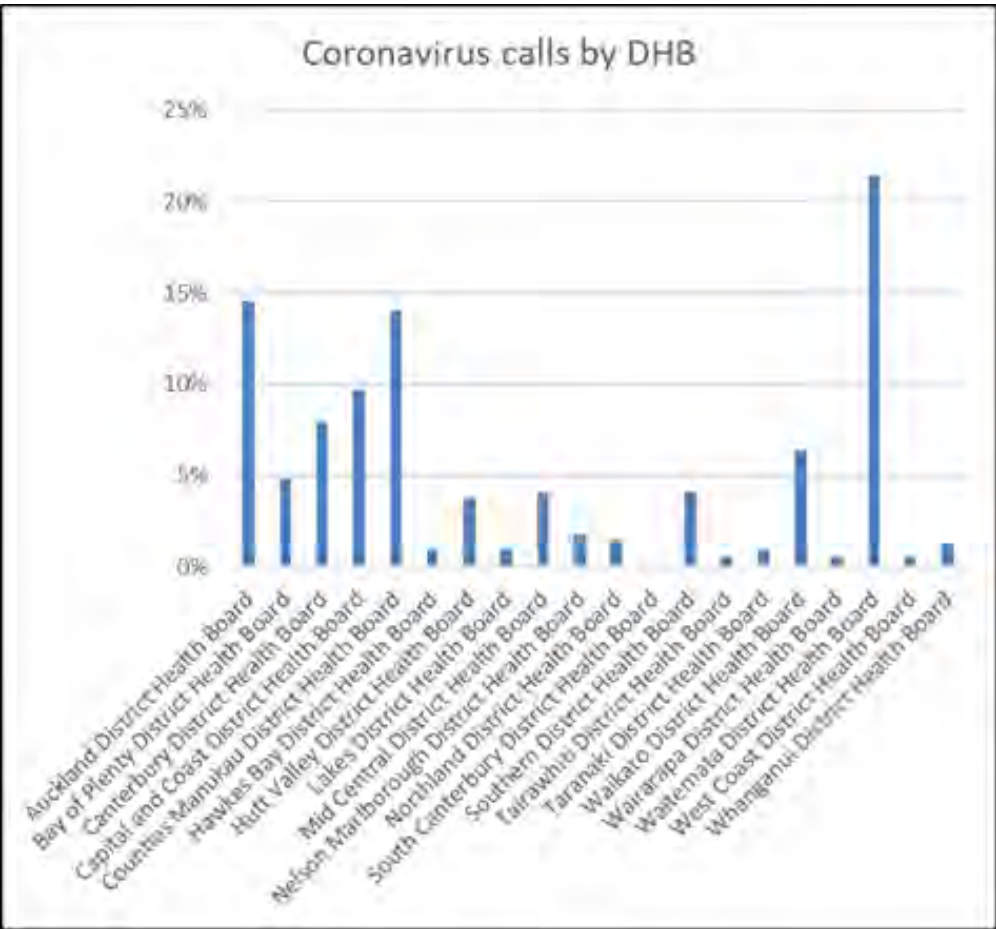


Figure 4: Healthline COVID-19 calls by DHB



NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Sunday 08 March 2020.**

Prepared by: Li-Chia Yeh, NHCC Intelligence

Approved by: Debbie Wing, NHCC Response Manager

ENDS

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South

Korea (including those who have transited through China, Iran, northern Italy and South Korea) is that they should self-isolate for a period of 14 days. People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at **07 March** 2020, **8,246** people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet (https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.

d. Number of countries that have reported COVID-19

Q: Why do the country numbers used by New Zealand vary from the World Health Organisation numbers?

A: The WHO includes Hong Kong, Taipei / Taiwan and Macau under mainland China.
New Zealand counts these territories as outside mainland China.

IN CONFIDENCE



SITREP 48
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 08 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 08 March 2020.

SUMMARY

1. New Zealand is in the Keep it Out phase with border management and containment measures in place.
2. An outbreak of novel coronavirus (COVID-19) continues in mainland China with the epicentre in Hubei Province. The number of confirmed cases reported in mainland China **has been trending down for the last two weeks**. The numbers of confirmed cases and deaths in the Republic of Korea, Iran and Italy continue to rise. **There are five confirmed cases in New Zealand.**
3. **As reported on 07 March 2020**, globally there has been an increase of **3,735** confirmed cases (**101,927** confirmed cases in total) and **106** new deaths reported (**3,486** confirmed deaths in total). Of the confirmed cases, there has been an increase of **3,636** cases outside of mainland China. In total, **93** countries and territories have reported confirmed cases. The three main regions that have reported new cases are Western Pacific with **590** new cases, European region with **1,671** new cases, and the Eastern Mediterranean region with **1,269** new cases. **85** new cases have been reported in the Americas region.
4. No change to the risk status as reported by the World Health Organization (WHO). On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). New Zealand's risk assessment is that the likelihood of more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high, the likelihood of sustained transmission is moderate, and the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.

5. WHO has provided updated travel advice, details available through this link: https://www.who.int/ith/2019-nCoV_advice_for_international_traffic-rev/en/
6. The significant details include advising against travel restrictions to affected countries, performing hand hygiene frequently, covering the nose and with flexed elbow or paper tissue when coughing or sneezing, refraining from touching the mouth and nose, maintaining a distance of one metre from people exhibiting symptoms, and that it is not necessary to wear a face mask if exhibiting no symptoms.

KEY HIGHLIGHTS

7. On 06 March 2020, a fifth COVID-19 case was confirmed. This positive result is for a New Zealand citizen in her 40s, the partner of the third case announced earlier this week. This woman is already in self-isolation at home and has been since 05 March 2020. She has appropriate clinical support from public health and district health board staff.
8. Immediate details of the case history of the Auckland couple, whose family members recently arrived home from Iran on 23 February 2020, were outlined on 05 March 2020. Casual contact tracing is underway for this individual and close contacts are already in self-isolation.
9. Testing of possible and suspected cases continues. More than 220 tests have returned as negative.
10. The quarantine at Whangaparāoa Reception Centre has now been lifted. All six New Zealanders repatriated from the Diamond Princess cruise ship have undergone their final health checks; they are all well and have left the centre.
11. Eight New Zealand passengers disembarked the Grand Princess cruise ship on 21 February 2020. Four had no symptoms and have completed self-isolation period, thus no further action required. The remaining four are in Auckland region, two of them are unwell and tests are undergoing and in self-isolation. One is well with negative test result and in self-isolation. One is well and in self-isolation.
12. Healthline's dedicated COVID-19 number, 0800 358 5453, is free and available 24 hours a day, 7 days a week.
13. Healthline's latest advice shows 5,754 people have now completed self-isolation, while 2,247 people (or households) are currently registered as being in self-isolation.
14. We continue to regularly review border restrictions.

OUTBREAK SITUATION

15. As of 08 March 2020, there are five confirmed cases of COVID-19 in New Zealand. Ongoing follow-up of people who were potentially in close contact is underway.

16. As reported on 07 March 2020, there are 101,927 confirmed cases of COVID-19 reported globally, an increase of 3,735. Of the 99 new confirmed cases in mainland China 74 are from Hubei Province.
17. As reported on 07 March 2020, there are 3,486 confirmed deaths globally, 2,959 in Hubei Province, 111 in the rest of mainland China, and 416 outside mainland China. Based on the confirmed cases reported globally, the case fatality rate varies from approximately 1 percent to 4 percent.
18. As reported on 07 March 2020, there have been 21,276 confirmed cases reported outside of mainland China, an increase of 3,636. Italy has reported 4,636 confirmed COVID-19 cases (778 new cases) and 197 deaths (49 new). Iran has reported 4,747 confirmed COVID-19 cases (1,234 new cases) and 124 deaths (17 new). The Republic of Korea has reported a total 6,767 confirmed COVID-19 cases (483 new cases) and 44 deaths (2 new).
19. As reported on 07 March 2020, five new countries and territories (Colombia, Holy See, Peru, Serbia and Togo) have reported confirmed cases of COVID-19 in the past 24 hours.

Risk Assessment – Global / Regional / National

20. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
21. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 2 March 2020 in light of developments in Italy.
 - The risk associated with COVID-19 infection for people in the EU/EEA and UK is currently considered to be **moderate to high**.
 - The risk of COVID-19 clusters similar to the ones in Italy in other countries in the EU/EEA and the UK, is currently considered to be **moderate to high**.
 - The risk for people travelling/resident in areas with presumed community transmission is currently **high**.
 - The risk for healthcare systems capacity in the EU/EEA and the UK during the peak of the influenza season is **moderate**.
22. Environment, Science and Research Limited (ESR) issued a risk assessment summary on 02 March 2020 that determined the following (currently under review).

Risk Summary:

This assessment is undertaken based on the information available on 02 March 2020. This is a rapidly evolving situation and there is currently limited information available to inform this risk assessment. Therefore, the level of uncertainty is high, and this assessment takes a precautionary approach. **A formal reassessment will be done on 09 March 2020.**

- **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains **HIGH**.
- Given the daily increase in countries reporting cases and the number of countries reporting limited transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently **MODERATE**. **The importation risk for New Zealand will need to be reassessed on 09 March 2020.**
- **Transmission risk:** Based on the current global situation and on the available evidence, including evidence of pre-symptomatic spread and super spreader events, the likelihood of limited transmission in New Zealand is **HIGH**, the likelihood of sustained transmission is **MODERATE**, and the likelihood of widespread outbreaks is **LOW**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
- **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
- **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

WHOLE OF GOVERNMENT RESPONSE – New Zealand Border Response

23. The **WHO** does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
24. New Zealand has implemented temporary border measures to reduce the chances of COVID-19 spreading within New Zealand. People who have left or transited through mainland China and Iran (Category 1a countries) in the 14 days prior to boarding are denied entry into New Zealand. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand.

25. Countries in Category 1b are northern Italy (specifically the provinces of Lombardy, Veneto and Emilia-Romagna) and the Republic of Korea. People who have travelled in these countries in the past 14 days may enter New Zealand but are requested to undertake 14 days self-isolation and register with Healthline. A map of Northern Italy with more specific details is on Ministry of Health website at <https://www.health.govt.nz/sites/default/files/images/our-work/diseases-conditions/map-showing-specified-areas-of-italy.png>
26. Current border-related measures include the following:
- Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO.
 - Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers.
 - Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea.
 - Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
 - Arranging for St John Ambulance to be present at Auckland International Airport when international flights are arriving. Once arrangements are confirmed, paramedics will be available to check any unwell travellers reported from arriving aircraft, to take temperatures of any passengers referred by border officials and will also be present for travellers to speak to if they have concerns about their health. This will enhance the health presence already at the airport.
 - Asking airlines to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
 - Asking travellers using E-gates if they have been in or transited mainland China, Iran, northern Italy or the Republic of Korea in the last 14 days.
 - Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China, Iran, Northern Italy and the Republic of Korea. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.
 - Establishing a dedicated Healthline phone line for persons self-isolating to register and Healthline will be regularly checking on the welfare and wellbeing of those persons registered.
 - Registering passengers with Healthline as they arrive at airports.

- Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.
 - Responding to reports of ill travellers.
 - Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.
27. On **08 March** 2020, the New Zealand Customs Service data reported **no flights** arrived from mainland China. Several flights from other countries had passengers or crew who had departed or transited through mainland China, Iran, the Republic of Korea or northern Italy in the last 14 days. Passengers are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries.
28. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure.

New Zealand Health Sector Response

29. The Ministry of Health remains the single point of up-to-date information on COVID-19.
30. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
31. ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
32. At **0835** on **08 March 2020** ESR reports **5 confirmed cases, 1 probable case, 224 negative results and 44 cases under investigation**. Note that probable is not a new category, it is the first time a case meets the criteria for reporting this category.

National Telehealth Service Update

33. On **07 March 2020** Healthline managed more than **2,600** calls. Many callers seeking information do not wish to disclose any information about themselves. On **07 March 2020** there were **396** callers with clinical concerns about

COVID-19 who disclosed some information. 68 callers diverted to the Healthline COVID-19 website for information.

34. Of the callers concerned about Coronavirus who did disclose some information:
- 125 callers were experiencing cold or flu-like symptoms
 - 102 (26%) were regarding people who had been outside NZ in the previous 4 weeks
 - 25 required the use of an interpreter
 - 96% received self-care advice or information.
35. Details on people registered and / or in self-isolation are:
- 2,247 registered (people or households) and currently in isolation (includes an estimated 300 arrival cards not received or keyed for 06 March 2020 and 07 March 2020)
 - 5,754 completed isolation
 - 8,455 total registrations.

See Figures 3 and 4 in the Appendices for information on self-isolation.

Welfare

36. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
37. NEMA has convened National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. The NWCG met on 4 March to confirm the information reporting requirements and process, agree operational processes, and begin long term welfare planning for COVID-19. Guidance for CDEM Group Welfare Managers is being drafted. The first advice document, focusing on shelter & accommodation, will be shared with CDEM Groups and District Health Boards. The Psychosocial support sub-function met on 05 March 2020 and will continue to meet fortnightly. Ministry of Health will encourage DHB Psychosocial Support sub-function over the coming week.
38. An all of government factsheet has been prepared in both English and simplified Chinese to provide information on support available for people who have self-isolated and how to access it. Further translations are in progress. The factsheet is available on the Ministry of Health website and has been shared with agencies and CDEM groups.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 07 March 2020

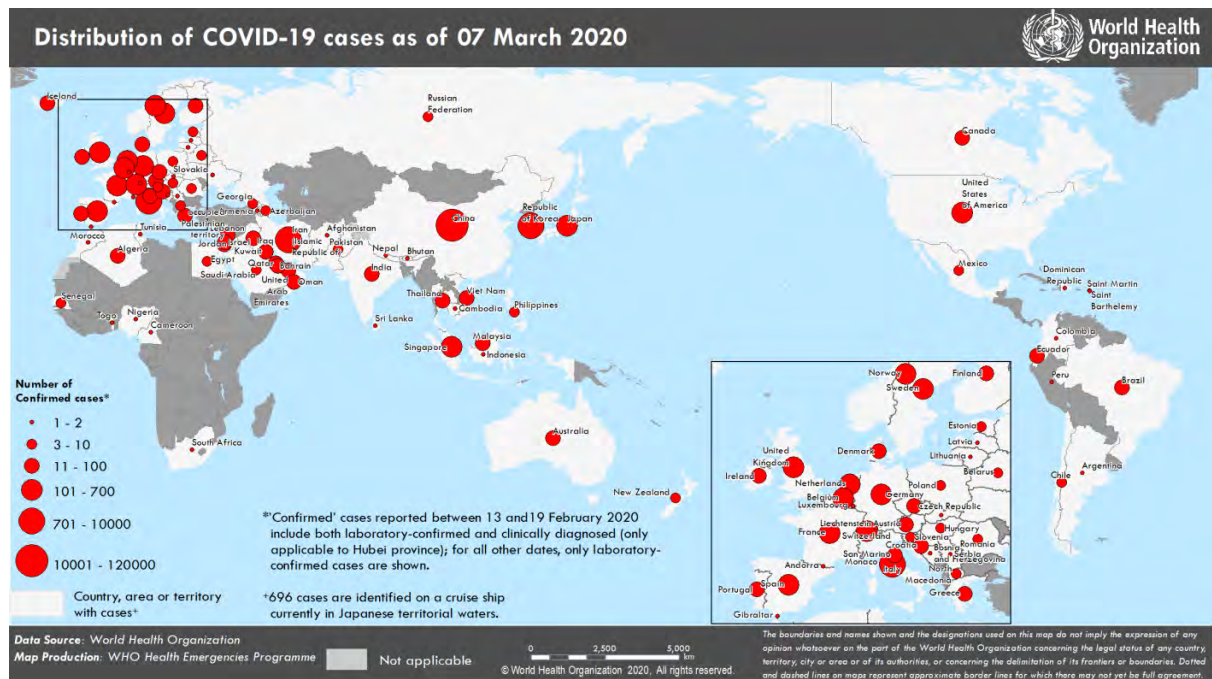


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region with complete date of reporting through 07 March 2020

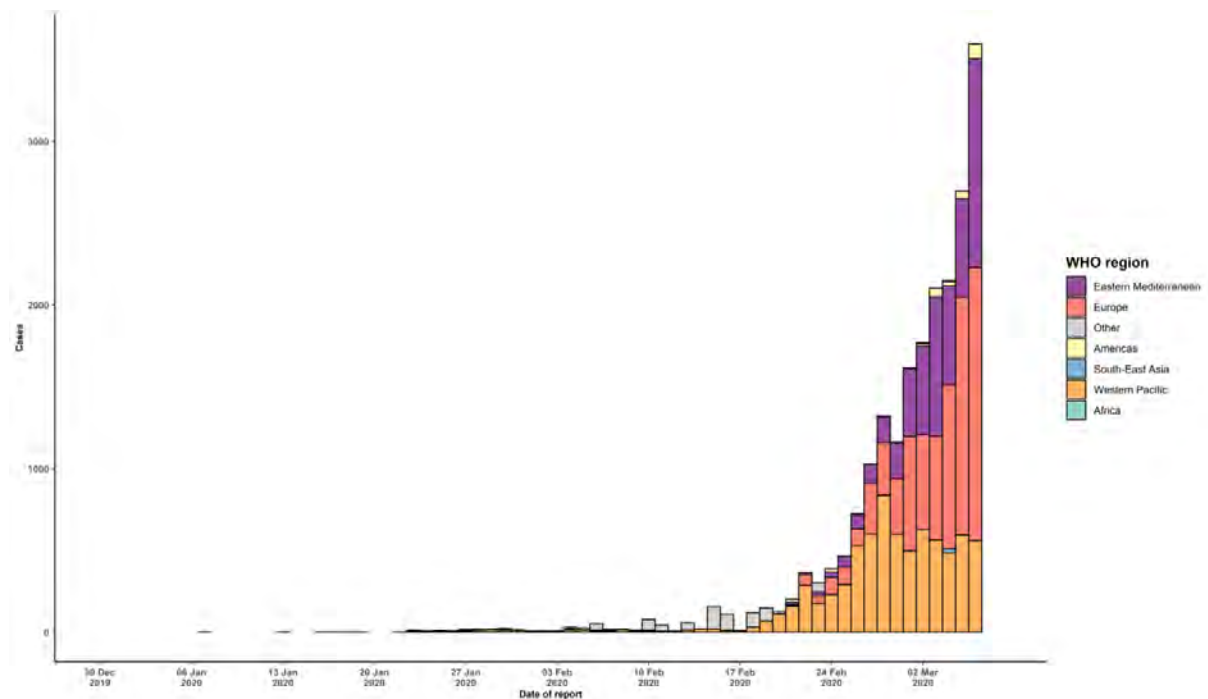


Figure 3: Healthline COVID-19 related call outcomes

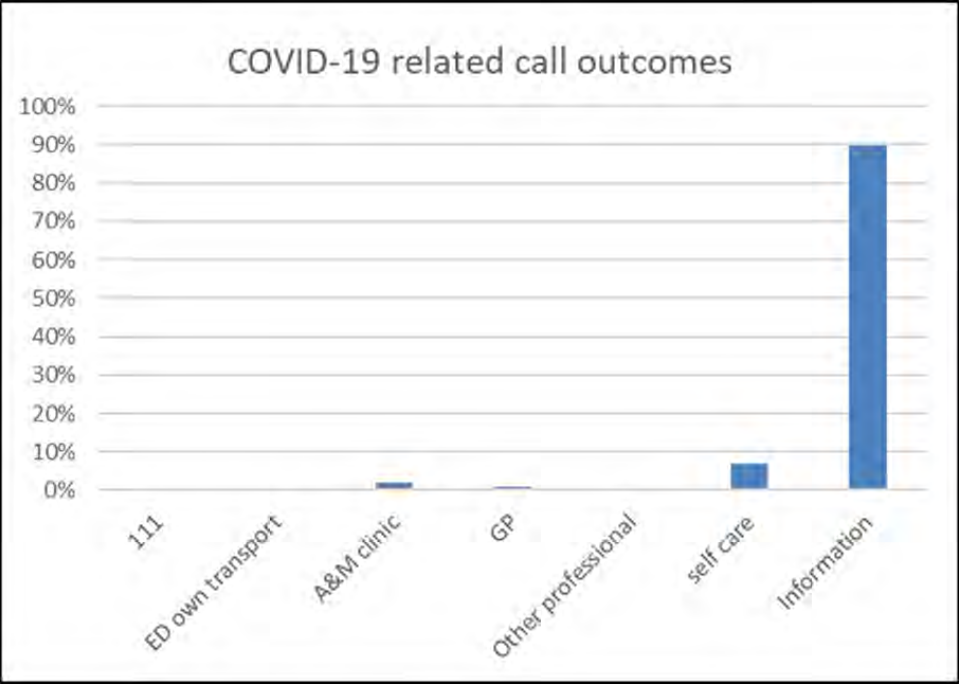
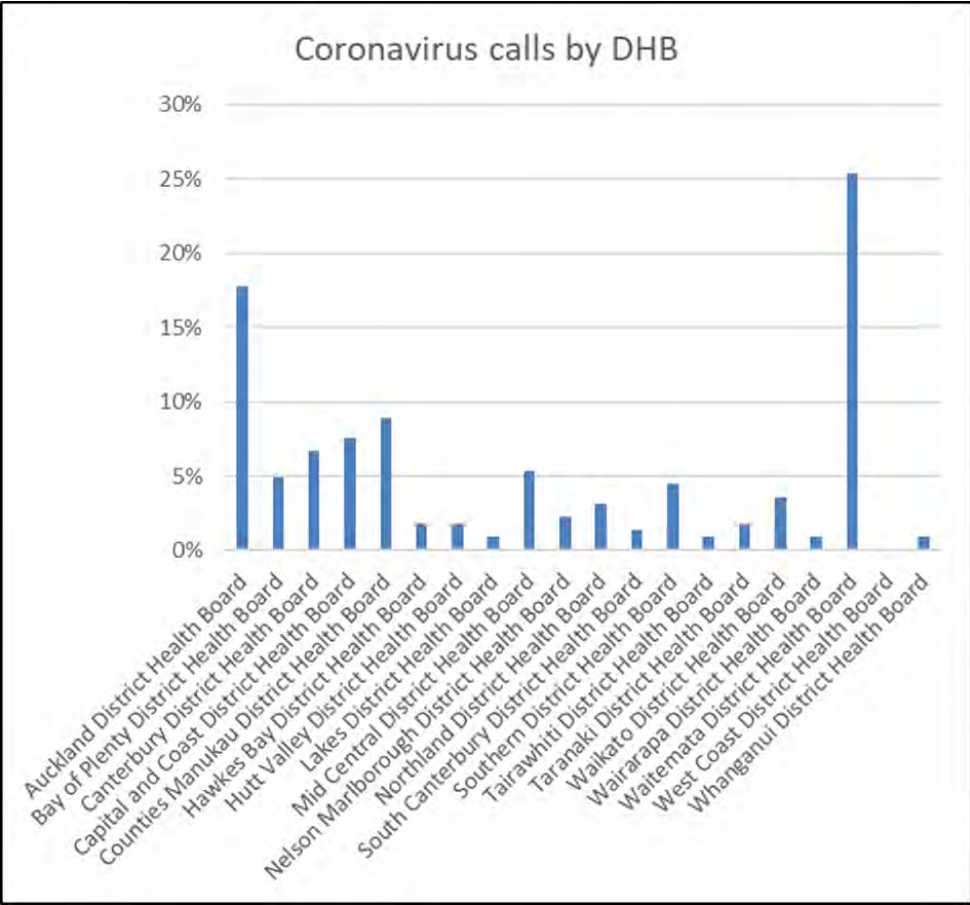


Figure 4: Healthline COVID-19 calls by DHB



NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Monday 09 March 2020.**

Prepared by: Li-Chia Yeh, NHCC Intelligence

Approved by: Hamish Gibson, NHCC Response Manager

ENDS

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea (including those who have transited through China, Iran, northern Italy and South Korea) is that they should self-isolate for a period of 14 days.

People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at **07 March 2020**, **8,455** people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet (https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.

d. Number of countries that have reported COVID-19

Q: Why do the country numbers used by New Zealand vary from the World Health Organisation numbers?

A: The WHO includes Hong Kong, Taipei / Taiwan and Macau under mainland China. New Zealand counts these territories as outside mainland China.

IN CONFIDENCE



SITREP 49
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 09 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 09 March 2020.

SUMMARY

1. New Zealand is in the **Stamp It Out phase** with continued border management and containment measures in place.
2. An outbreak of novel coronavirus (COVID-19) continues in mainland China with the epicentre in Hubei Province. The number of confirmed cases reported in mainland China **has been trending down for the last two weeks**. The numbers of confirmed cases and deaths in the Republic of Korea, Iran and Italy continue to rise. **There are five confirmed cases in New Zealand.**
3. **As reported on 08 March 2020**, globally there has been an increase of **3,656** confirmed cases (**105,586** confirmed cases in total) and **98** new deaths reported (**3,584** confirmed deaths in total). Of the confirmed cases, there has been an increase of **3,612** cases outside of mainland China. In total, **101** countries and territories have reported confirmed cases. The three main regions that have reported new cases are Western Pacific with **451** new cases, European region with **1,964** new cases, and the Eastern Mediterranean region with **1,154** new cases. **26** new cases have been reported in the Americas region.
4. No change to the risk status as reported by the World Health Organization (WHO). On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). New Zealand's risk assessment is that the likelihood of more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high, the likelihood of sustained transmission is moderate, and the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.

5. WHO has provided updated travel advice, details available through this link: https://www.who.int/ith/2019-nCoV_advice_for_international_traffic-rev/en/
6. The significant details include advising against travel restrictions to affected countries, performing hand hygiene frequently, covering the nose and with flexed elbow or paper tissue when coughing or sneezing, refraining from touching the mouth and nose, maintaining a distance of one metre from people exhibiting symptoms, and that it is not necessary to wear a face mask if exhibiting no symptoms.

KEY HIGHLIGHTS

7. On 06 March 2020, a fifth COVID-19 case was confirmed. This positive result is for a New Zealand citizen in her 40s, the partner of the third case announced earlier this week. This woman is already in self-isolation at home and has been since 05 March 2020. She has appropriate clinical support from public health and district health board staff.
8. Immediate details of the case history of the Auckland couple, whose family members recently arrived home from Iran on 23 February 2020, were outlined on 05 March 2020. Casual contact tracing is underway for this individual and close contacts are already in self-isolation.
9. Testing of possible and suspected cases continues. 269 tests have returned as negative.
10. Eight New Zealand passengers disembarked the Grand Princess cruise ship on 21 February 2020. Four had no symptoms and have completed self-isolation period, thus no further action required. The remaining four are in Auckland; two of them were unwell now recovered. All completed tests are negative.
11. Healthline's dedicated COVID-19 number, 0800 358 5453, is free and available 24 hours a day, 7 days a week.
12. Healthline's latest advice shows 5,808 people have now completed self-isolation, while 2,038 people (or households) are currently registered as being in self-isolation.
13. We continue to regularly review border restrictions.

OUTBREAK SITUATION

14. As of 09 March 2020, there are five confirmed cases of COVID-19 in New Zealand. Ongoing follow-up of people who were potentially in close contact is underway.
15. As reported, by the World Health Organisation, on 08 March 2020, there are 105,586 confirmed cases of COVID-19 reported globally, an increase of 3,656. Of the 44 new confirmed cases in mainland China 41 are from Hubei Province.

16. As reported on 08 March 2020, there are 3,584 confirmed deaths globally, 2,986 in Hubei Province, 1138 in the rest of mainland China, and 416 outside mainland China. Based on the confirmed cases reported globally, the case fatality rate varies from approximately 1 percent to 4 percent.
17. As reported on 08 March 2020, there have been 24,888 confirmed cases reported outside of mainland China, an increase of 3,612. Italy has reported 5,883 confirmed COVID-19 cases (1247 new cases) and 234 deaths (37 new). Iran has reported 5,823 confirmed COVID-19 cases (1,076 new cases) and 145 deaths (21 new). The Republic of Korea has reported a total 7,134 confirmed COVID-19 cases (367 new cases) and 50 deaths (6 new).
18. As reported on 08 March 2020, eight new countries and territories (Bulgaria, Costa Rica, Faroe Islands, French Guiana, Maldives, Malta, Martinique, and Republic of Moldova) have reported confirmed cases of COVID-19 in the past 24 hours.

Risk Assessment – Global / Regional / National

19. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
20. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 2 March 2020 considering developments in Italy.
 - The risk associated with COVID-19 infection for people in the EU/EEA and UK is currently considered to be **moderate to high**.
 - The risk of COVID-19 clusters similar to the ones in Italy in other countries in the EU/EEA and the UK, is currently considered to be **moderate to high**.
 - The risk for people travelling/resident in areas with presumed community transmission is currently **high**.
 - The risk for healthcare systems capacity in the EU/EEA and the UK during the peak of the influenza season is **moderate**.
21. Environment, Science and Research Limited (ESR) issued a risk assessment summary on 09 March 2020 that determined the following (currently under review).

Risk Summary:

This assessment is undertaken based on the information available on 09 March 2020. This is a rapidly evolving situation and there is currently limited information available to inform this risk assessment. Therefore, the level of uncertainty is high, and this assessment takes a precautionary approach.

- **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains **HIGH**.

- Given the daily increase in countries reporting cases and the number of countries reporting limited transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently **MODERATE**.
- **Transmission risk:** Based on the current global situation and on the available evidence, including evidence of pre-symptomatic spread and super spreader events, the likelihood of limited transmission in New Zealand is **HIGH**, the likelihood of sustained transmission is **MODERATE**, and the likelihood of widespread outbreaks is **LOW**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
- **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
- **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

WHOLE OF GOVERNMENT RESPONSE – New Zealand Border Response

22. The **WHO** does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
23. New Zealand has implemented temporary border measures to reduce the chances of COVID-19 spreading within New Zealand. People who have left or transited through mainland China and Iran (Category 1a countries) in the 14 days prior to boarding are denied entry into New Zealand. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand.
24. Countries in Category 1b are northern Italy (specifically the provinces of Lombardy, Veneto and Emilia-Romagna) and the Republic of Korea. People who have travelled in these countries in the past 14 days may enter New Zealand but are requested to undertake 14 days self-isolation and register with Healthline. A map of Northern Italy with more specific details is on Ministry of Health website at

<https://www.health.govt.nz/sites/default/files/images/our-work/diseases-conditions/map-showing-specified-areas-of-italy.png>

25. Current border-related measures include the following:

- Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO.
- Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers.
- Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea.
- Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
- Arranging for St John Ambulance to be present at Auckland International Airport when international flights are arriving. Once arrangements are confirmed, paramedics will be available to check any unwell travellers reported from arriving aircraft, to take temperatures of any passengers referred by border officials and will also be present for travellers to speak to if they have concerns about their health. This will enhance the health presence already at the airport.
- Asking airlines to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
- Asking travellers using E-gates if they have been in or transited mainland China, Iran, northern Italy or the Republic of Korea in the last 14 days.
- Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China, Iran, Northern Italy and the Republic of Korea. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.
- Establishing a dedicated Healthline phone line for persons self-isolating to register and Healthline will be regularly checking on the welfare and wellbeing of those persons registered.
- Registering passengers with Healthline as they arrive at airports.
- Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.
- Responding to reports of ill travellers.
- Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.

26. On 09 March 2020, the New Zealand Customs Service data reported one flight arrived at Auckland International Airport yesterday from mainland China with 91 passengers on board. No direct flights arrived from other category 1 countries. Several flights from other countries had passengers or crew who had departed or transited through mainland China, Iran, the Republic of Korea or northern Italy in the last 14 days. Passengers are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries.
27. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure.

New Zealand Health Sector Response

28. The Ministry of Health remains the single point of up-to-date information on COVID-19.
29. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
30. ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
31. At 0830 on 09 March 2020 ESR reports 5 confirmed cases, 1 probable case, 269 negative results and 17 cases under investigation. Note that probable is not a new category, it is the first time a case meets the criteria for reporting this category.

National Telehealth Service Update

32. On 08 March 2020 Healthline managed more than 2,600 calls. Many callers seeking information do not wish to disclose any information about themselves. On 08 March 2020 there were 388 callers with clinical concerns about COVID-19 who disclosed some information. 62 callers diverted to the Healthline COVID-19 website for information.
33. Of the callers concerned about Coronavirus who did disclose some information:
- 149 callers were experiencing cold or flu-like symptoms

- 112 (29%) were regarding people who had been outside NZ in the previous 4 weeks
- 16 required the use of an interpreter
- 92% received self-care advice or information.

34. Details on people registered and / or in self-isolation are:

- 2,247 registered (people or households) and currently in isolation (includes an estimated 300 arrival cards not received or added to database for 06 March 2020 and 07 March 2020)
- 5,754 completed isolation
- 8,455 total registrations.

See Figures 3 and 4 in the Appendices for information on self-isolation.

Welfare

35. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
36. NEMA has convened National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. The NWCG met on 4 March to confirm the information reporting requirements and process, agree operational processes, and begin long term welfare planning for COVID-19. Guidance for CDEM Group Welfare Managers is being drafted. The first advice document, focusing on shelter & accommodation, will be shared with CDEM Groups and District Health Boards. The Psychosocial support sub-function met on 05 March 2020 and will continue to meet fortnightly. Ministry of Health will encourage DHB Psychosocial Support sub-function over the coming week.
37. An all of government factsheet has been prepared in both English and simplified Chinese to provide information on support available for people who have self-isolated and how to access it. Further translations are in progress. The factsheet is available on the Ministry of Health website and has been shared with agencies and CDEM groups.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 07 March 2020

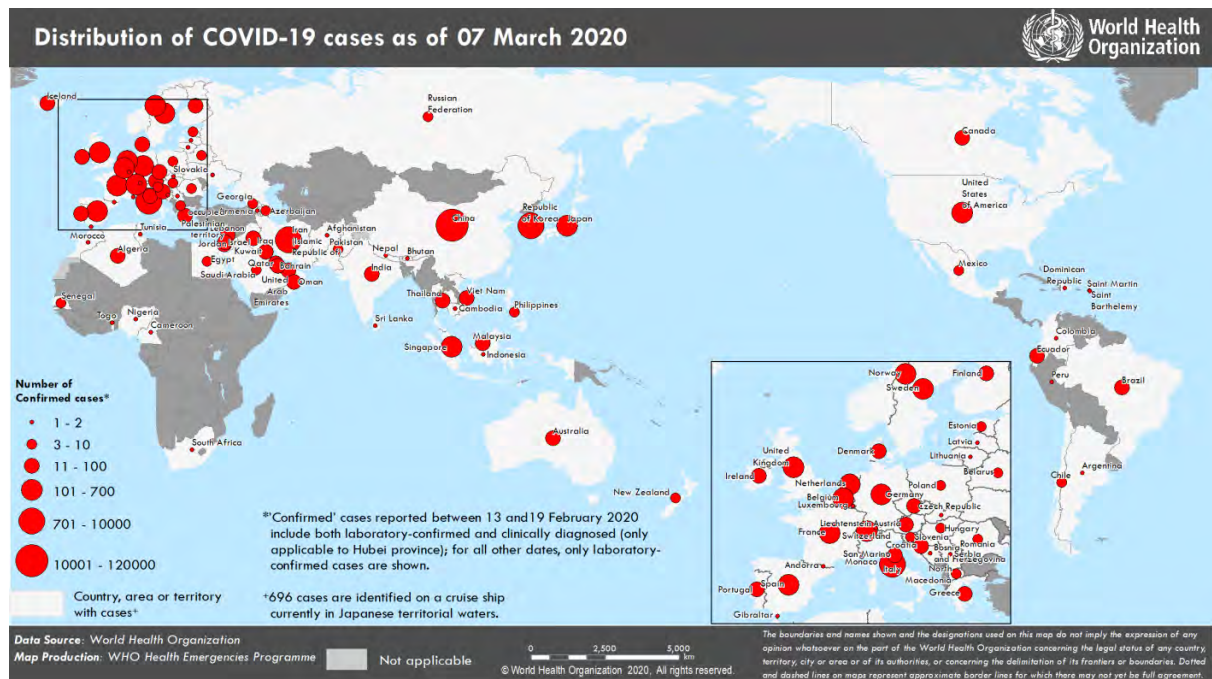


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region with complete date of reporting through 07 March 2020

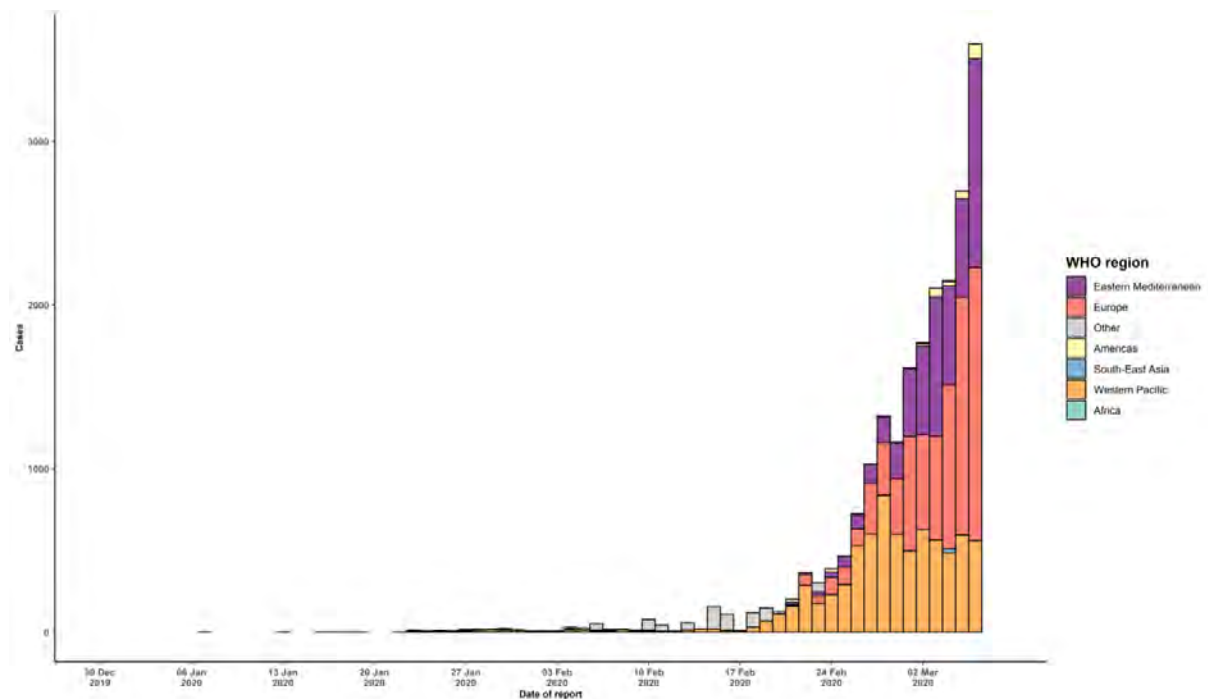


Figure 3: Healthline COVID-19 related call outcomes

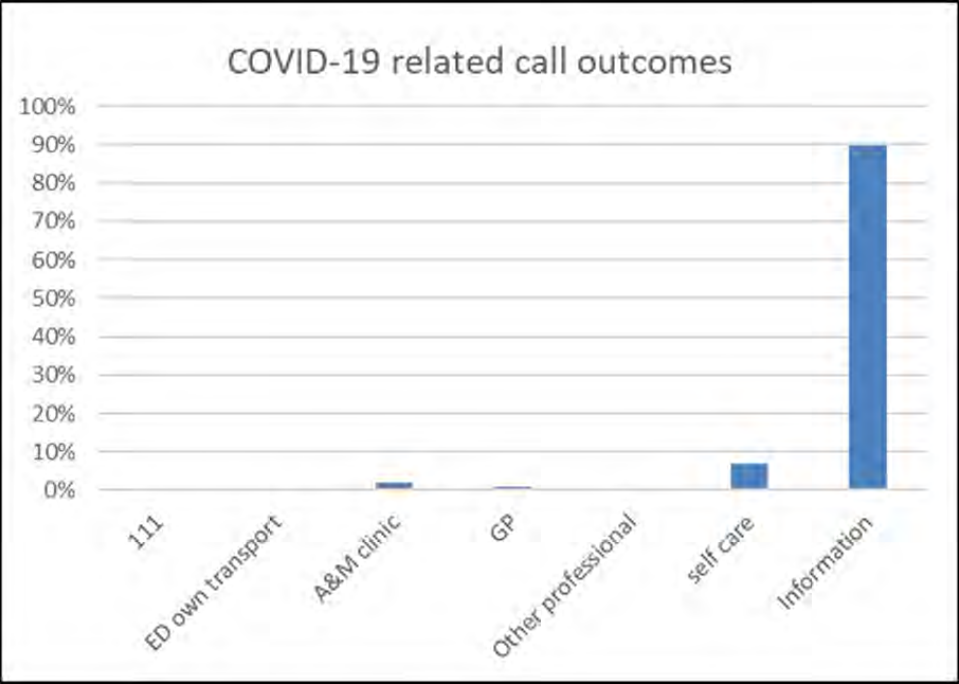
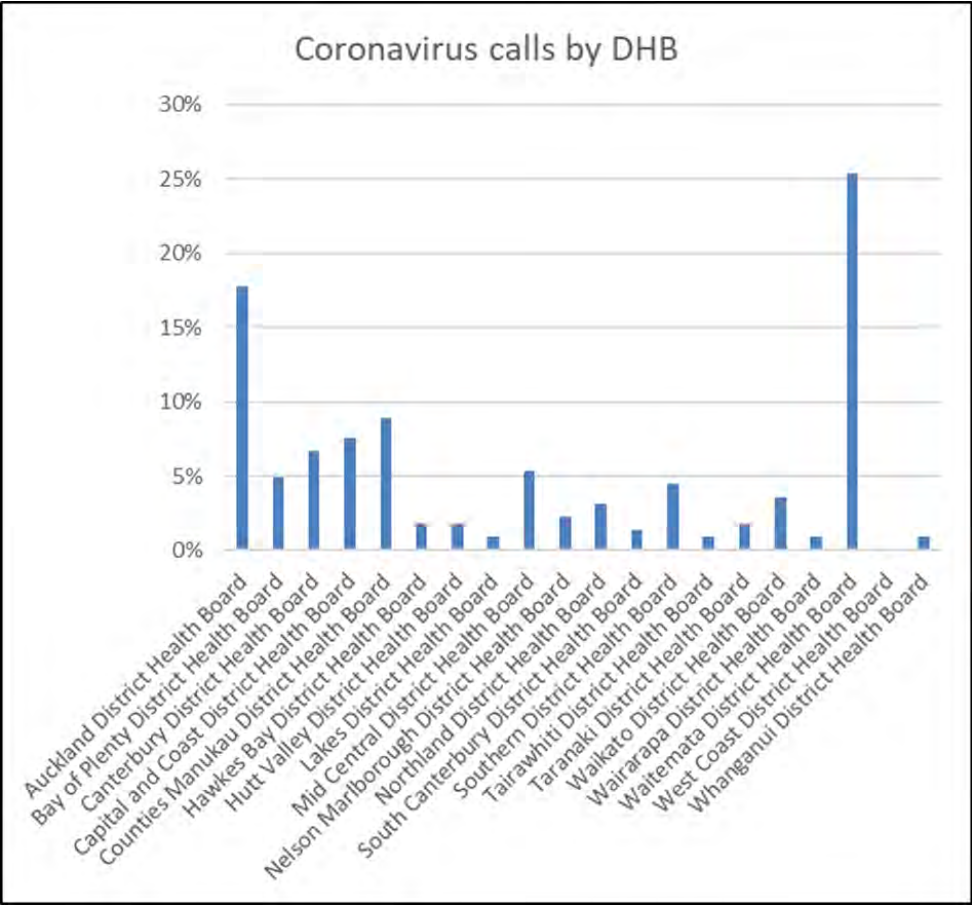


Figure 4: Healthline COVID-19 calls by DHB



NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Tuesday 10 March 2020.**

Prepared by: Martin Kennedy, NHCC Intelligence

Approved by: Hamish Gibson, NHCC Response Manager

ENDS

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea (including those who have transited through China, Iran, northern Italy and South Korea) is that they should self-isolate for a period of 14 days.

People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at **08 March 2020**, **8,455** people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet (https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.

d. Number of countries that have reported COVID-19

Q: Why do the country numbers used by New Zealand vary from the World Health Organisation numbers?

A: The WHO includes Hong Kong, Taipei / Taiwan and Macau under mainland China. New Zealand counts these territories as outside mainland China.

IN CONFIDENCE



SITREP 50
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 10 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 10 March 2020.

SUMMARY

1. New Zealand is in the **Stamp It Out phase** with continued border management and containment measures in place.
2. An outbreak of novel coronavirus (COVID-19) continues in mainland China with the epicentre in Hubei Province. The number of confirmed cases reported in mainland China **has been trending down**. The numbers of confirmed cases and deaths in the **Republic of Korea, Iran and Italy** continue to rise. **There are five confirmed cases in New Zealand.**
3. **As reported by the World Health Organization (WHO) on 09 March 2020**, globally there has been an increase of **3,994** confirmed cases (**109,578** confirmed cases in total) and **225** new deaths reported (**3,809** confirmed deaths in total). Of the confirmed cases, there has been an increase of **3,954** cases outside of mainland China. In total, **104** countries and territories have reported confirmed cases. The three main regions that have reported new cases are Western Pacific with **309** new cases, European region with **2,791** new cases, and the Eastern Mediterranean region with **798** new cases. **25** new cases have been reported in the Americas region.
4. No change to the risk status as reported by the World Health Organization (WHO). On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). New Zealand's risk assessment is that the likelihood of more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high, the likelihood of sustained transmission is moderate, and the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.

5. WHO has provided updated travel advice, details available through this link: https://www.who.int/ith/2019-nCoV_advice_for_international_traffic-rev/en/
6. The significant details include advising against travel restrictions to affected countries, performing hand hygiene frequently, covering the nose and with flexed elbow or paper tissue when coughing or sneezing, refraining from touching the mouth and nose, and that it is not necessary to wear a face mask if exhibiting no symptoms.

KEY HIGHLIGHTS

7. There are no new additional cases of COVID-19 in New Zealand.
8. All five confirmed cases are doing well. Four of them remain in isolation at home. The first case, a patient in their 60s who was admitted to hospital is also doing well and is expected to be discharged today.
9. Contact tracing for all five confirmed cases is progressing well. We've now been in touch with all close contacts of the first four cases and most of the close contacts so far for case 5. There are almost 200 close contacts for all five cases.
10. All five cases follow the pattern identified by the World Health Organisation joint China Mission in February that around 80% of all human to human transmission occurred in families.
11. Yesterday it was announced that COVID-19 would become a quarantinable disease effective from 11 March 2020.
12. Testing of possible and suspected cases continues. 281 tests have returned as negative.
13. The Ministry of Health is working hard with the broader sector to continue a strong response to the 'stamp it out' phase of our pandemic planning tailored to COVID-19.
14. We are continuing to progress making it easier for health professionals who have retired or are no longer practicing returning to work if needed in a pandemic.
15. We have talked with both the Medical Council and Nursing Council to discuss their plans to accelerate the recertification process for former health professionals if needed to respond to pressure on health services in a pandemic.
16. Healthline's dedicated COVID-19 number, 0800 358 5453, is free and available 24 hours a day, 7 days a week.
17. Healthline's latest advice shows 5,929 people have now completed self-isolation, while 2,334 people (or households) are currently registered as being in self-isolation.

18. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
19. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
20. We continue to regularly review border restrictions and advice around any changes required.

OUTBREAK SITUATION

21. As of 10 March 2020, there are five confirmed cases of COVID-19 in New Zealand. Ongoing follow-up of people who were potentially in close contact is underway.
22. As reported by the World Health Organisation (WHO) on 09 March 2020, there are 109,578 confirmed cases of COVID-19 reported globally, an increase of 3,994. Of the 40 new confirmed cases in mainland China 36 are from Hubei Province.
23. As reported by WHO on 09 March 2020, there are 3,809 confirmed deaths globally, 3,007 in Hubei Province, 112 in the rest of mainland China, and 690 outside mainland China. Based on the confirmed cases reported globally, the case fatality rate varies from approximately 1 percent to 4 percent.
24. As reported by WHO on 09 March 2020, there have been 28,843 confirmed cases reported outside of mainland China, an increase of 3,954. Italy has reported 7,375 confirmed COVID-19 cases (1,492 new cases) and 366 deaths (132 new). Iran has reported 6,566 confirmed COVID-19 cases (743 new cases) and 194 deaths (49 new). The Republic of Korea has reported a total 7,382 confirmed COVID-19 cases (248 new cases) and 51 deaths (1 new).
25. As reported by WHO on 09 March 2020, three new countries and territories (Bangladesh, Albania and Paraguay) have reported confirmed cases of COVID-19 in the past 24 hours.

Risk Assessment – Global / Regional / National

26. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
27. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 08 March 2020 which considers:
 - The risk associated with COVID-19 infection for people from the EU/EEA and UK is currently considered to be **moderate to high**.
 - The risk of acquiring the disease for people from the EU/EEA and the UK travelling/resident in areas with no cases, or multiple imported cases, or limited local transmission, is currently considered **low to moderate**.

- The risk for people from the EU/EEA and the UK travelling/resident in areas with more widespread local transmission is currently considered to be **high**.
- The risk of the occurrence of clusters associated with COVID-19 in other countries in the EU/EEA and the UK is currently considered **moderate to high**.
- The risk of widespread and sustained transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate to high** with more countries reporting more cases and clusters.
- The risk for healthcare system capacity in the EU/EEA and the UK in the coming weeks is considered **moderate to high**.

28. Environment, Science and Research Limited (ESR) issued a risk assessment summary on **09 March 2020** that determined the following.

Risk Summary:

This assessment is undertaken based on the information available on 09 March 2020. This is a rapidly evolving situation and there is currently limited information available to inform this risk assessment. Therefore, the level of uncertainty is high, and this assessment takes a precautionary approach.

- **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains **high**.
- Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently **moderate**. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
- **Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **high**, the likelihood of sustained transmission is **moderate** and the likelihood of widespread outbreaks is **low**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **very high**.
- **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more

cases in New Zealand would be **high** both for public health staff, the wider health sector and the community.

- **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **high**.

29. **Modelling of importation risk:** ESR has provided the following advice on the potential number of cases arriving in New Zealand from overseas - note this excludes local person to person transmission. Based on country case data, the number of importations to New Zealand as 06 March 2020 and current rates of travel, the number of imported cases expected to arrive in New Zealand over the 7-day period from 06 March 2020 is between one and eight cases.

WHOLE OF GOVERNMENT RESPONSE – New Zealand Border Response

30. The **WHO** does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
31. New Zealand has implemented temporary border measures to reduce the chances of COVID-19 spreading within New Zealand. People who have left or transited through mainland China and Iran (Category 1a countries) in the 14 days prior to boarding are denied entry into New Zealand. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand.
32. Countries in Category 1b are northern Italy and the Republic of Korea. People who have travelled in these countries in the past 14 days may enter New Zealand but are requested to undertake 14 days self-isolation and register with Healthline. A map of Northern Italy with details is on Ministry of Health website at <https://www.health.govt.nz/sites/default/files/images/our-work/diseases-conditions/map-showing-specified-areas-of-italy.png>
33. Current border-related measures include the following:
- Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO.
 - Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers. **On 09 March 2020, we emailed key border stakeholders to inform them COVID-19 will be a quarantinable disease from 11 March 2020.**

- Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea.
 - Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
 - Arranging for St John Ambulance to be present at Auckland International Airport when international flights are arriving. Once arrangements are confirmed, paramedics will be available to check any unwell travellers reported from arriving aircraft, to take temperatures of any passengers referred by border officials and will also be present for travellers to speak to if they have concerns about their health. This will enhance the health presence already at the airport.
 - Asking airlines to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
 - Asking travellers using E-gates if they have been in or transited mainland China, Iran, northern Italy or the Republic of Korea in the last 14 days.
 - Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China, Iran, Northern Italy and the Republic of Korea. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.
 - Establishing a dedicated Healthline phone line for persons self-isolating to register and Healthline will be regularly checking on the welfare and wellbeing of those persons registered.
 - Registering passengers with Healthline as they arrive at airports.
 - Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.
 - Responding to reports of ill travellers.
 - Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.
34. On 10 March 2020, the New Zealand Customs Service data reported one flight arrived at Auckland International Airport yesterday from mainland China with 54 passengers on board. No direct flights arrived from other category 1 countries. Several flights from other countries had passengers or crew who had departed or transited through mainland China, Iran, the Republic of Korea or northern Italy in the last 14 days. Passengers are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries.
35. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New

Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure. A sub-group has been established (which also includes an Air NZ representative) to consider potential exit measures to protect Pacific Island countries and territories and to comply with entry requirements that other countries may impose if/when New Zealand experiences sustained community transmission.

New Zealand Health Sector Response

36. The Ministry of Health remains the single point of up-to-date information on COVID-19.
37. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
38. ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
39. At 0820 on 10 March 2020 ESR reports 5 confirmed cases, 2 probable cases, 281 negative results and 47 cases under investigation.

National Telehealth Service Update

40. On 09 March 2020 Healthline managed 3,365 calls. Many callers seeking information do not wish to disclose any information about themselves. On 09 March 2020 there were 548 callers with concerns about COVID-19 who disclosed some information. 115 callers diverted to the Healthline COVID-19 website for information.
41. Of the callers concerned about COVID-19 who did disclose some information:
 - 138 callers were experiencing cold or flu-like symptoms
 - 157 (29%) were regarding people who had been outside NZ in the previous 4 weeks
 - 96% received self-care advice or information
 - 20 required the use of an interpreter.
42. Details on people registered and / or in self-isolation are:
 - 2,334 registered (people or households) and currently in isolation (includes an estimated 350 passengers who are in isolation and whose arrival cards have not yet been received / entered to database since 06 March 2020)
 - 5,929 have completed isolation
 - 8,963 total registrations.

See Figures 3 and 4 in the Appendices for information on self-isolation.

Welfare

43. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
44. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. **The NWCG will meet again on 11 March 2020.** Guidance for CDEM Group Welfare Managers is being drafted. The first advice document, focusing on shelter & accommodation, has been shared with CDEM Groups and District Health Boards. The Psychosocial support sub-function met on 05 March 2020 and will continue to meet fortnightly.
45. An all of government factsheet has been prepared in both English and simplified Chinese to provide information on support available for people who have self-isolated and how to access it. Further translations are in progress. The factsheet is available on the Ministry of Health website and has been shared with agencies and CDEM groups.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 09 March 2020

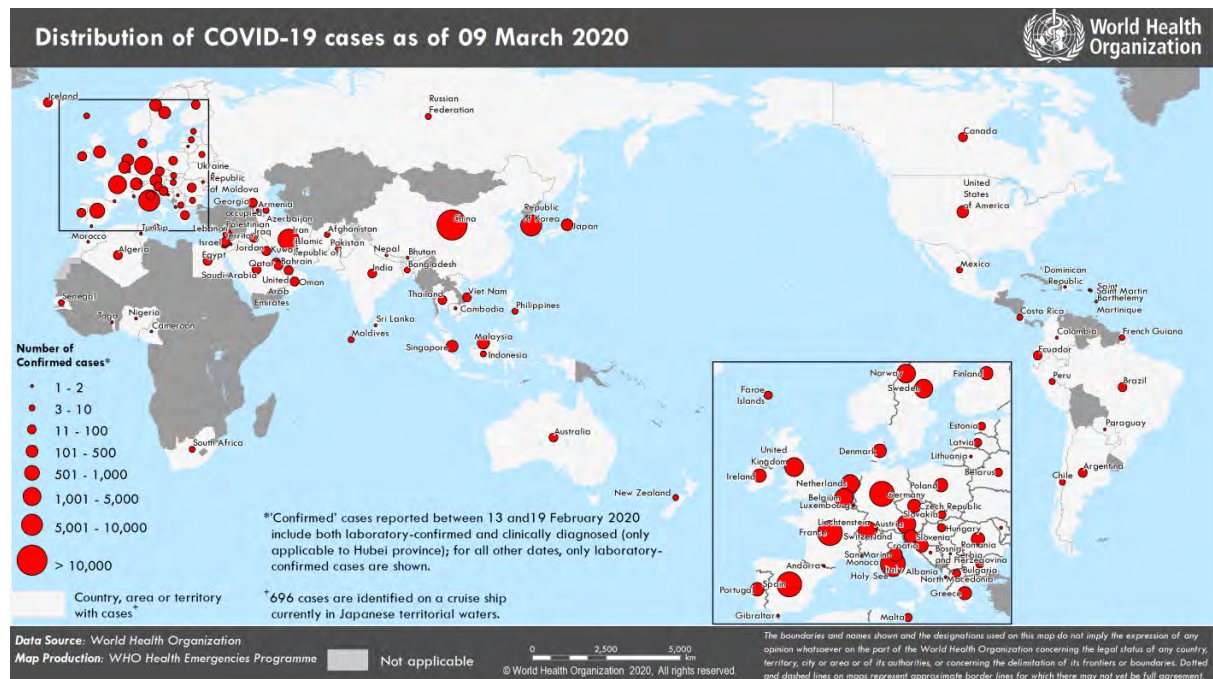


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region with complete date of reporting through 09 March 2020

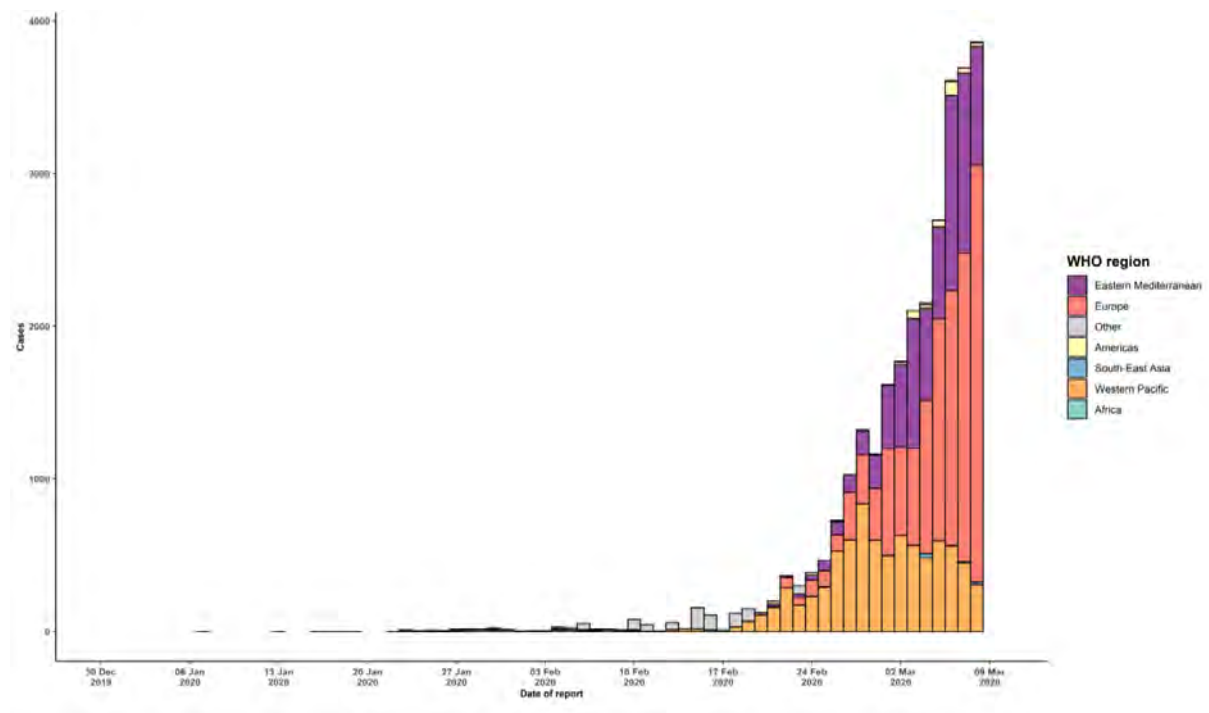


Figure 3: Healthline COVID-19 related call outcomes

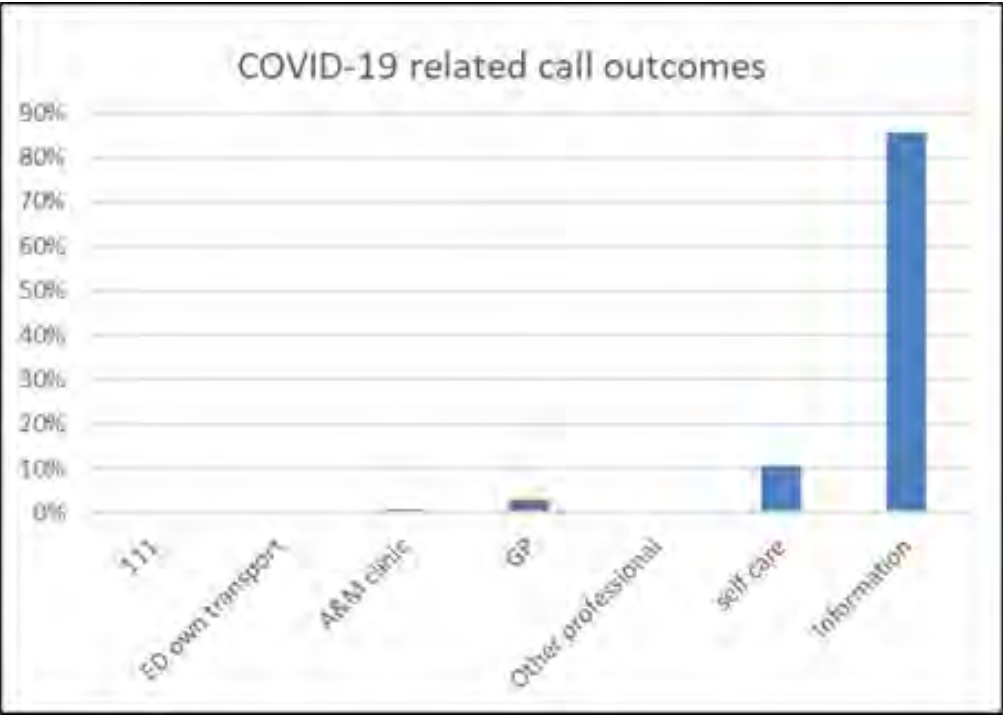
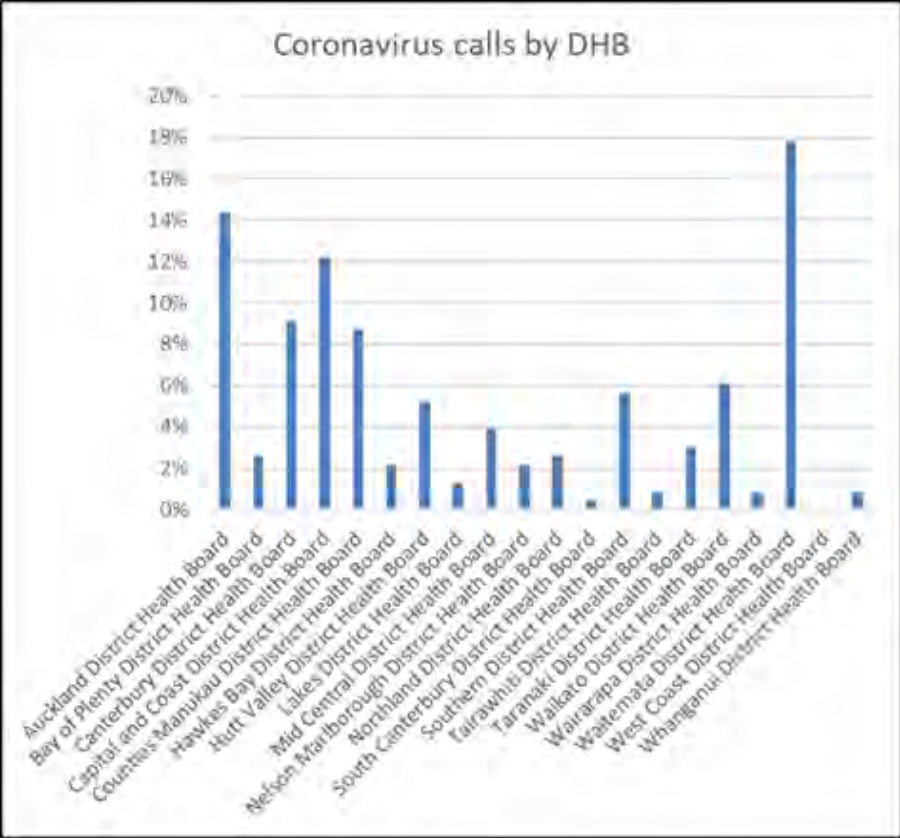


Figure 4: Healthline COVID-19 calls by DHB



NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Wednesday 11 March 2020.**

Prepared by: Li-Chia Yeh, NHCC Intelligence

Approved by: Hamish Gibson, NHCC Response Manager

ENDS

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea (including those who have transited through China, Iran, northern Italy and South Korea) is that they should self-isolate for a period of 14 days.

People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at **09 March 2020**, **8,963** people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet (https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.

d. Number of countries that have reported COVID-19

Q: Why do the country numbers used by New Zealand vary from the World Health Organisation numbers?

A: The WHO includes Hong Kong, Taipei / Taiwan and Macau under mainland China. New Zealand counts these territories as outside mainland China.

IN CONFIDENCE



SITREP 51
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 11 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 11 March 2020.

SUMMARY

1. New Zealand is in the **Keep it Out / Stamp It Out phase** with continued border management and containment measures in place.
2. An outbreak of novel coronavirus (COVID-19) continues in mainland China with the epicentre in Hubei Province. The number of confirmed cases reported in mainland China **is trending down**. The numbers of confirmed cases and deaths in the **Republic of Korea, Iran and Italy** continue to rise. **Many EU countries are reporting significant increases in the number of confirmed cases. There are five confirmed cases in New Zealand.**
3. **As reported by the World Health Organization (WHO) on 10 March 2020**, globally there has been an increase of **4,125** confirmed cases (**113,702** confirmed cases in total) and **203** new deaths reported (**4,012** confirmed deaths in total). Of the confirmed cases, there has been an increase of **4,105** cases outside of mainland China. In total, **109** countries and territories have reported confirmed cases. The three main regions that have reported new cases are Western Pacific with **232** new cases, European region with **2,886** new cases, and the Eastern Mediterranean region with **798** new cases. **25** new cases have been reported in the Americas region.
4. No change to the risk status as reported by the World Health Organization (WHO). On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). New Zealand's risk assessment is that the likelihood of more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high, the likelihood of sustained

transmission is moderate, and the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.

5. WHO has provided updated travel advice, details available through this link: https://www.who.int/ith/2019-nCoV_advice_for_international_traffic-rev/en/
6. The significant details include advising against travel restrictions to affected countries, performing hand hygiene frequently, covering the nose and with flexed elbow or paper tissue when coughing or sneezing, refraining from touching the mouth and nose, and that it is not necessary to wear a face mask if exhibiting no symptoms.

KEY HIGHLIGHTS

7. There are no new additional cases of COVID-19 in New Zealand.
8. All five confirmed cases are doing well. Four of them remain in isolation at home. The first case, a patient in their 60s who was admitted to hospital is also doing well and was discharged yesterday.
9. All five cases follow the pattern identified by the World Health Organisation joint China Mission in February that around 80% of all human to human transmission occurred in families.
10. Yesterday it was announced that COVID-19 would become a quarantinable disease effective from today.
11. Testing of possible and suspected cases continues. 331 tests have returned as negative.
12. The Ministry of Health is working hard with the broader sector to continue a strong response to the 'stamp it out' phase of our pandemic planning tailored to COVID-19.
13. We are continuing to progress making it easier for health professionals who have retired or are no longer practicing returning to work if needed in a pandemic.
14. We have talked with both the Medical Council and Nursing Council to discuss their plans to accelerate the recertification process for former health professionals if needed to respond to pressure on health services in a pandemic.
15. Healthline's dedicated COVID-19 number, 0800 358 5453, is free and available 24 hours a day, 7 days a week.
16. Healthline's latest advice shows 6,194 people have now completed self-isolation, while 2,145 people (or households) are currently registered as being in self-isolation.
17. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

18. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
19. We continue to regularly review border restrictions and advice around any changes required.

OUTBREAK SITUATION

20. As of **10 March 2020**, there are **five confirmed cases** of COVID-19 in New Zealand.
21. **As reported by the World Health Organisation (WHO) on 10 March 2020**, there are **113,702** confirmed cases of COVID-19 reported globally, an increase of **4,125**. Of the **20** new confirmed cases in mainland China **17** are from Hubei Province.
22. **As reported by WHO on 10 March 2020**, there are **4,012** confirmed deaths globally, **3,024** in Hubei Province, **112** in the rest of mainland China, and **876** outside mainland China. Based on the confirmed cases reported globally, the case fatality rate varies from approximately 1 percent to 4 percent.
23. **As reported by WHO on 10 March 2020**, there have been **32,948** confirmed cases reported outside of mainland China, an increase of **4,106**. Italy has reported **9,172** confirmed COVID-19 cases (**1,797** new cases) and **463** deaths (**97** new). Iran has reported **7,161** confirmed COVID-19 cases (**595** new cases) and **237** deaths (**43** new). The Republic of Korea has reported a total **7,513** confirmed COVID-19 cases (**131** new cases) and **54** deaths (**3** new).
24. **As reported by WHO on 10 March 2020**, **five** new countries and territories (**Brunei Darussalam, Mongolia, Cyprus, Guernsey and Panama**) have reported confirmed cases of COVID-19 in the past 24 hours.

Risk Assessment – Global / Regional / National

25. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
26. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 08 March 2020 which considers:
 - The risk associated with COVID-19 infection for people from the EU/EEA and UK is currently considered to be **moderate to high**.
 - The risk of acquiring the disease for people from the EU/EEA and the UK travelling/resident in areas with no cases, or multiple imported cases, or limited local transmission, is currently considered **low to moderate**.
 - The risk for people from the EU/EEA and the UK travelling/resident in areas with more widespread local transmission is currently considered to be **high**.

- The risk of the occurrence of clusters associated with COVID-19 in other countries in the EU/EEA and the UK is currently considered **moderate to high**.
- The risk of widespread and sustained transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate to high** with more countries reporting more cases and clusters.
- The risk for healthcare system capacity in the EU/EEA and the UK in the coming weeks is considered **moderate to high**.

27. Environment, Science and Research Limited (ESR) issued a risk assessment summary on 09 March 2020 that determined the following.

Risk Summary:

This assessment is undertaken based on the information available on 09 March 2020. This is a rapidly evolving situation and there is currently limited information available to inform this risk assessment. Therefore, the level of uncertainty is high, and this assessment takes a precautionary approach.

- **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains **high**.
- Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently **moderate**. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
- **Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **high**, the likelihood of sustained transmission is **moderate**, and the likelihood of widespread outbreaks is **low**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **very high**.
- **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **high** both for public health staff, the wider health sector and the community.
- **Public health risk:** Given the assessment of the likelihood of

importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **high**.

- 28. Modelling of importation risk:** ESR has provided the following advice on the potential number of cases arriving in New Zealand from overseas - note this excludes local person to person transmission. Based on country case data, the number of importations to New Zealand as 06 March 2020 and current rates of travel, the number of imported cases expected to arrive in New Zealand over the 7-day period from 06 March 2020 is between one and eight cases.

WHOLE OF GOVERNMENT RESPONSE – New Zealand Border Response

- 29.** The **WHO** does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
- 30.** New Zealand has implemented temporary border measures to reduce the chances of COVID-19 spreading within New Zealand. People who have left or transited through mainland China and Iran (Category 1a countries) in the 14 days prior to boarding are denied entry into New Zealand. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand.
- 31.** Countries in Category 1b are northern Italy and the Republic of Korea. People who have travelled in these countries in the past 14 days may enter New Zealand but are requested to undertake 14 days self-isolation and register with Healthline. A map of Northern Italy with details is on Ministry of Health website at <https://www.health.govt.nz/sites/default/files/images/our-work/diseases-conditions/map-showing-specified-areas-of-italy.png>
- 32.** Current border-related measures include the following:
- Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO.
 - Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers. On 09 March 2020, we emailed key border stakeholders to inform them COVID-19 will be a quarantinable disease from 11 March 2020.
 - Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea.

- Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
 - Arranging for St John Ambulance to be present at Auckland International Airport when international flights are arriving. Once arrangements are confirmed, paramedics will be available to check any unwell travellers reported from arriving aircraft, to take temperatures of any passengers referred by border officials and will also be present for travellers to speak to if they have concerns about their health. This will enhance the health presence already at the airport.
 - Asking airlines to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
 - Asking travellers using E-gates if they have been in or transited mainland China, Iran, northern Italy or the Republic of Korea in the last 14 days.
 - Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China, Iran, Northern Italy and the Republic of Korea. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.
 - Establishing a dedicated Healthline phone line for persons self-isolating to register and Healthline will be regularly checking on the welfare and wellbeing of those persons registered.
 - Registering passengers with Healthline as they arrive at airports.
 - Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.
 - Responding to reports of ill travellers.
 - Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.
33. On **11 March 2020**, the New Zealand Customs Service data reported **one flight** arrived at Auckland International Airport yesterday from mainland China with **29 passengers** on board. No direct flights arrived from other category 1 countries. Several flights from other countries had passengers or crew who had departed or transited through mainland China, Iran, the Republic of Korea or northern Italy in the last 14 days. Passengers are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries.
34. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border

measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure. A sub-group has been established (which also includes an Air NZ representative) to consider potential exit measures to protect Pacific Island countries and territories and to comply with entry requirements that other countries may impose if/when New Zealand experiences sustained community transmission.

New Zealand Health Sector Response

35. The Ministry of Health remains the single point of up-to-date information on COVID-19.
36. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
37. ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
38. At 0820 on 11 March 2020 ESR reports 5 confirmed cases, 2 probable cases, 331 negative results and 28 cases under investigation.

National Telehealth Service Update

39. On 10 March 2020 Healthline managed 2,930 calls. Many callers seeking information do not wish to disclose any information about themselves. On 10 March 2020 there were 545 callers with concerns about COVID-19 who disclosed some information. 126 callers diverted to the Healthline COVID-19 website for information.
40. Of the callers concerned about COVID-19 who did disclose some information:
 - 134 callers were experiencing cold or flu-like symptoms
 - 165 (30%) were regarding people who had been outside NZ in the previous 4 weeks
 - 91% received self-care advice or information
 - 29 required the use of an interpreter.
41. Details on people registered and / or in self-isolation are:
 - 2,145 registered (people or households) and currently in isolation (includes an estimated 350 passengers who are in isolation and whose arrival cards have not yet been received / entered to database since 06 March 2020)
 - 6,194 have completed isolation
 - 9,039 total registrations.

See Figures 3, 4 and 5 in the Appendices for information further detail.

Welfare

- 42.** The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
- 43.** NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. The NWCG will meet again on 11 March 2020. Guidance for CDEM Group Welfare Managers is being drafted. The first advice document, focusing on shelter & accommodation, has been shared with CDEM Groups and District Health Boards. The Psychosocial support sub-function met on 05 March 2020 and will continue to meet fortnightly.
- 44.** An all of government factsheet has been prepared in both English and simplified Chinese to provide information on support available for people who have self-isolated and how to access it. Further translations are in progress. The factsheet is available on the Ministry of Health website and has been shared with agencies and CDEM groups.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 09 March 2020

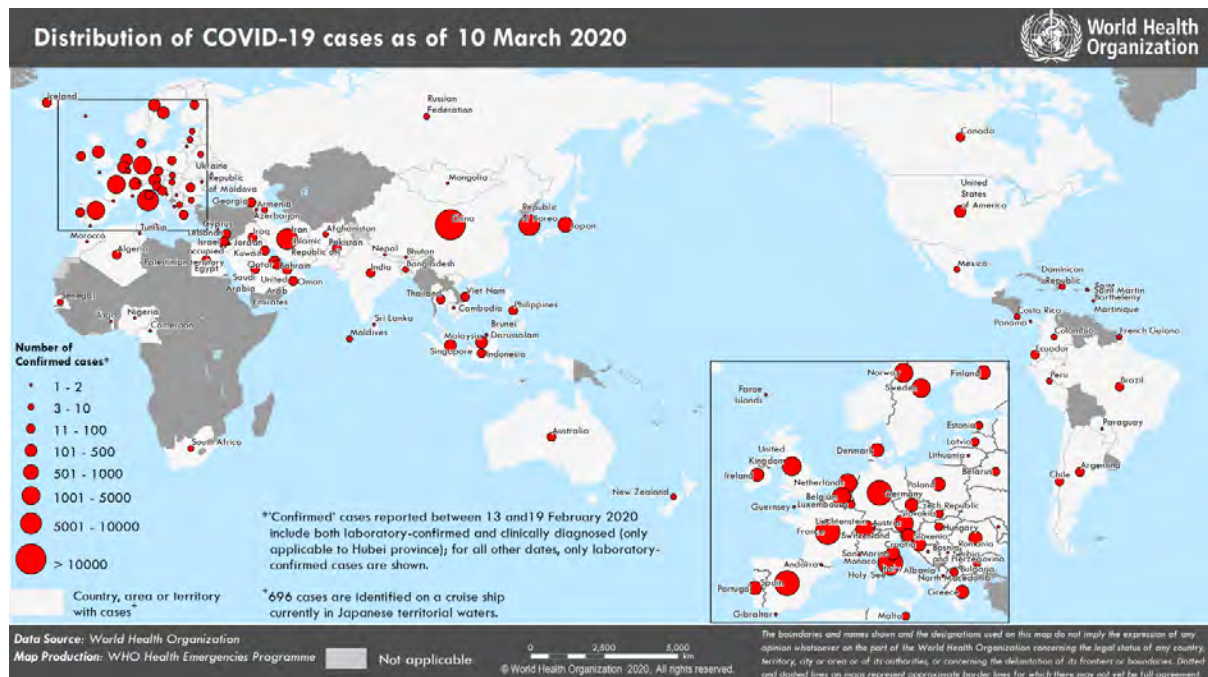


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region with complete date of reporting through 10 March 2020

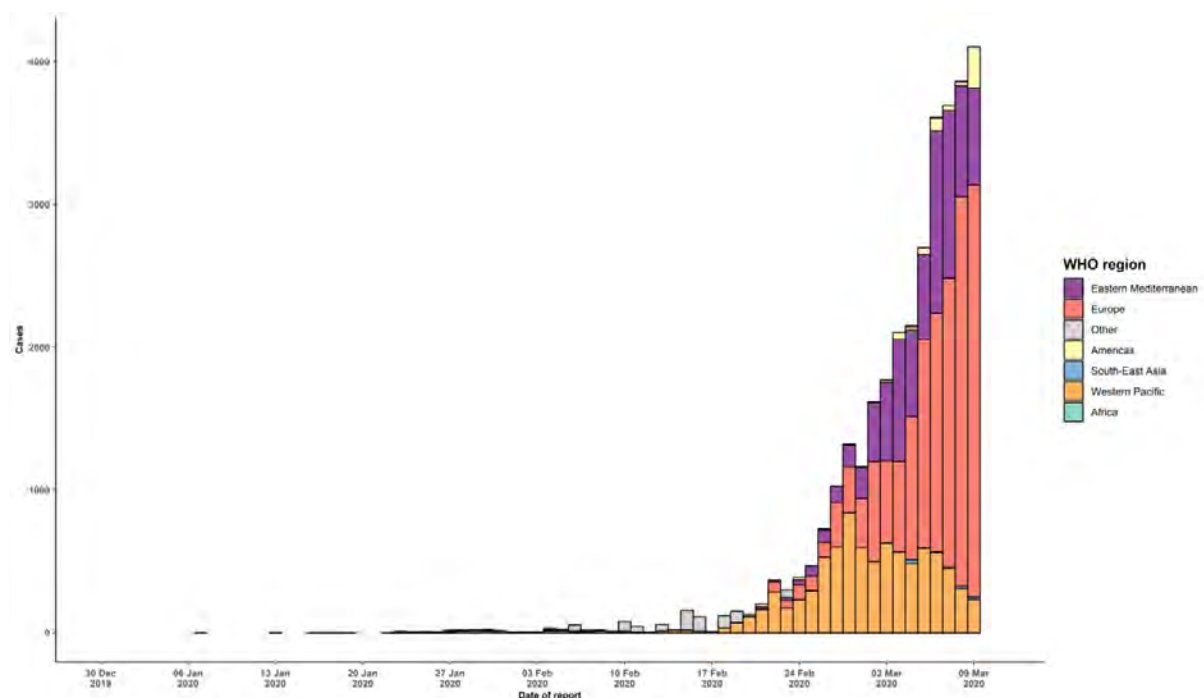


Figure 3: Healthline COVID-19 related call outcomes

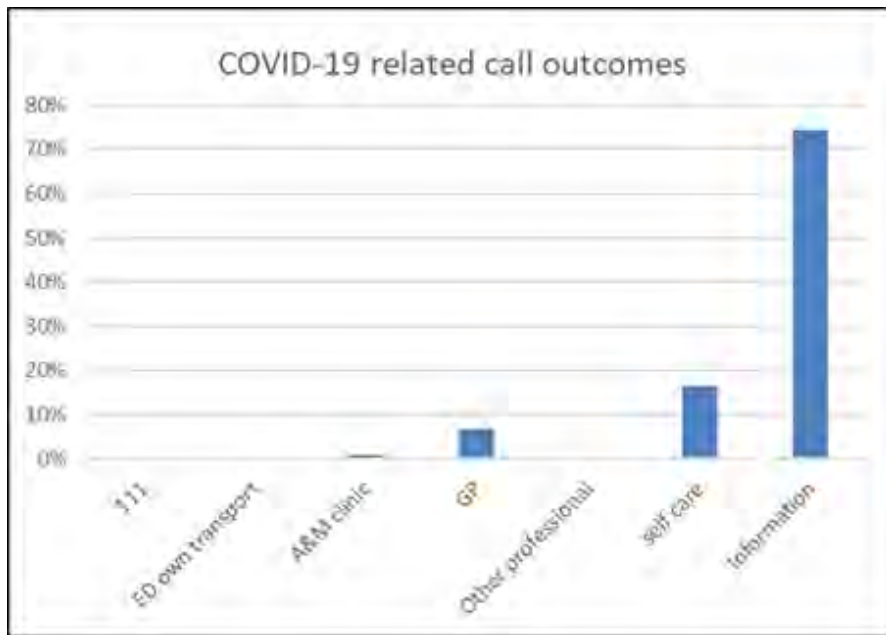


Figure 4: Healthline COVID-19 calls by DHB

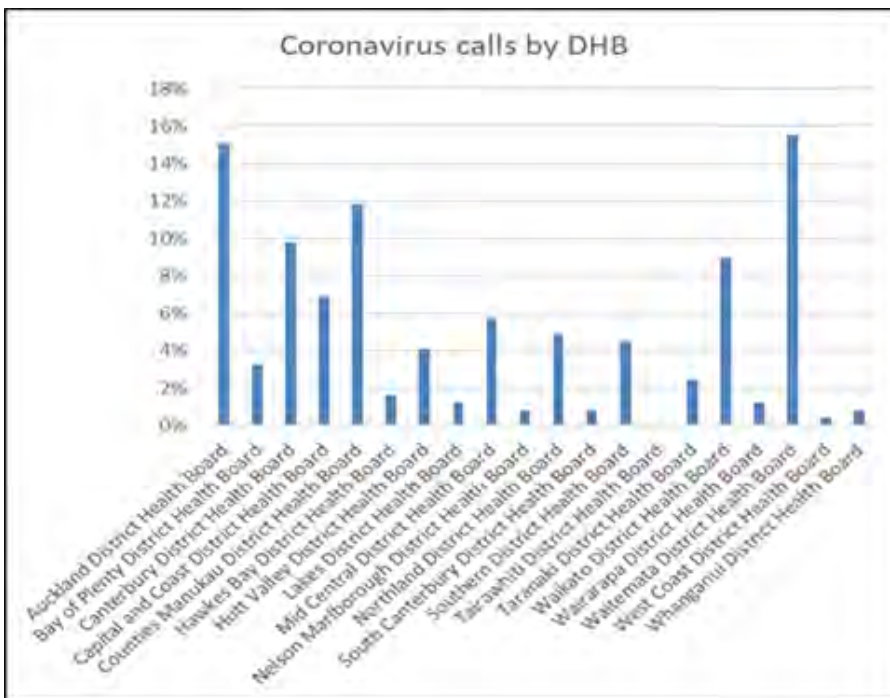


Figure 5: Isolation by location

Row Labels	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown	4	11	25	5	27	24	59	159	165	334	80	56	197	44	38	1228
North Shore		1			1	1	10	5	17	18	6		29	4	6	98
Auckland			1		1	3	2	10	14	16	3	3	28	5	6	92
Hamilton				1					3	12	1	4	4		6	31
Waipa			1													1
Manukau					3	4	5	4	6	14	15	9	21	15	4	100
Rotorua						1		1	1	4			2			9
Southland										3					1	4
Tasman		1											1			2
Christchurch			2	3	2	1	2	3	12	28	6	6	8	2		75
Waitakere					2		1	5	2	3			13	1		27
Lower Hutt						6				1			3	2		12
Rodney		3					1	3	4	4		1	2	1		19
Palmerston North										1	1					2
Dunedin		1	1		1				2	3			1			9
Papakura			1			1				1				1	1	5
Wellington								3	7	3	1	1				15
Taupo															1	1
Selwyn									2	4						6
Invercargill		1							1	2	1					5
Hastings						1		1	2	1						5
Gisborne								1		1					3	5
Matamata-Piako									2	1						3
Marlborough										2						2
Kapiti Coast					3			2	2	4	1					12
Porirua													2			2
Waikato		1								1						2
Tauranga									1	2	2					5
New Plymouth					1								1		1	3
Queenstown-Lakes							1								1	2
Far North							1									1
Whangarei															1	1
Franklin													2			2
Ashburton													1			1
Nelson									2	2						4
Central Otago													1			1
South Wairarapa				1												1
Rangitikei													1			1
Waitomo						1										1
Grand Total	4	19	32	9	41	43	82	197	245	465	117	80	317	75	69	1795

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Thursday 12 March 2020.**

Prepared by: Bridget Murphy and Martin Anderson, NHCC Intelligence

Approved by: Gina Anderson-Lister, NHCC Response Manager

ENDS

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea (including those who have transited through China, Iran, northern Italy and South Korea) is that they should self-isolate for a period of 14 days.

People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at **10 March 2020**, **9,039** people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet (https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.

d. Number of countries that have reported COVID-19

Q: Why do the country numbers used by New Zealand vary from the World Health Organisation numbers?

A: The WHO includes Hong Kong, Taipei / Taiwan and Macau under mainland China. New Zealand counts these territories as outside mainland China.

IN CONFIDENCE



SITREP 52
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 12 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 12 March 2020.

SUMMARY

1. New Zealand is in the **Stamp It Out phase** with continued border management and containment measures in place.
2. An outbreak of novel coronavirus (COVID-19) continues in mainland China with the epicentre in Hubei Province. The number of confirmed cases reported in mainland China **is trending down**. The numbers of confirmed cases and deaths in the **Republic of Korea, Iran and Italy** continue to rise. **Many EU countries are reporting significant increases in the number of confirmed cases. There are five confirmed cases in New Zealand.**
3. **As reported by the World Health Organization (WHO) on 11 March 2020**, globally there has been an increase of **4,627** confirmed cases (**118,326** confirmed cases in total) and **280** new deaths reported (**4,292** confirmed deaths in total). Of the confirmed cases, there has been an increase of **4,130** cases outside of mainland China. In total, **113** countries and territories have reported confirmed cases. The three main regions that have reported new cases are Western Pacific with **355** new cases, European region with **2,992** new cases, and the Eastern Mediterranean region with **926** new cases. **265** new cases have been reported in the Americas region.
4. No change to the risk status as reported by WHO. On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). **On 11 March 2020, WHO stated that COVID-19 can be characterized as a global pandemic.** New Zealand's risk assessment is that the likelihood of more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high, the likelihood of sustained transmission is moderate, and the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.

5. WHO has provided updated travel advice, details available through this link: https://www.who.int/ith/2019-nCoV_advice_for_international_traffic-rev/en/
6. The significant details include advising against travel restrictions to affected countries, performing hand hygiene frequently, covering the nose and with flexed elbow or paper tissue when coughing or sneezing, refraining from touching the mouth and nose, and that it is not necessary to wear a face mask if exhibiting no symptoms.

KEY HIGHLIGHTS

7. **The World Health Organization has now declared COVID-19 a pandemic.** The announcement formalises New Zealand's current approach to COVID-19. All our planning has been on the basis that COVID-19 was the early stages of a pandemic.
8. **There are no additional confirmed cases of COVID-19 in New Zealand. All five cases currently follow the pattern identified by the World Health Organisation joint China Mission in February that around 80% of all human to human transmission occurred in families.**
9. **Contact tracing is progressing well for all cases.**
10. **COVID-19 is now a quarantinable disease.**
11. **Yesterday (11 March) the Prime Minister announced that all of Italy would be added to Category 1b for temporary border measures and that she is expecting further advice about other regions in the coming 24 hours.**
12. Category 1b locations **do not have border restrictions** but all people travelling to New Zealand from them are expected to **undertake 14-days self-isolation** and register with Healthline.
13. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
14. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
15. We continue to regularly review border restrictions and advice around any changes required.

OUTBREAK SITUATION

16. As of **12 March 2020**, there are **five confirmed cases, two probable cases and 350 negative cases** of COVID-19 in New Zealand. **19 cases are classified as under investigation.**
17. **As reported by the World Health Organisation (WHO) on 11 March 2020**, there are **118,326** confirmed cases of COVID-19 reported globally, an

increase of 4,627. Of the 24 new confirmed cases in mainland China 13 are from Hubei Province.

18. As reported by WHO on 11 March 2020, there are 4,292 confirmed deaths globally, 3,046 in Hubei Province, 112 in the rest of mainland China, and 1,134 outside mainland China. Based on the confirmed cases reported globally, the case fatality rate varies from approximately 1 percent to 4 percent.
19. As reported by WHO on 11 March 2020, there have been 40,541 confirmed cases reported outside of mainland China, an increase of 7,593. Italy has reported 10,149 confirmed COVID-19 cases (977 new cases) and 631 deaths (168 new). Iran has reported 8,042 confirmed COVID-19 cases (881 new cases) and 291 deaths (54 new). The Republic of Korea has reported a total 7,755 confirmed COVID-19 cases (242 new cases) and 60 deaths (6 new).
20. As reported by WHO on 11 March 2020, four new countries and territories (Bolivia [Plurinational State of], Jamaica, Burkina Faso and Democratic Republic of the Congo) have reported confirmed cases of COVID-19 in the past 24 hours.

Risk Assessment – Global / Regional / National

21. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
22. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 08 March 2020 which considers:
 - The risk associated with COVID-19 infection for people from the EU/EEA and UK is currently considered to be **moderate to high**.
 - The risk of acquiring the disease for people from the EU/EEA and the UK travelling/resident in areas with no cases, or multiple imported cases, or limited local transmission, is currently considered **low to moderate**.
 - The risk for people from the EU/EEA and the UK travelling/resident in areas with more widespread local transmission is currently considered to be **high**.
 - The risk of the occurrence of clusters associated with COVID-19 in other countries in the EU/EEA and the UK is currently considered **moderate to high**.
 - The risk of widespread and sustained transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate to high** with more countries reporting more cases and clusters.
 - The risk for healthcare system capacity in the EU/EEA and the UK in the coming weeks is considered **moderate to high**.
23. Environment, Science and Research Limited (ESR) issued a risk assessment summary on 09 March 2020 that determined the following.

Risk Summary:

This assessment is undertaken based on the information available on 09 March 2020. This is a rapidly evolving situation and there is currently limited information available to inform this risk assessment. Therefore, the level of uncertainty is high, and this assessment takes a precautionary approach.

- **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains **high**.
- Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently **moderate**. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
- **Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **high**, the likelihood of sustained transmission is **moderate**, and the likelihood of widespread outbreaks is **low**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **very high**.
- **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **high** both for public health staff, the wider health sector and the community.
- **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **high**.

24. **Modelling of importation risk:** ESR has provided the following advice on the potential number of cases arriving in New Zealand from overseas - note this excludes local person to person transmission. Based on country case data, the number of importations to New Zealand as 06 March 2020 and current rates of travel, the number of imported cases expected to arrive in New Zealand over the 7-day period from 06 March 2020 is between one and eight cases.

WHOLE OF GOVERNMENT RESPONSE – New Zealand Border Response

25. The **WHO** does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
26. New Zealand has implemented temporary border measures to reduce the chances of COVID-19 spreading within New Zealand. People who have left or transited through mainland China and Iran (Category 1a countries) in the 14 days prior to boarding are denied entry into New Zealand. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand.
27. Countries in Category 1b are **Italy** and the Republic of Korea. People who have travelled in these countries in the past 14 days may enter New Zealand but are requested to undertake 14 days self-isolation and register with Healthline.
28. Current border-related measures include the following:
 - Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO.
 - Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers.
 - Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea.
 - Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
 - Arranging for St John Ambulance to be present at Auckland International Airport when international flights are arriving. Once arrangements are confirmed, paramedics will be available to check any unwell travellers reported from arriving aircraft, to take temperatures of any passengers referred by border officials and will also be present for travellers to speak to if they have concerns about their health. This will enhance the health presence already at the airport.
 - Asking airlines to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
 - Asking travellers using E-gates if they have been in or transited mainland China, Iran, **Italy**, the Republic of Korea and in the last 14 days.
 - Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China, Iran, Northern Italy and the

Republic of Korea. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.

- Establishing a dedicated Healthline phone line for persons self-isolating to register and Healthline will be regularly checking on the welfare and wellbeing of those persons registered.
 - Registering passengers with Healthline as they arrive at airports.
 - Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.
 - Responding to reports of ill travellers.
 - Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.
29. On **12 March 2020**, the New Zealand Customs Service data reported **one flight** arrived at Auckland International Airport yesterday from mainland China with **51 passengers** on board. No direct flights arrived from other category 1 countries. Several flights from other countries had passengers or crew who had departed or transited through mainland China, Iran, the Republic of Korea or northern Italy in the last 14 days. Passengers are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries.
30. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure. A sub-group has been established (which also includes an Air NZ representative) to consider potential exit measures to protect Pacific Island countries and territories and to comply with entry requirements that other countries may impose if/when New Zealand experiences sustained community transmission.

New Zealand Health Sector Response

31. The Ministry of Health remains the single point of up-to-date information on COVID-19.
32. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.

33. ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
34. At 0800 on 12 March 2020 ESR reports 5 confirmed cases, 2 probable cases, 350 negative results and 19 cases under investigation.

National Telehealth Service Update

35. On 11 March 2020 Healthline managed approximately 2,800 calls. Many callers seeking information do not wish to disclose any information about themselves. On 11 March 2020 there were 467 callers with concerns about COVID-19 who disclosed some information. 150 callers were diverted to the Healthline COVID-19 website for information.
36. Of the callers concerned about COVID-19 who did disclose some information:
- 147 callers were experiencing cold or flu-like symptoms
 - 137 (29%) were regarding people who had been outside NZ in the previous 4 weeks
 - 88% received self-care advice or information
 - 40 required the use of an interpreter.
37. Details on people registered and / or in self-isolation are:
- 2,842 registered (people or households) and currently in isolation (includes estimate of 100 people with data not yet received for Monday and Tuesday)
 - 6,279 have completed isolation
 - 9,821 total registrations.

See Figures 3, 4 and 5 in the Appendices for information further detail.

Welfare

38. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
39. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. The NWCG last met on 11 March 2020 and will meet again next week. Guidance for CDEM Groups is being prepared, and the first advice document focusing on shelter & accommodation has been shared with CDEM Groups and district health boards.

40. Welfare sub-functions have been meeting as needed. Shelter and Accommodation, Psychosocial Support, Financial Assistance, and Household Goods and Services have met or held workshops to address issues and coordinate across agencies.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 11 March 2020

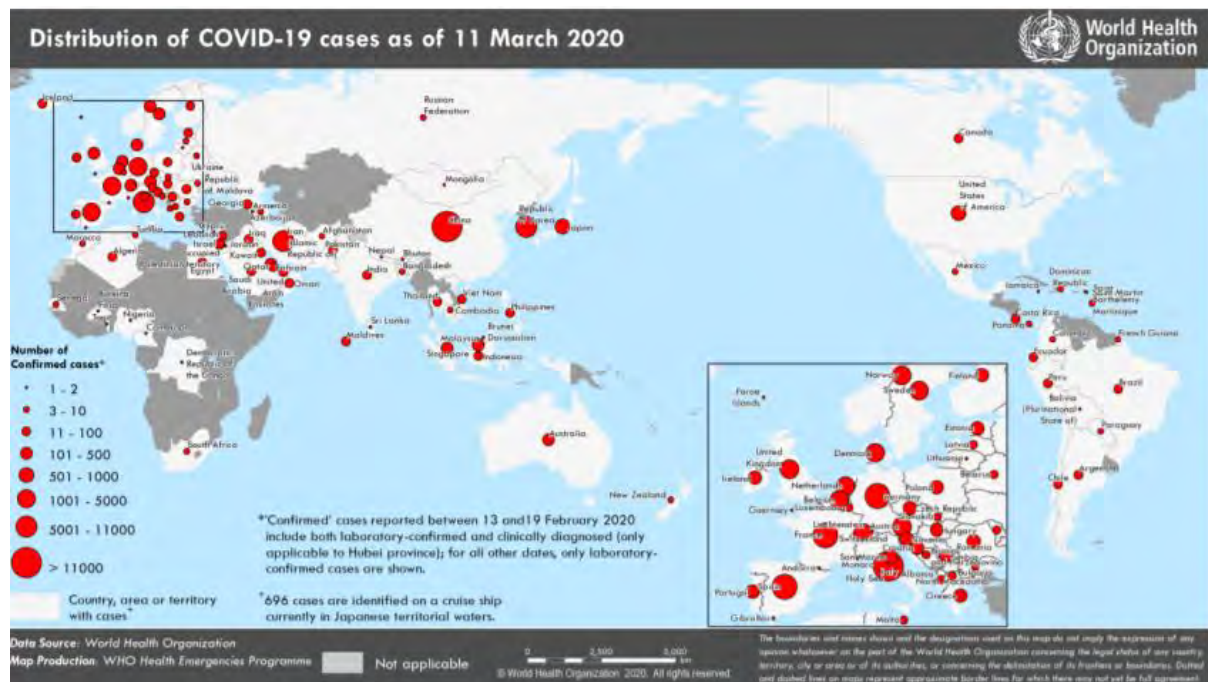


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region with complete date of reporting through 11 March 2020

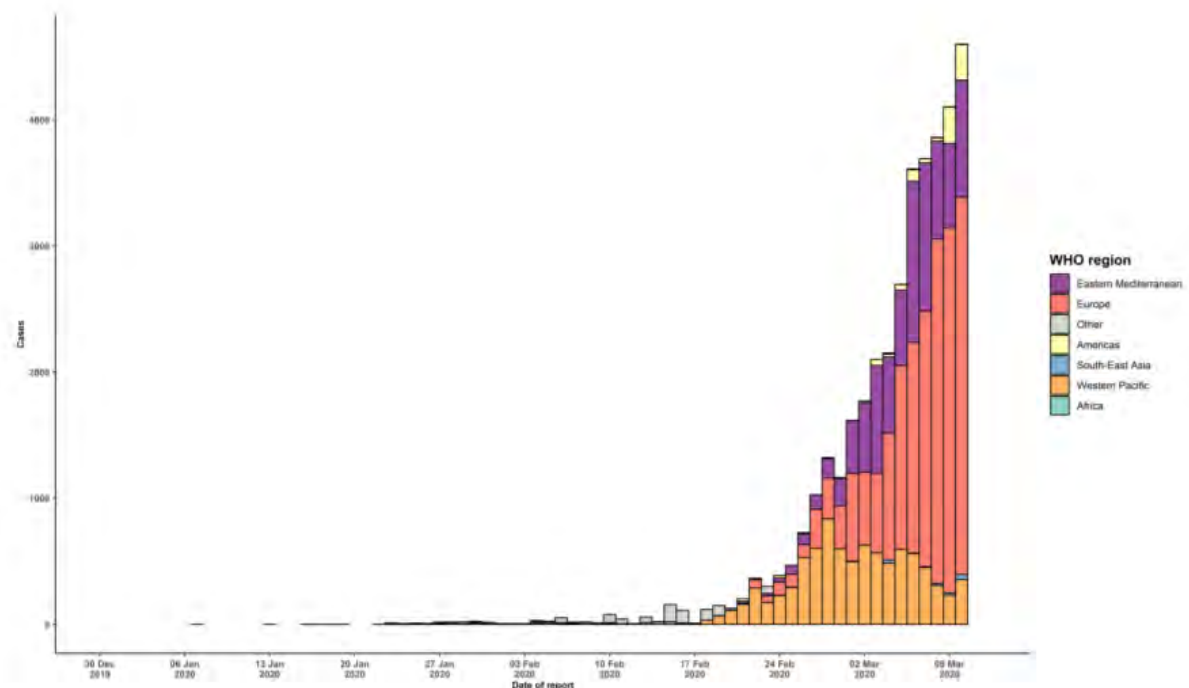


Figure 3: Healthline COVID-19 related call outcomes

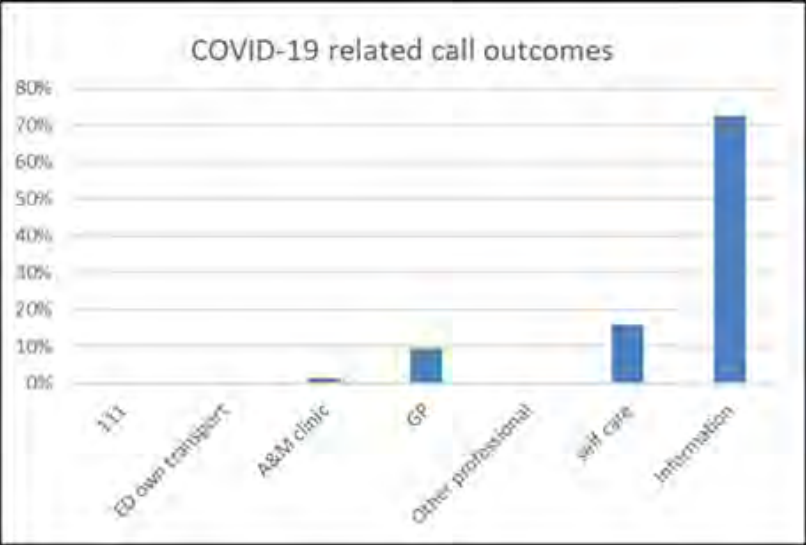


Figure 4: Healthline COVID-19 calls by DHB

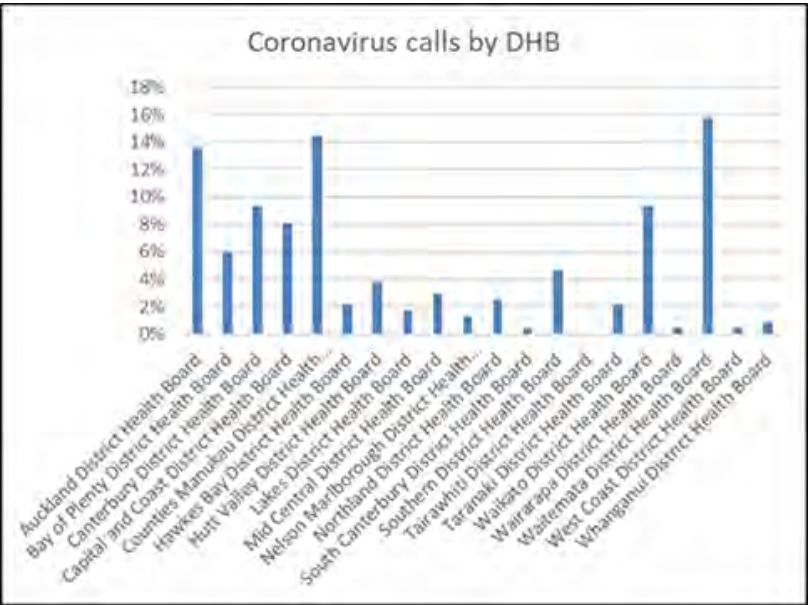


Figure 5: Isolation by location

Row Labels	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown	5	10	38	350	103	340	133	169	183	362	84	56	204	39	45	2121
North Shore		1		2		6	16	6	16	17	6	1	30	3	3	107
Auckland			2	1	6	9	6	12	13	15	3	3	25	2	8	105
Manukau				2	4	6	8	5	7	14	14	9	22	3	4	98
Rotorua				5		2		1	1	4			2			15
Waitakere	1				3		2	5	1	4			13			29
Lower Hutt						2		6				1	3			12
Palmerston North										1	1					2
Dunedin		1	1		1				2	4			1			10
Papakura					1			1		1				1	1	5
Wellington								3	7	3	1	1				15
Hastings						1		1	2	1						5
Gisborne								1		1					3	5
Porirua													1		1	2
Tauranga				1					1	2	2					6
New Plymouth					1								1			2
Ashburton														1	1	2
Nelson									2	2						4
Hamilton	2			4	1	1			3	12	1	3	4	1		32
Waipa			1													1
Southland						1				3						4
Tasman		1				1							1			3
Christchurch			4	3	3	4	6	3	12	23	6	10	8	2		84
Rodney		3		1			1	3	4	3		2	2			19
Ruapehu							2									2
Selwyn									2	4						6
Invercargill		1					2		1	2	1					7
Matamata-Piako									2	1						3
Marlborough										2						2
Kapiti Coast					3		1	1	1	5	1					12
Waikato		1					2			1						4
Queenstown-Lakes					1		3							1		5
Far North							1									1
Whangarei					1											1
Napier				1												1
Franklin						1				1			2			4
Central Otago													1			1
South Wairarapa			1	2												3
Rangitikei															1	1
Waitomo						1										1
Grand Total	8	18	47	372	128	375	183	217	260	488	120	86	320	53	67	2742

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Friday 13 March 2020.**

Prepared by: Bridget Murphy and Martin Anderson, NHCC Intelligence

Approved by: Gina Anderson-Lister, NHCC Response Manager

ENDS

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea (including those who have transited through China, Iran, northern Italy and South Korea) is that they should self-isolate for a period of 14 days.

People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at **11 March 2020**, **9,821** people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet (https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.

d. Number of countries that have reported COVID-19

Q: Why do the country numbers used by New Zealand vary from the World Health Organisation numbers?

A: The WHO includes Hong Kong, Taipei / Taiwan and Macau under mainland China. New Zealand counts these territories as outside mainland China.

IN CONFIDENCE



SITREP 53
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 13 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 13 March 2020.

SUMMARY

1. New Zealand is in the **Stamp It Out phase** with continued border management and containment measures in place.
2. An outbreak of novel coronavirus (COVID-19) continues in mainland China with the epicentre in Hubei Province. The number of confirmed cases reported in mainland China **is trending down**. The numbers of confirmed cases and deaths in the **Republic of Korea, Iran and Italy** continue to rise. **Many EU countries are reporting significant increases in the number of confirmed cases. There are five confirmed cases and two probable cases in New Zealand.**
3. **There are no reported confirmed cases of COVID-19 across Pacific Island countries. There are potential cases in Cook Islands and Fiji. ESR has confirmed that the potential case in Tonga is not COVID-19. Two COVID-19 cases have been confirmed in Hawai'i (a key port of entry for North Pacific compact states). One case has also been confirmed in French Polynesia; recently returned from Paris.**
4. **As reported by the World Health Organization (WHO) on 12 March 2020, globally there has been an increase of 6,729 confirmed cases (125,048 confirmed cases in total) and 321 new deaths reported (4,613 confirmed deaths in total). Of the confirmed cases, there has been an increase of 6,714 cases outside of mainland China. In total, 117 countries and territories have reported confirmed cases. The three main regions that have reported new cases are Western Pacific with 207 new cases, European region with 4,776 new cases, and the Eastern Mediterranean region with 1,337 new cases. 339 new cases have been reported in the Americas region.**

5. No change to the risk status as reported by WHO. On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). On 11 March 2020, WHO stated that COVID-19 can be characterized as a global pandemic. New Zealand's risk assessment is that the likelihood of more imported cases of COVID-19 infection is high. The likelihood of limited transmission is high, the likelihood of sustained transmission is moderate, and the likelihood of widespread outbreaks is low. The overall public health risk from this event is considered high.
6. WHO has provided updated travel advice, details available through this link: https://www.who.int/ith/2019-nCoV_advice_for_international_traffic-rev/en/
7. The significant details include advising against travel restrictions to affected countries, performing hand hygiene frequently, covering the nose and with flexed elbow or paper tissue when coughing or sneezing, refraining from touching the mouth and nose, and that it is not necessary to wear a face mask if exhibiting no symptoms.

KEY HIGHLIGHTS

8. For the sixth consecutive day there have been no additional confirmed cases of COVID-19 in New Zealand. All five cases currently follow the pattern identified by the WHO joint China Mission in February that around 80% of all human to human transmission occurred in families.
9. **Contact tracing for the confirmed cases is now complete.**
10. The WHO has now declared COVID-19 a pandemic. The announcement formalises New Zealand's current approach to COVID-19. All our planning has been on the basis that COVID-19 was the early stages of a pandemic.
11. COVID-19 is now a quarantinable disease.
12. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
13. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
14. We continue to regularly review border restrictions and advice around any changes required.

OUTBREAK SITUATION

15. As of **13 March 2020**, there are five confirmed cases, two probable cases and **379 negative cases** of COVID-19 in New Zealand. **28 cases are classified as under investigation.**

16. As reported by the WHO on 12 March 2020, there are 125,048 confirmed cases of COVID-19 reported globally, an increase of 6,729. Of the 15 new confirmed cases in mainland China 8 are from Hubei Province.
17. As reported by WHO on 12 March 2020, there are 4,613 confirmed deaths globally, 3,056 in Hubei Province, 113 in the rest of mainland China, and 1,433 outside mainland China. Based on the confirmed cases reported globally, the case fatality rate varies from approximately 1 percent to 4 percent.
18. As reported by WHO on 12 March 2020, there have been 44,255 confirmed cases reported outside of mainland China, an increase of 6,714. Italy has reported 12,462 confirmed COVID-19 cases (2,313 new cases) and 827 deaths (196 new). Iran has reported 9,000 confirmed COVID-19 cases (958 new cases) and 354 deaths (63 new). The Republic of Korea has reported a total 7,869 confirmed COVID-19 cases (114 new cases) and 6 deaths (6 new).
19. As reported by WHO on 12 March 2020, four new countries and territories (French Polynesia, Turkey, Honduras and Côte d'Ivoire) have reported confirmed cases of COVID-19 in the past 24 hours.

Risk Assessment – Global / Regional / National

20. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
21. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.
 - The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.

- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

22. Environment, Science and Research Limited (ESR) issued a risk assessment summary on 09 March 2020 that determined the following.

Risk Summary:

This assessment is undertaken based on the information available on 09 March 2020. This is a rapidly evolving situation and there is currently limited information available to inform this risk assessment. Therefore, the level of uncertainty is high, and this assessment takes a precautionary approach.

- **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains **high**.
- Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently **moderate**. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
- **Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **high**, the likelihood of sustained transmission is **moderate**, and the likelihood of widespread outbreaks is **low**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **very high**.

- **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **high** both for public health staff, the wider health sector and the community.
 - **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **high**.
23. **Modelling of importation risk:** ESR has provided the following advice on the potential number of cases arriving in New Zealand from overseas - note this excludes local person to person transmission. **Based on country case data, the number of importations to New Zealand as of 13 March 2020 and current rates of travel, the number of imported cases expected to arrive in New Zealand over the 7-day period from 13 March remains between one and eight cases.**

WHOLE OF GOVERNMENT RESPONSE – New Zealand Border Response

24. The WHO does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
25. New Zealand has implemented temporary border measures to reduce the chances of COVID-19 spreading within New Zealand. People who have left or transited through mainland China and Iran (Category 1a countries) in the 14 days prior to boarding are denied entry into New Zealand. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand.
26. Countries in Category 1b are Italy and the Republic of Korea. People who have travelled in these countries in the past 14 days may enter New Zealand but are requested to undertake 14 days self-isolation and register with Healthline.
27. Current border-related measures include the following:
- Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO.
 - Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers.

- Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea.
 - Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
 - Arranging for St John Ambulance to be present at Auckland International Airport when international flights are arriving. Once arrangements are confirmed, paramedics will be available to check any unwell travellers reported from arriving aircraft, to take temperatures of any passengers referred by border officials and will also be present for travellers to speak to if they have concerns about their health. This will enhance the health presence already at the airport.
 - Asking airlines to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
 - Asking travellers using E-gates if they have been in or transited mainland China, Iran, Italy, the Republic of Korea and in the last 14 days.
 - Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China, Iran, Northern Italy and the Republic of Korea. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.
 - Establishing a dedicated Healthline phone line for persons self-isolating to register and Healthline will be regularly checking on the welfare and wellbeing of those persons registered.
 - Registering passengers with Healthline as they arrive at airports.
 - Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.
 - Responding to reports of ill travellers.
 - Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.
28. On 13 March 2020, the New Zealand Customs Service data reported **no flights arrived at Auckland International Airport yesterday from mainland China**. No direct flights arrived from other category 1 countries. Several flights from other countries had passengers or crew who had departed or transited through mainland China, Iran, the Republic of Korea or northern Italy in the last 14 days. Passengers are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries.
29. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New

Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure. A sub-group has been established (which also includes an Air NZ representative) to consider potential exit measures to protect Pacific Island countries and territories and to comply with entry requirements that other countries may impose if/when New Zealand experiences sustained community transmission.

New Zealand Health Sector Response

30. The Ministry of Health remains the single point of up-to-date information on COVID-19.
31. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
32. ESR, Canterbury Health Laboratories (CHL) and LabPLUS in Auckland are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
33. At 0800 on 13 March 2020 ESR reported 5 confirmed cases, 2 probable cases, 379 negatives, 28 cases are classified as under investigation. Of the five confirmed cases, one has travel history to Iran, two have travel history to Northern Italy, and two are household contacts of the probable case who was exposed in Iran.

National Telehealth Service Update

34. On 12 March 2020 Healthline managed approximately 4,300 calls. Many callers seeking information do not wish to disclose any information about themselves. There were 590 callers with concerns about COVID-19 who disclosed some information. 209 callers were diverted to the Healthline COVID-19 website for information.
35. Of the callers concerned about COVID-19 who did disclose some information:
 - 192 callers were experiencing cold or flu-like symptoms
 - 169 (29%) were regarding people who had been outside NZ in the previous 4 weeks
 - 89% received self-care advice or information
 - 45 required the use of an interpreter.
36. Details on people registered and / or in self-isolation are:

- 3,038 registered (people or households) and currently in isolation (includes estimate of 30 people with data not yet received for Thursday 12 March 2020)
- 6,362 have completed isolation
- 10,100 total registrations.

See Figures 3, 4 and 5 in the Appendices for information further detail.

Welfare

37. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
38. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. The NWCG last met on 11 March 2020 and will meet again next week. Guidance for CDEM Groups is being prepared, and the first advice document focusing on shelter & accommodation has been shared with CDEM Groups and district health boards.
39. Welfare sub-functions have been meeting as needed. Shelter and Accommodation, Psychosocial Support, Financial Assistance, and Household Goods and Services have met or held workshops to address issues and coordinate across agencies.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 12 March 2020

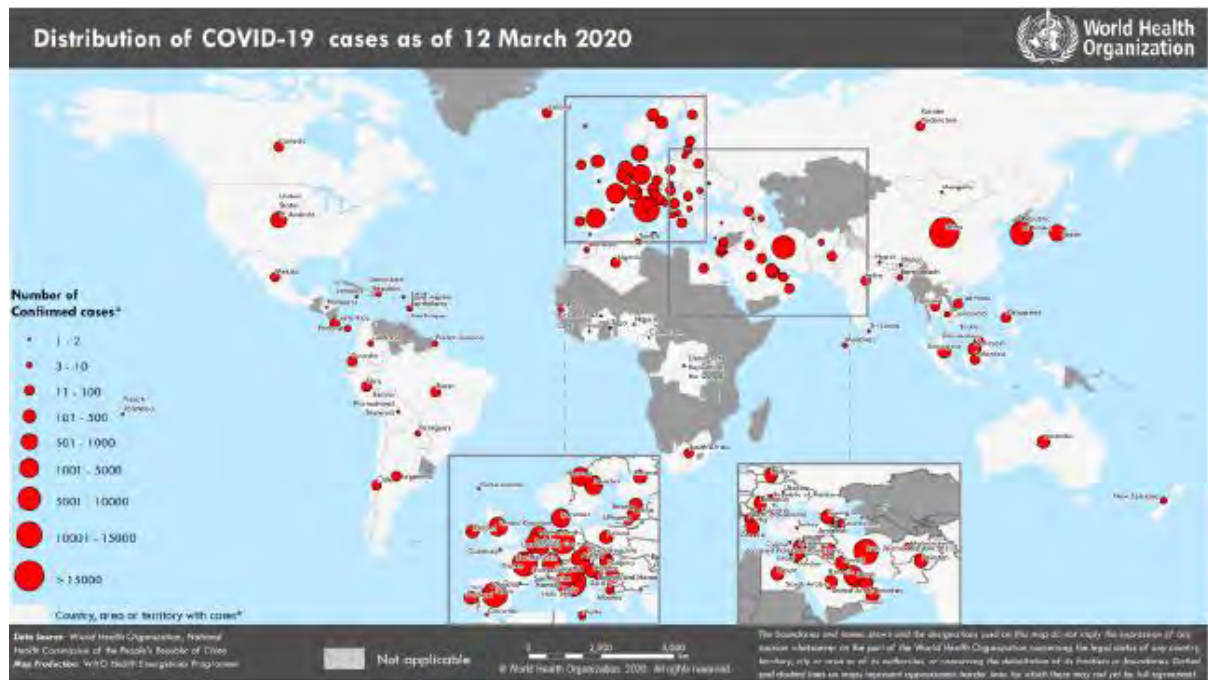


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region with complete date of reporting through 12 March 2020

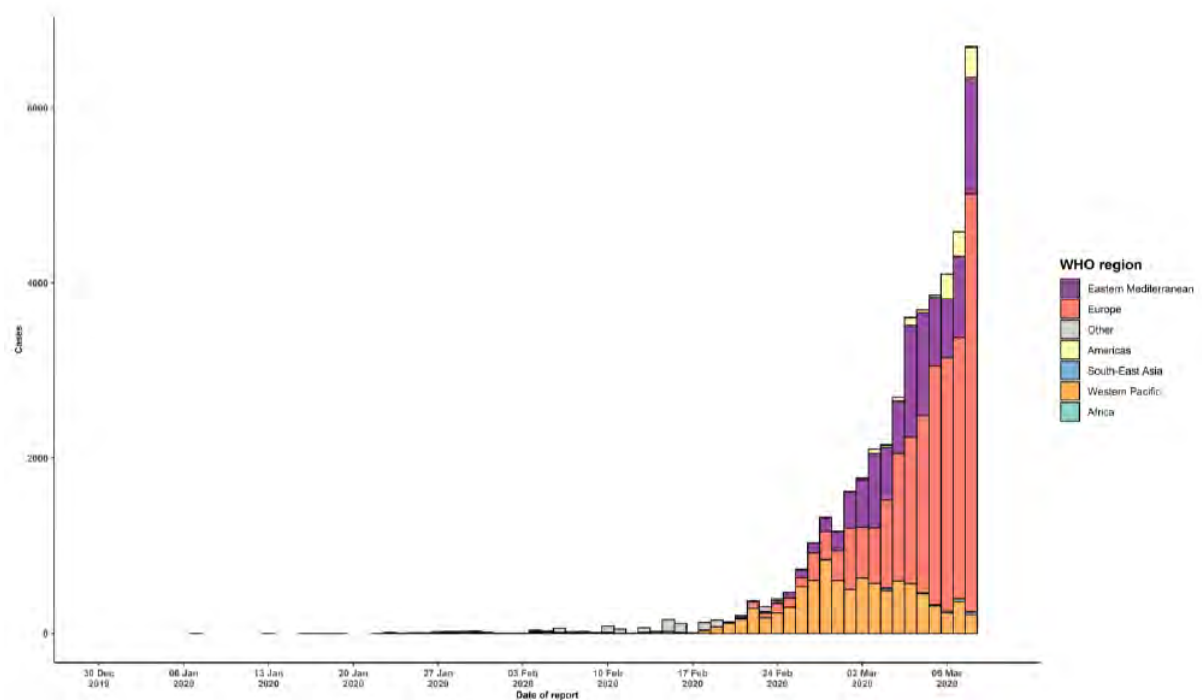


Figure 3: Healthline COVID-19 related call outcomes

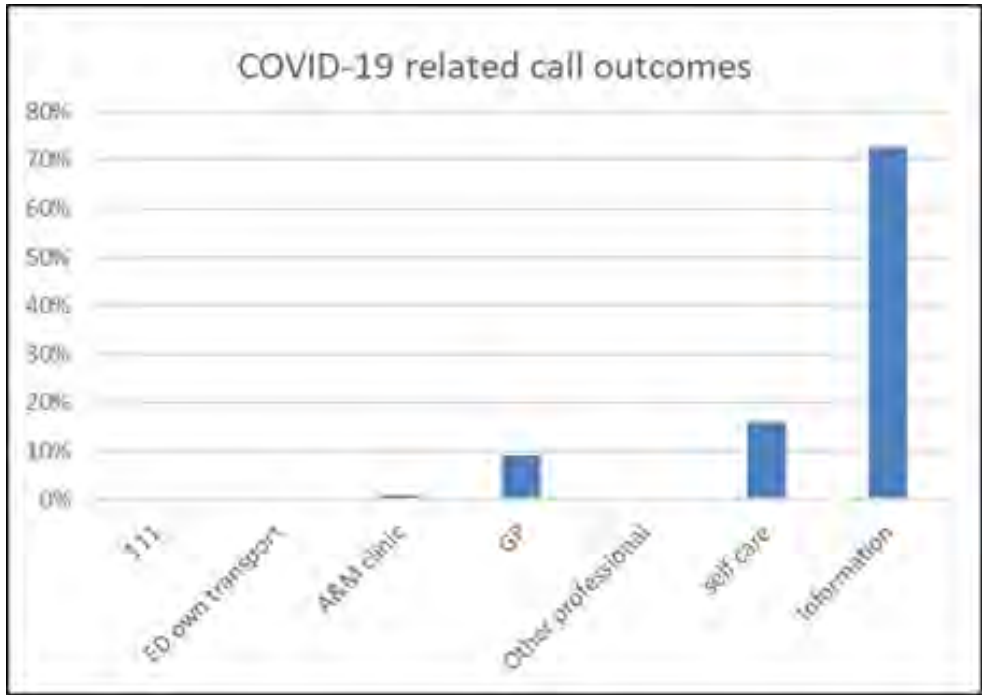


Figure 4: Healthline COVID-19 calls by DHB

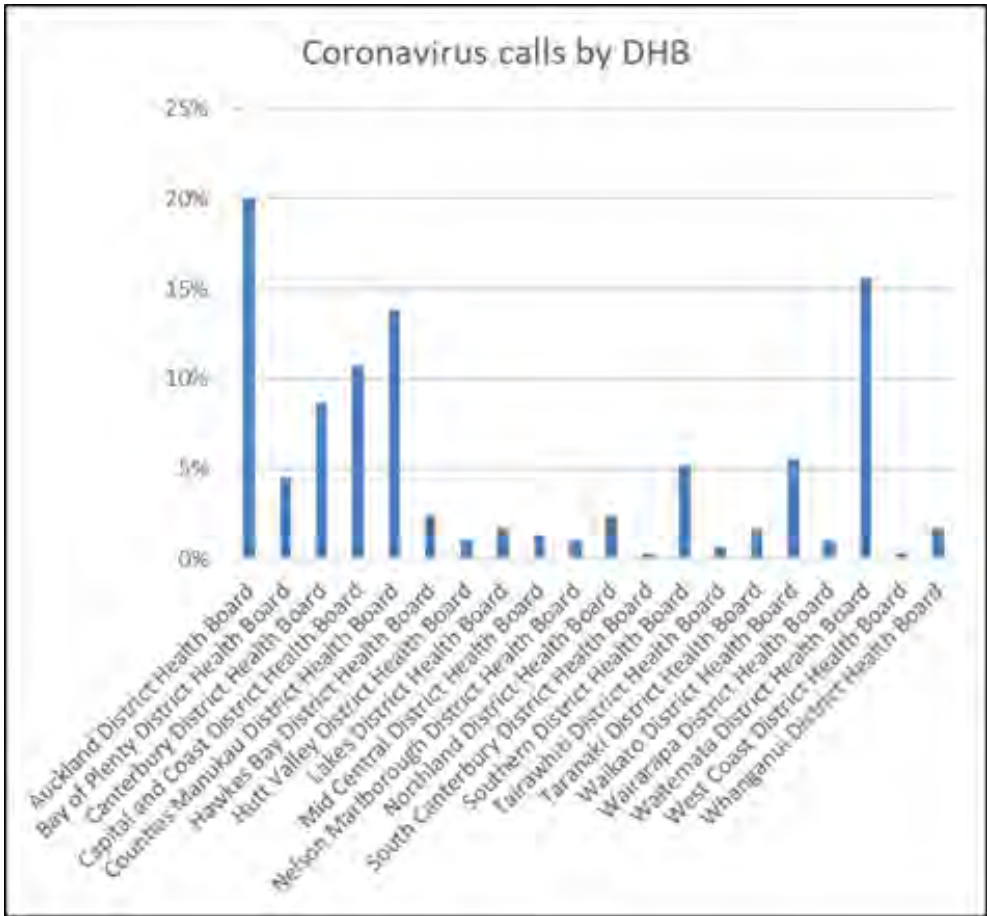


Figure 5: Isolation by location

Row Labels	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total	
Unknown	6	68	18	33	34	2	31	4	68	95	84	253	32	13	25	12	1425
unknown2						2	2		2					3			9
Auckland	3	5	11	27	23	18	20	28	30	51	48	19	18	81	12		394
Northland		1				1	1	1						2			6
Waitemata		3	13	10	38	12	18	40	32	48	60	12	14	86	9		395
Bay of Plenty					2	3	2	4	2	4	4	8					29
Counties Manukau	3	2	5	14	22	24	15	24	26	26	33	22	18	64	7		305
Waikato		2	3	1	4	1	2	5		5	20	2	3	4	2		54
Lakes				2	5	1	2	2	1	1	5		1	6			26
Hutt Valley		1			1		2	2	9	1	1	2	1	8	2		30
Southern		1	2	3		4	2	6	5	7	10	5	3	2	1		51
Nelson Marlborough			1	1	1	1	2			3	4			3			16
Canterbury		3	1	9	9	7	5	9	3	19	39	11	11	19	5		150
South Canterbury					1							2		2			5
Hawkes Bay					1		1		1	2	3						8
Capital and Coast	2	5	1	1		3	2		11	12	13	4	5	13			72
Taranaki		1				1								1			3
MidCentral		1		1	5	5		1	1	1	2	1		2	2		22
Tairāwhiti									1		1						2
Whanganui						2											2
Wairarapa				1	2												3
Christchurch															1		1
Grand Total	14	93	55	103	456	147	390	190	219	264	496	120	87	321	53		3008

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Saturday 14 March 2020.**

Prepared by: Bridget Murphy, NHCC Intelligence

Approved by: Hamish Gibson, as NHCC Response Manager

ENDS

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea (including those who have transited through China, Iran, northern Italy and South Korea) is that they should self-isolate for a period of 14 days.

People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at **13 March 2020**, **10,100** people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet (https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.

d. Number of countries that have reported COVID-19

Q: Why do the country numbers used by New Zealand vary from the World Health Organisation numbers?

A: The WHO includes Hong Kong, Taipei / Taiwan and Macau under mainland China. New Zealand counts these territories as outside mainland China.

IN CONFIDENCE



SITREP 54
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 14 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 14 March 2020.

SUMMARY

1. New Zealand is in the **Stamp It Out and Slow It Down phase** with continued border management and containment measures in place.
2. An outbreak of novel coronavirus (COVID-19) originated in mainland China with the epicentre in Hubei Province. **Over recent weeks case numbers in China have decreased. However, in the past two weeks, the number of cases of COVID-19 outside of China has increased 13-fold and the number of infected countries has tripled. The WHO expect that over the coming days and weeks, the number of cases, the number of deaths and the number of affected countries will continue to climb even higher. As of 14 March 2020 at 1300 hrs there are six confirmed cases and two probable cases in New Zealand.**
3. **As reported by the World Health Organization (WHO) on 14 March 2020**, globally there has been an increase of **7,499** confirmed cases (**132,758** confirmed cases in total) and **342** new deaths reported (**4,955** confirmed deaths in total). Of the confirmed cases, there has been an increase of **7,488** cases outside of mainland China. In total, **122** countries/territories/areas have reported confirmed cases. The regions that have reported new cases are Western Pacific with **194** new cases, European region with **5,780** new cases, the Eastern Mediterranean region with **1,095** new cases, **394** new cases have been reported in the Americas region and **10** new cases reported in the African region.
4. On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). On 11 March 2020, the WHO characterised COVID-19 as a pandemic, advice from the WHO is that a shift from containment to mitigation would be wrong and dangerous and that this is a controllable pandemic. The WHO consider the risk of this event remains very high in China, very high at the regional level and very high at the global level.

OUTBREAK SITUATION

5. As of **14 March 2020**, there are **six** confirmed cases, two probable cases and **413 negative cases** of COVID-19 in New Zealand. There are **80** cases that are classified as under investigation.

6. As reported by the WHO on 13 March 2020, there are 4,955 confirmed deaths globally, 3,062 in Hubei Province, 118 in the rest of mainland China, and 1775 outside mainland China. Based on the number of reported cases globally, the case fatality rate is approximately 3.7%. The risk of death is reported to increase with age.
7. As reported by the WHO on 13 March 2020, Italy has reported 15,113 confirmed cases (2,651 new cases) and 1016 deaths (189 new deaths). Iran has reported 10,075 confirmed cases (1075 new cases) and 429 deaths (75 new deaths). The Republic of Korea has reported a total 7,979 confirmed cases (110 new cases) and 66 deaths (0 new deaths). Spain has reported 2,695 confirmed cases (825 new cases) and 84 deaths (36 new deaths). The United States of America has reported 1,264 confirmed cases (277 new cases) and 36 deaths (7 new deaths).
8. As reported by the WHO on 13 March 2020, five new countries/territories/areas (Jersey, Réunion, Saint Vincent and the Grenadines, Cuba and Guyana) have reported confirmed cases in the past 24 hours.

RISK ASSESSMENT

9. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
10. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 13 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.
 - The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
 - The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

NEW ZEALAND RISK SUMMARY

11. **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains HIGH.
12. Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently MODERATE. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
13. **Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is HIGH, the likelihood of sustained transmission is MODERATE and the likelihood of widespread outbreaks is LOW. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
14. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
15. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be HIGH both for public health staff, the wider health sector and the community.
16. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

WHOLE OF GOVERNMENT RESPONSE – NEW ZEALAND BORDER RESPONSE

17. The WHO does not currently recommend any specific measures for travellers and advises against the application of any travel or trade restrictions based on current information. It is the northern hemisphere influenza season and so we expect to see increased numbers of travellers from the northern hemisphere with influenza-like illnesses.
18. New Zealand has implemented temporary border measures to reduce the chances of COVID-19 spreading within New Zealand. People who have left or transited through mainland China and Iran (Category 1a countries) in the 14 days prior to boarding are denied entry into New Zealand. The exceptions to this are New Zealand citizens (including those from Tokelau, Niue and the Cook Islands, which are Countries of the Realm), permanent residents and their immediate family, and air crews who have been using appropriate personal protective equipment (PPE). These border measures also apply to passengers transiting in New Zealand.

19. Countries in Category 1b are Italy and the Republic of Korea. People who have travelled in these countries in the past 14 days may enter New Zealand but are requested to undertake 14 days self-isolation and register with Healthline. [0800 358 5453](tel:08003585453)
20. Current border-related measures include the following:
- Monitoring border measures undertaken by other countries, particularly Australia, and any recommendations from WHO.
 - Keeping border stakeholders and the tourism industry informed through border advisories and regular meetings. This includes border agency, airport and airline staff, and accommodation providers.
 - Providing advice for responding to ill travellers to public health units and the border sector, including those arriving by sea.
 - Ensuring health advice for travellers arriving in New Zealand is displayed at international ports and airports. This includes health advice cards, posters, banners and, where available, electronic signage.
 - St John Ambulance will be present at Auckland International Airport from 16 March when international flights are arriving. Once arrangements are confirmed, paramedics will be available to check any unwell travellers reported from arriving aircraft, to take temperatures of any passengers referred by border officials and will also be present for travellers to speak to if they have concerns about their health. This will enhance the health presence already at the airport.
 - Asking airlines to provide health advice cards to all passengers, when they hand out the arrival cards, and to make an in-cabin announcement.
 - Asking travellers using E-gates if they have been in or transited mainland China, Iran, Italy, the Republic of Korea and in the last 14 days.
 - Supporting public health staff at Auckland, Wellington Christchurch, Dunedin and Queenstown International Airports who are meeting and providing information to travellers from mainland China, Iran, Northern Italy and the Republic of Korea. Health staff are available to provide advice on self-isolation to any travellers identified as having been in or transited through mainland China or Iran in the last 14 days. Public health staff are not undertaking screening or clinical assessments of passenger who reports they are unwell. If the passenger's temperature is over 38 C, this will trigger the usual ill-traveller response protocol. Passengers are being provided with information on self-isolation.
 - Establishing a dedicated Healthline phone line for persons self-isolating to register and Healthline will be regularly checking on the welfare and wellbeing of those persons registered.
 - Registering passengers with Healthline as they arrive at airports.
 - Supporting public health staff to manage potential risks from travellers arriving by sea, including providing three additional questions to be asked during the health clearance process for vessels.
 - Responding to reports of ill travellers.
 - Undertaking contact tracing for casual and close contacts of confirmed cases on flights to New Zealand.
21. On **13 March 2020**, the New Zealand Customs Service data reported **two** flights arrived at Auckland International Airport yesterday from mainland China with **79** passengers. No direct flights arrived from other category 1 countries. Several flights from other countries had passengers or crew who had departed or transited through mainland China, Iran, the Republic of Korea or northern Italy in the last 14 days. Passengers are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries.

22. The Ministry of Health is continuing to work closely with the Border Sector Working Group and Visitor Sector Emergency Advisory Group. The New Zealand Customs Service (Customs) is convening regular meetings of the Border Sector Working Group to facilitate the application of enhanced border measures and to ensure coordination and consistency across agencies. Customs is leading the Border Pillar planning under the Novel Coronavirus Governance Structure. A sub-group has been established (which also includes an Air NZ representative) to consider potential exit measures to protect Pacific Island countries and territories and to comply with entry requirements that other countries may impose if/when New Zealand experiences sustained community transmission

NEW ZEALAND HEALTH SECTOR RESPONSE

23. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
24. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland and **Southern Community Laboratories in Dunedin** are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
25. At 1000 hrs on **14 March 2020** ESR reported **6 confirmed cases, 2 probable cases, 413 negatives, 80 cases are classified as under investigation**. Of the six confirmed cases, one has travel history to United States of America, one has travel history to Iran, two have travel history to Northern Italy, and two are household contacts of the probable case who was exposed in Iran.

NATIONAL TELEHEALTH SERVICE UPDATE

26. On **13 March 2020** Healthline managed approximately **4,260** answered / outbound calls. Many callers seeking information do not wish to disclose any information about themselves. There were **580** callers with concerns about COVID-19 who disclosed some information. Of these callers, **308** were diverted to the Healthline COVID-19 website for information.
27. Of the callers concerned about COVID-19 who did disclose some information:
- **165** callers were experiencing cold or flu-like symptoms
 - **189 (33%)** were regarding people who had been outside NZ in the previous 4 weeks
 - **91%** received self-care advice or information
 - **30** required the use of an interpreter.
28. Details on people registered and / or in self-isolation are:
- **3,106** registered (people or households) and currently in isolation (**inclusive of estimate of 30 cards not yet received for Wednesday**)
 - **6,739** have completed isolation
 - Approximately **700** additional household members in isolation or completed isolation
 - **10,545** total registrations.

See Figures 3, 4 and 5 in the Appendices for information further detail.

WELFARE

- 29.** The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
- 30.** NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

IN CONFIDENCE

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 13 March 2020

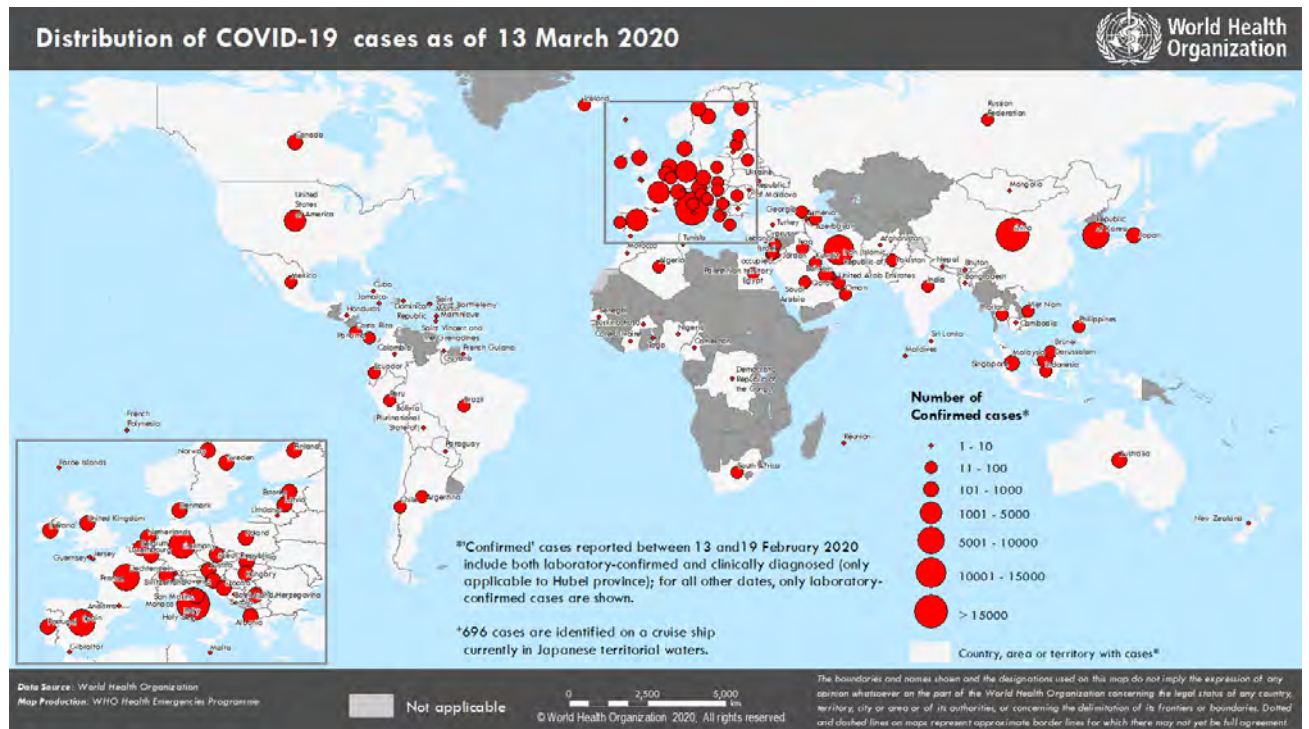


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region, 13 March 2020

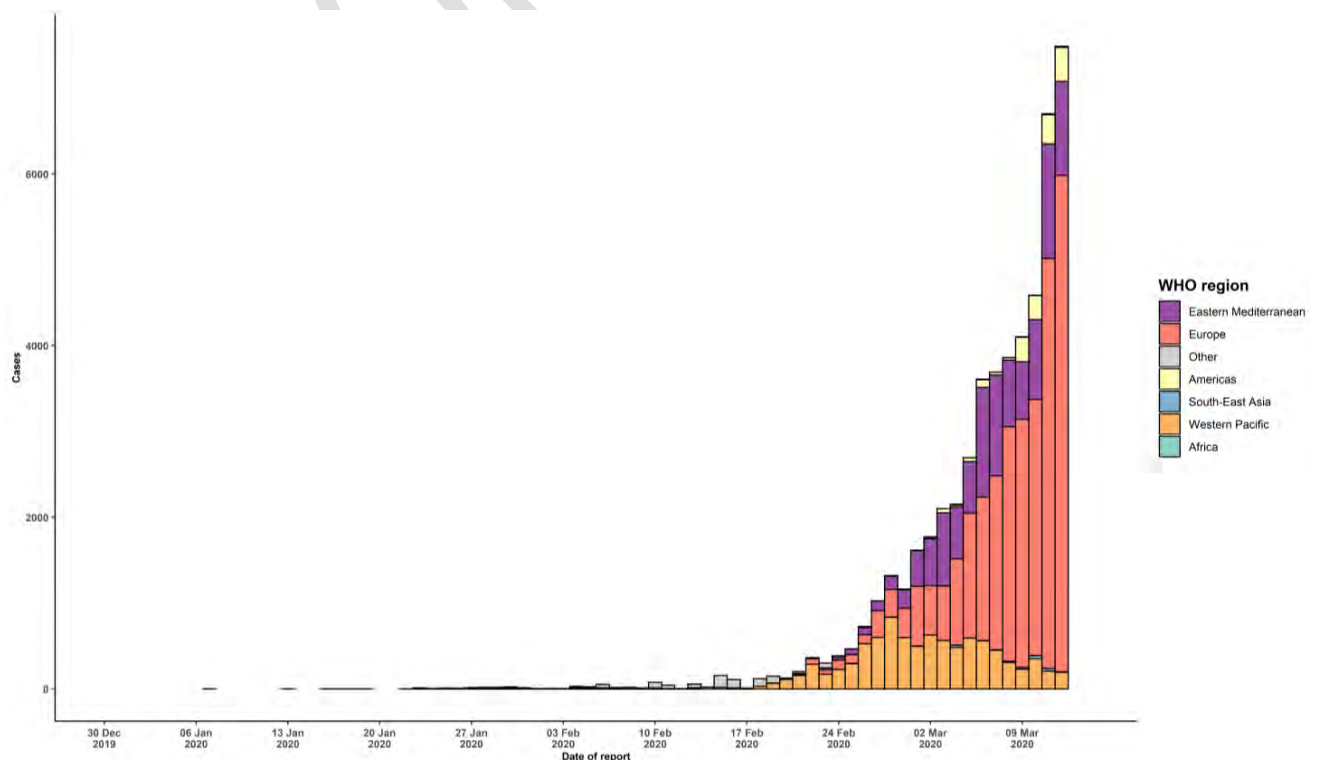


Figure 3: Healthline COVID-19 related call outcomes

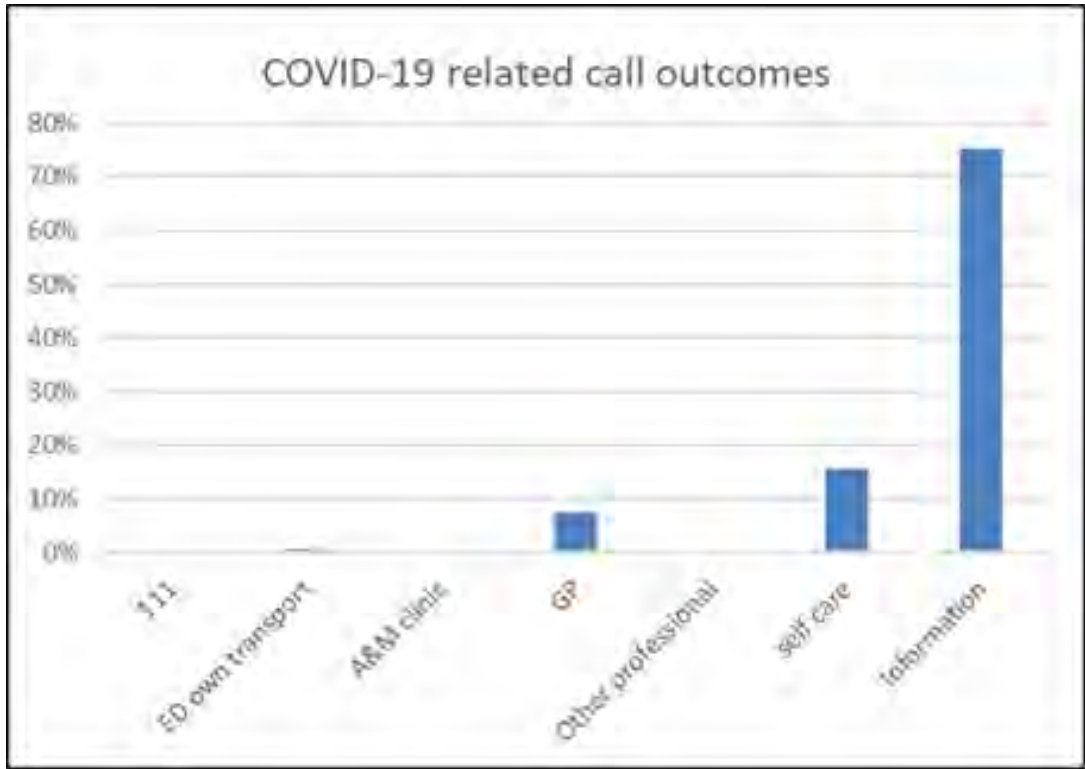


Figure 4: Healthline COVID-19 calls by DHB

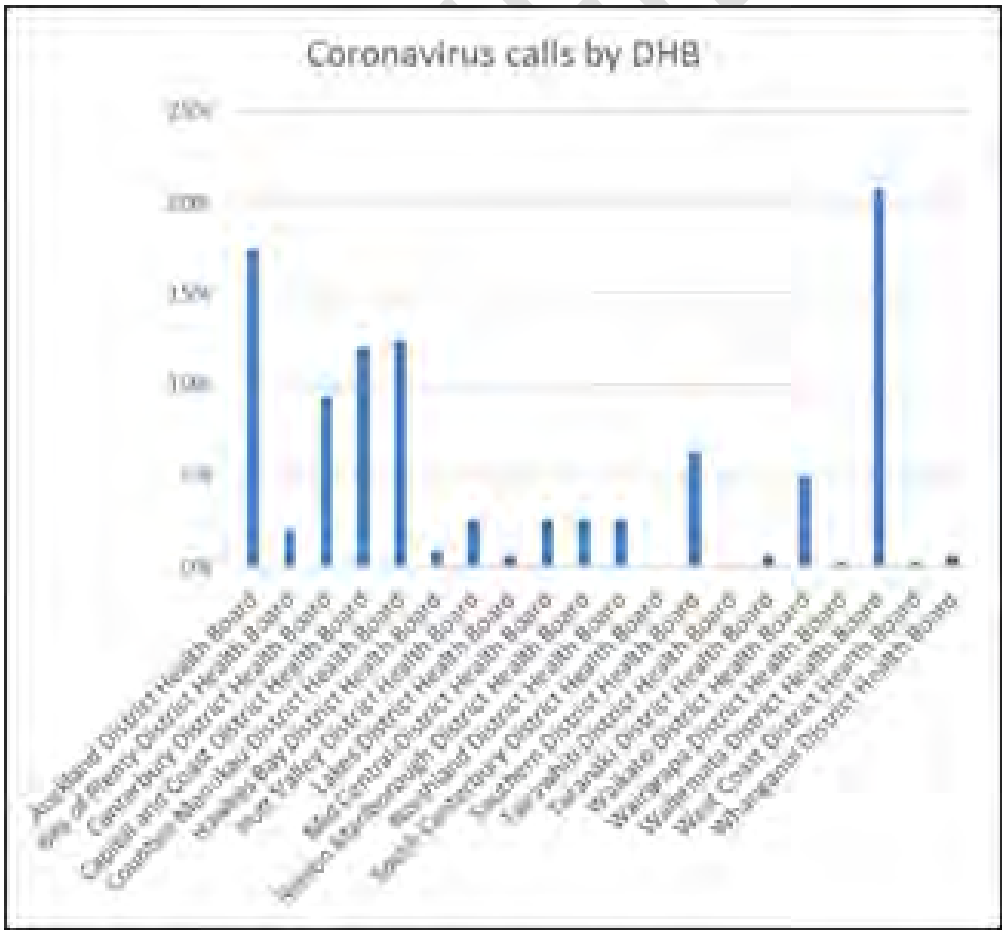


Figure 5: Isolation by location

Row Labels	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown	1	18	83	23	38	338	60	322	70	90	84	253	33	123		1536
unknown2							2	2		2						6
Auckland	3	1	16	30	12	29	22	15	25	30	29	48	46	19	19	344
Northland				1				1	1	1						4
Waitemata	3		9	10	16	13	35	19	21	31	30	47	68	16	11	329
Bay of Plenty						1	2	4	2	2	2	4	4	8		29
Counties Manukau	3	2	7	11	7	27	18	14	18	23	28	24	29	22	18	251
Waikato	3			7	3	1	5	1	1	5	2	5	18	2	4	57
Lakes						2	5	1	2	2	1	1	5		1	20
Hutt Valley				1			1		8	2	3	1	2	5	2	25
Southern	1			1	2	3		4	2	8	6	5	9	5	3	49
Nelson Marlborough					1	1	1	1	2			3	4			13
Canterbury			2	5	1	11	10	4	4	8	3	22	45	11	9	135
South Canterbury							1							2		3
Hawkes Bay						1	1		1		1	2	3			9
Capital and Coast	2		2	5	1	2	3	2	4		15	12	6	4	5	63
Taranaki		1						1								2
MidCentral				2		2	5	4		1	1	1	2	1	2	21
Tairāwhiti											1		1			2
Whanganui								2								2
Wairarapa						1	2									3
Manukau													1			1
Wellington						1										1
North Shore	1															1
Grand Total	17	4	54	156	66	133	449	135	415	183	214	259	496	128	197	2906

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Sunday 15 March 2020.**

Prepared by: Kenneth Gustafson, NHCC Intelligence

Approved by: Stephanie Godden, NHCC Response Manager

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: New Zealand entry restrictions are currently in place for people who have travelled or transited through mainland China (not including Hong Kong, Macau, and Taiwan) and Iran in the past 14 days except for:

- New Zealand citizens (including those from the three Countries of the Realm: Tokelau, Niue and the Cook Islands), permanent residents and their immediate family
- Air crews who have been using appropriate personal protective equipment (PPE).
- passengers transiting in New Zealand, unless they are New Zealand citizens, permanent residents or their immediate families
- Australian citizens and permanent residents whose primary place of residence is New Zealand.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea (including those who have transited through China, Iran, northern Italy and South Korea) is that they should self-isolate for a period of 14 days.

People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453) so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at **13 March 2020**, **10,100** people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on 0800 779 997 to discuss their circumstances. For further information, please see the All of Government Factsheet (https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.

d. Number of countries that have reported COVID-19

Q: Why do the country numbers used by New Zealand vary from the World Health Organisation numbers?

A: The WHO includes Hong Kong, Taipei / Taiwan and Macau under mainland China. New Zealand counts these territories as outside mainland China.



SITREP 55
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 15 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1500 hours 15 March 2020.

SUMMARY

1. An outbreak of novel coronavirus (COVID-19) originated in mainland China with the epicentre in Hubei Province. The Director-General of the World Health Organization has stated that Europe has now become the epicentre of the pandemic. There are more reported cases and deaths than the rest of the world combined, apart from mainland China. As of 15 March 2020 at 1500 hrs there are eight confirmed cases, one of those cases was diagnosed and confirmed in Australia and two probable cases in New Zealand.
2. As reported by the WHO on 14 March 2020, globally there has been an increase of 9,769 confirmed cases (142,539 confirmed cases in total) and 438 new deaths reported (5,393 confirmed deaths in total). Of the confirmed cases, there has been an increase of 9,751 confirmed cases outside of mainland China. In total, 137 countries/territories/areas have reported confirmed cases. The regions that have reported new cases are Western Pacific with 323 new cases, European region with 7,371 new cases, the Eastern Mediterranean region with 1,438 new cases, 554 new cases have been reported in the Americas region and 7 new cases reported in the African region.
3. On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). On 11 March 2020, the WHO characterised COVID-19 as a pandemic, advice from the WHO is that a shift from containment to mitigation would be wrong and dangerous and that this is a controllable pandemic. The WHO consider the risk of this event remains very high in China, very high at the regional level and very high at the global level.

KEY MESSAGES

4. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
5. The Ministry of Health is taking a Keep it Out, Stamp It Out and Slow It Down approach with continued border management and containment measures in place.
6. The Ministry of Health's assessment remains that with continued vigilance the chance of a widespread community outbreak is expected to remain low to moderate.

7. New Zealand will continue to see isolated cases. Close contacts of any cases will be contacted, provided with advice and monitored in self-isolation as recommended by the WHO to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
8. Everyone can ensure good health etiquette by washing their hands for 20 seconds and drying them well, sneezing into their elbow, and not touching their face.

OUTBREAK SITUATION

9. As of 15 March 2020, there are eight confirmed cases. One of the eight cases in NZ is a case that was diagnosed and confirmed in Australia. It will be reported to the WHO by Australia. There have been 432 negative cases of COVID-19 in New Zealand. There are 91 cases that are classified as under investigation.
10. As reported by the WHO on 14 March 2020, there are 5,393 confirmed deaths globally, 3,075 in Hubei Province, 119 in the rest of mainland China, and 2,199 outside mainland China. Based on the number of reported cases globally, the case fatality rate is approximately 3.7%. The risk of death is reported to increase with age.
11. As reported by the WHO on 14 March 2020, Italy has reported 17,660 confirmed cases (2,547 new cases) and 1,268 deaths (252 new deaths). Iran has reported 11,364 confirmed cases (1,289 new cases) and 514 deaths (85 new deaths). The Republic of Korea has reported a total 8,086 confirmed cases (107 new cases) and 72 deaths (6 new deaths). Spain has reported 4,231 confirmed cases (1266 new cases) and 120 deaths (36 new deaths). The United States of America has reported 1,678 confirmed cases (414 new cases) and 41 deaths (5 new deaths).
12. As reported by the WHO on 14 March 2020, 13 new countries/territories/areas have reported confirmed cases in the past 24 hours.

RISK ASSESSMENT

13. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
14. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 14 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.
 - The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.

- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

NEW ZEALAND RISK SUMMARY

- 15. Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains HIGH.
- 16.** Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently MODERATE. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
- 17. Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is HIGH, the likelihood of sustained transmission is MODERATE and the likelihood of widespread outbreaks is LOW. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
- 18.** However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
- 19.** Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be HIGH both for public health staff, the wider health sector and the community.
- 20. Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

WHOLE OF GOVERNMENT RESPONSE – NEW ZEALAND BORDER RESPONSE

- 21.** On 14 March 2020 the thirteenth Border Advisory relating to COVID-19 was released. The Border Advisory added an update on the current situation as well as an update on additional border measures announced by Cabinet.

22. The additional border measures announced by Cabinet are:
- Category 1A: Mainland China and Iran: current measures continue
 - Category 1B: Travellers arriving from the rest of the world, except the Pacific. The Pacific is defined as all Pacific Islands Forum members (except French Polynesia), Associate Member Tokelau, and Observer Wallis and Futuna. All these travellers (New Zealanders and foreign nationals) will be expected to self-isolate for 14 days on arrival in New Zealand.
 - Category 2: The Pacific. All these travellers (New Zealanders and foreign nationals) will be expected to self-isolate if they show symptoms within 14 days of arrival.
 - Self-isolation expectations do not apply to air (including positioning crew) and marine crew who have taken appropriate infection control and PPE measures as required.
 - The new Category 1B and Category 2 designations will take effect from 23:59 Sunday 15 March 2020, for a duration of 16 days, and will be reviewed by Monday 30 March 2020.
 - A temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds, will take effect from 23:59 on 14 March 2020.
 - The border measures do not apply to cargo ships or marine crew, to keep sea freight routes open for imports and exports, including essential supplies.
23. 14 March 2020, the New Zealand Customs Service data reported **zero** flights arrived at Auckland International Airport yesterday from mainland China with **no** passengers. No direct flights arrived from other category 1 countries. Several flights from other countries had passengers or crew who had departed or transited through mainland China, Iran, the Republic of Korea or northern Italy in the last 14 days. Passengers are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries.

NEW ZEALAND HEALTH SECTOR RESPONSE

24. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
25. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland and Southern Community Laboratories in Dunedin are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
26. At 1500 hrs on 15 March 2020 ESR reported 7 locally confirmed cases, one overseas confirmed case, a total of 8 confirmed cases, 2 probable cases, 432 negatives, 91 cases are classified as under investigation.

NATIONAL TELEHEALTH SERVICE UPDATE

27. On 14 March 2020 Healthline managed approximately 3,600 answered / outbound calls. Many callers seeking information do not wish to disclose any information about themselves. There were 553 callers with concerns about COVID-19 who disclosed some information. Of these callers, 108 were diverted to the Healthline COVID-19 website for information.

28. Of the callers concerned about COVID-19 who did disclose some information:
- 172 callers were experiencing cold or flu-like symptoms
 - 189 (34%) were regarding people who had been outside NZ in the previous 4 weeks
 - 88% received self-care advice or information
 - 27 required the use of an interpreter.
29. Details on people registered and / or in self-isolation are:
- 3,015 registered (people or households) and currently in isolation (inclusive of estimate of 270 cards not yet received for Friday or Saturday)
 - 6,900 have completed isolation
 - Approximately 700 additional household members in isolation or completed isolation
 - 10,615 total registrations.

See Figures 3, 4 and 5 in the Appendices for information further detail.

WELFARE

30. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
31. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
32. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 14 March 2020

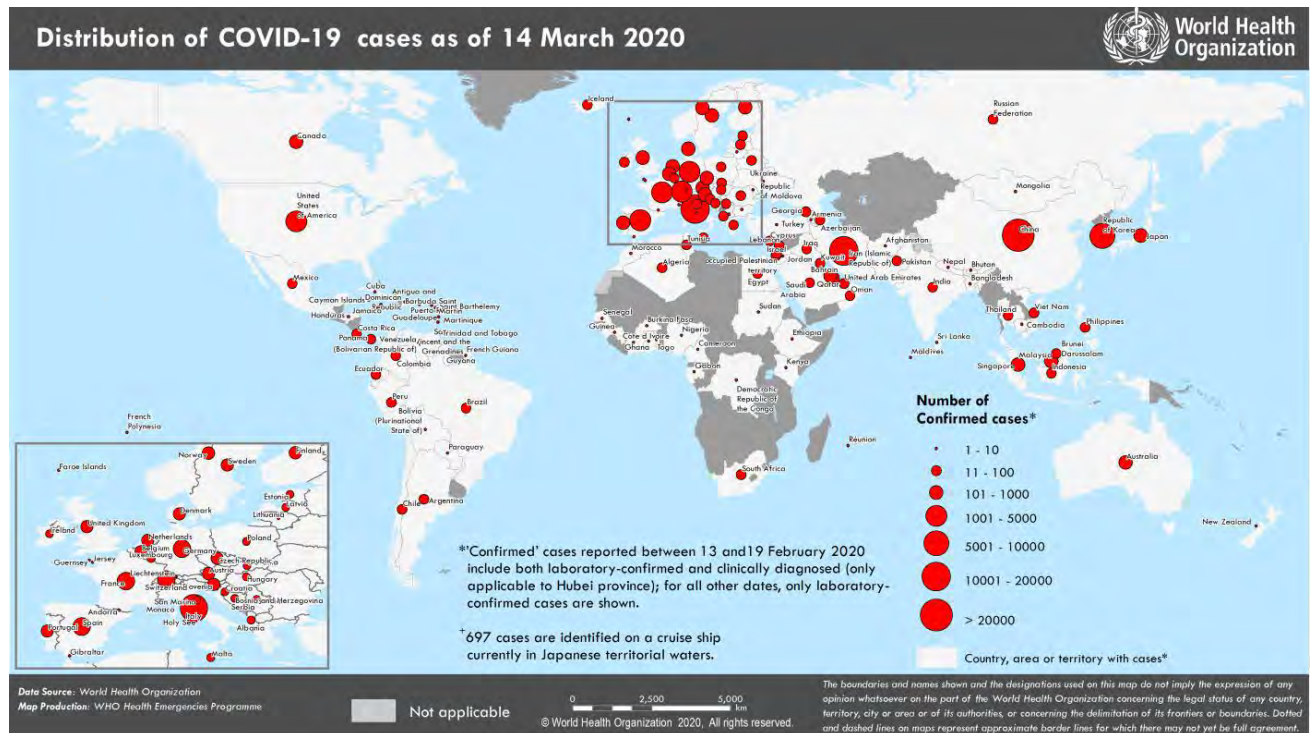


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region, 14 March 2020

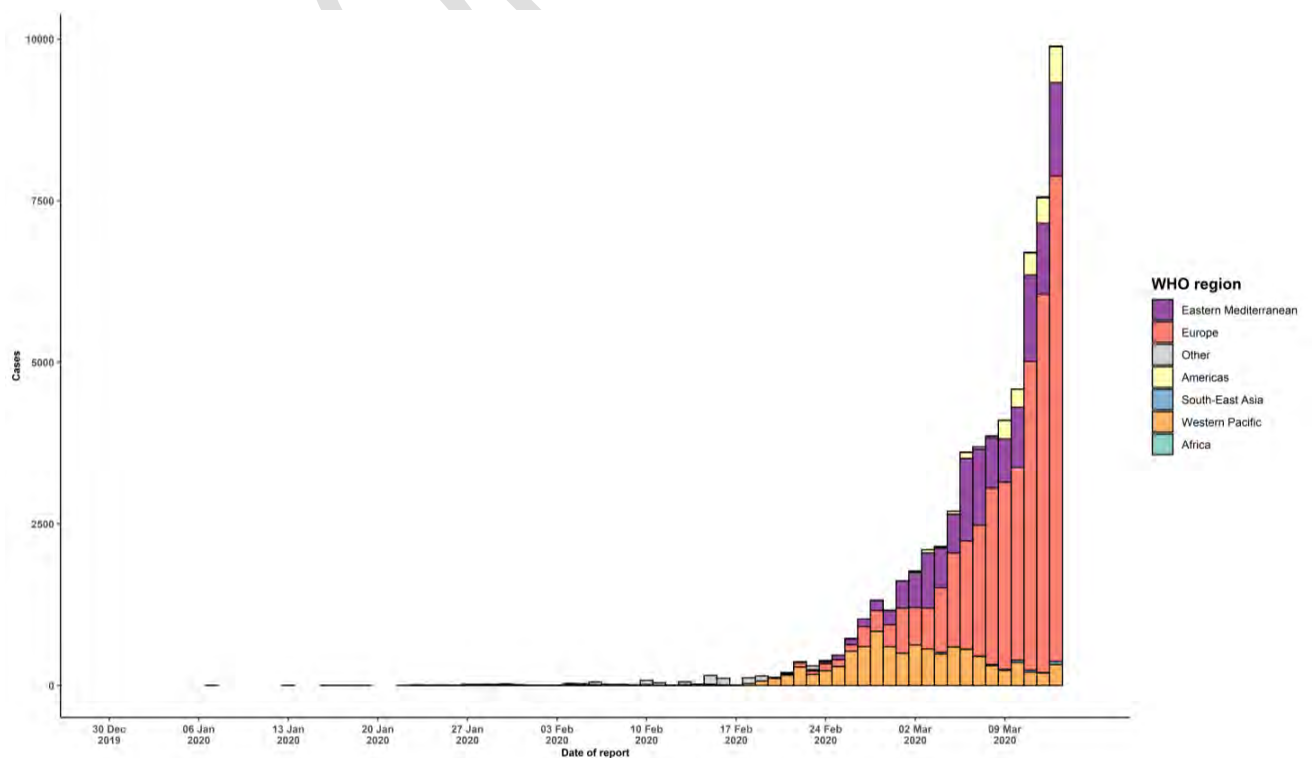


Figure 3: Healthline COVID-19 related call outcomes

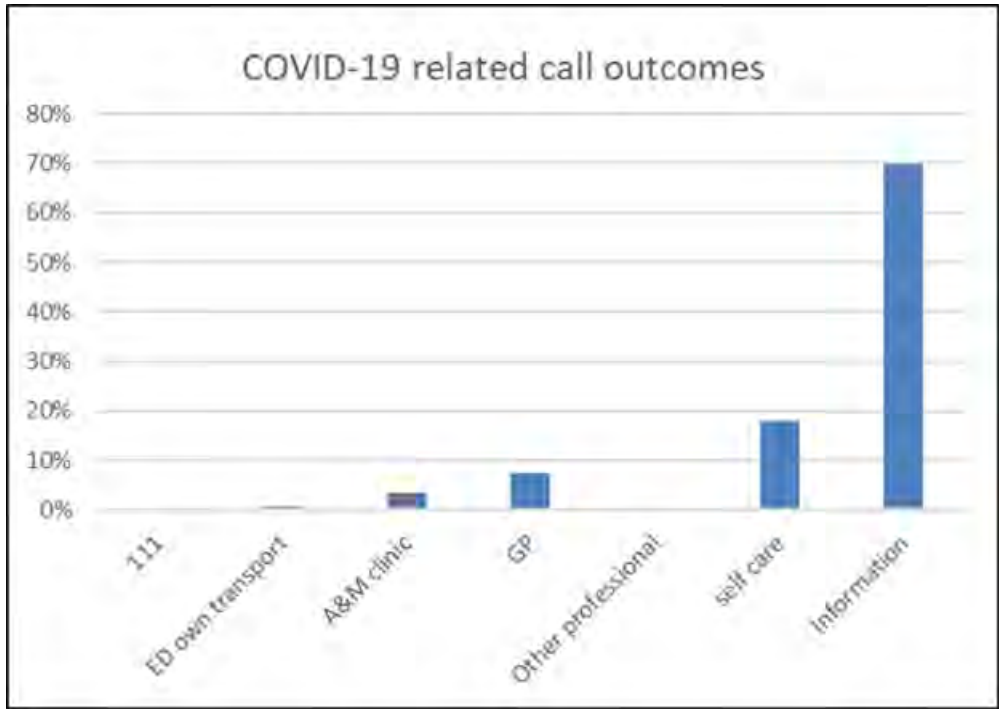


Figure 4: Healthline COVID-19 calls by DHB

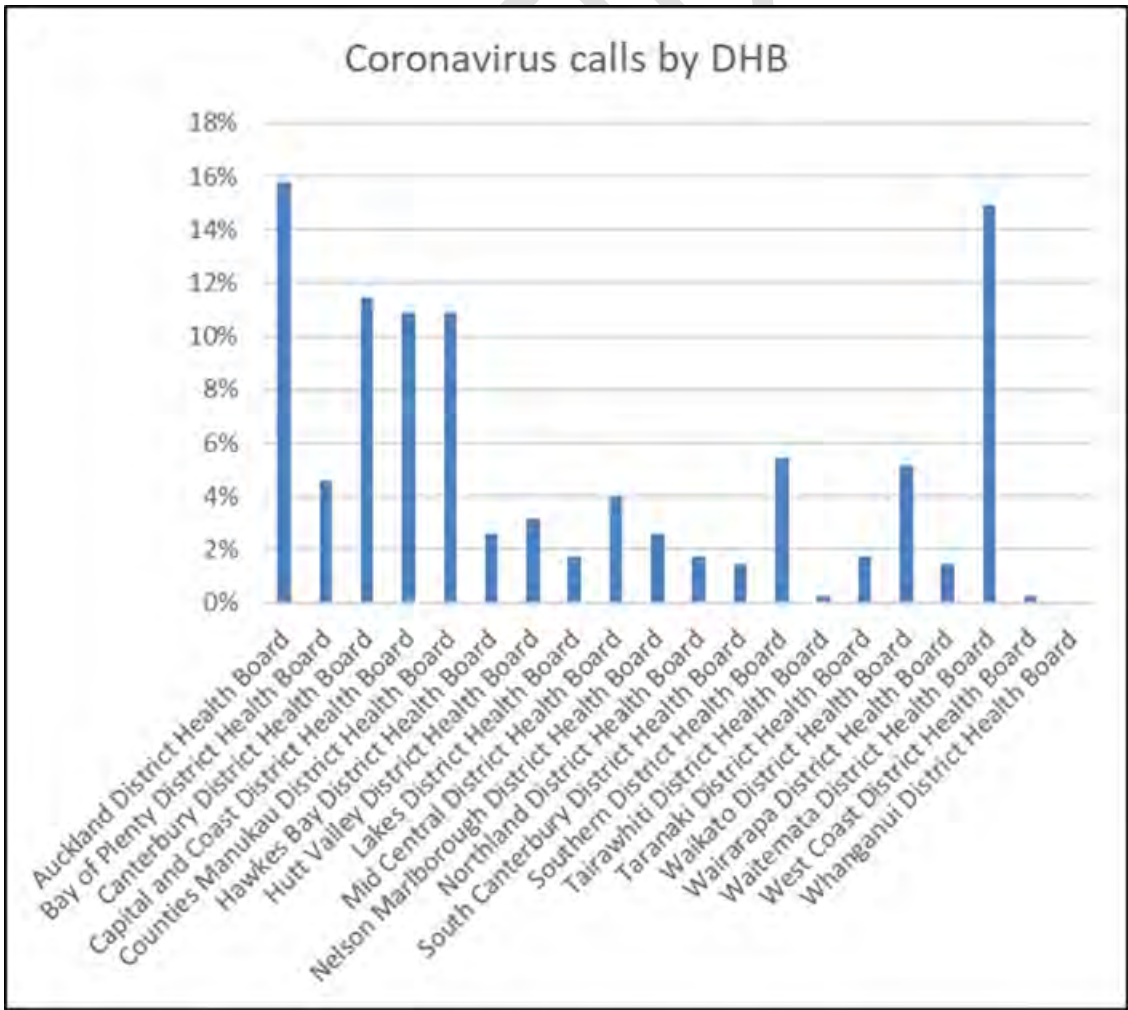


Figure 5: Isolation by location

Row Labels	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown	6	68	30	46	343	62	314	71	95	85	253	32	13	1418
unknown2						2	2		2					6
Auckland	6	6	23	47	23	18	21	28	30	50	47	19	18	336
Northland		1				1	1	1						4
Waitemata	3	3	18	16	42	12	17	40	32	45	60	12	14	314
Bay of Plenty					2	3	2	4	2	4	4	8		29
Counties Manukau	6	4	6	23	23	24	15	24	26	26	33	21	19	250
Waikato	3	2	3	6	4	1	2	5		5	20	2	3	56
Lakes				2	5	1	2	2	1	1	5		1	20
Hutt Valley		1			1		2	2	9	1	1	2	1	20
Southern	1	1	2	3		4	2	6	5	7	10	5	3	49
Nelson Marlborough			1	1	1	1	2			3	4			13
Canterbury		3	3	9	9	7	5	9	3	19	39	11	11	128
South Canterbury					1									1
Hawkes Bay					1	1	1		1		3			7
Capital and Coast	4	5	1	1		3	4		11	12	13	4	5	63
Taranaki		1				1								2
MidCentral		1		2	5	5		1	1	1	2	1		19
Tairāwhiti									1		1			2
Whanganui						2								2
Wairarapa				1	2									3
Wellington						1								1
North Shore	1		1											2
Grand Total	30	96	88	157	462	149	392	193	219	259	495	117	88	2745

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on Monday 16 March 2020.**

Prepared by: Kenneth Gustafson, NHCC Intelligence

Approved by: Clare Perry, NHCC Response Manager

FREQUENTLY ASKED QUESTIONS (FAQs)

a. Border activity detail

Q: What are the border measures being implemented in New Zealand?

A: Category 1A: Mainland China and Iran: current measures continue

Category 1B: Travellers arriving from the rest of the world, except the Pacific.

The Pacific is defined as all Pacific Islands Forum members (except French Polynesia), Associate Member Tokelau, and Observer Wallis and Futuna. All these travellers (New Zealanders and foreign nationals) will be expected to self-isolate for 14 days on arrival in New Zealand.

Category 2: The Pacific. All these travellers (New Zealanders and foreign nationals) will be expected to self-isolate if they show symptoms within 14 days of arrival.

Self-isolation expectations do not apply to air (including positioning crew) and marine crew who have taken appropriate infection control and PPE measures as required.

The new Category 1B and Category 2 designations will take effect from 23:59 Sunday 15 March 2020, for a duration of 16 days, and will be reviewed by Monday 30 March 2020.

A temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds, will take effect from 23:59 on 14 March 2020.

The border measures do not apply to cargo ships or marine crew, to keep sea freight routes open for imports and exports, including essential supplies.

Q: What should people eligible to enter from China or Iran do once arriving in New Zealand?

A: Those who do arrive from China or Iran are asked to self-isolate for 14 days and to register their details with Healthline within 24 hours of arrival on [0800 358 5453](tel:08003585453).

Q: Do the entry restrictions apply to people who were in mainland China prior to midnight 2 February 2020?

A: No. Anyone who left more than 14 days before 26 February does not need to self-isolate.

Q: Why does New Zealand have border entry restrictions in place?

A: The border entry restrictions are a measure being taken to reduce the chances of potentially infected people arriving in New Zealand and spreading COVID-19 within New Zealand.

Q: What resources are available at international ports of entry?

A: Public health staff at Auckland, Wellington, Christchurch, Dunedin and Queenstown International Airports are meeting and providing information to travellers on flights from mainland China (not including Hong Kong, Macau, and Taiwan) and other international flights. Health staff are available to provide advice to any travellers identified as having been in mainland China the last 14 days or Iran in the last 14 days. A public health nurse will also be available to take the temperature of any passenger who reports they are

unwell. Public health staff are also able to respond to ill travellers arriving by sea.

b. Engagement with those self-isolating

Q: Who should self-isolate?

A: The advice to all travellers arriving in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea (including those who have transited through China, Iran, northern Italy and South Korea) is that they should self-isolate for a period of 14 days. People are asked to register their details with Healthline on [0800 358 5453](tel:08003585453), or [contact the All of Government Welfare number, 0800 779 997](tel:0800779997), so that health support can be provided. If you have been in close contact with a person who has a confirmed case of COVID-19 you should self-isolate for 14 days.

Q: Who is self-isolating?

A: As at **15 March 2020**, **10,615** people have registered for self-isolation. There has been a notable increase in the number of people contacting Healthline for advice about self-isolating that require translation services.

Q: What is the engagement with people to self-isolating?

A: Once people have self-registered, Healthline regularly checks on the welfare and wellbeing of those persons. The frequency of contact is dependent on the needs identified. These calls will include welfare checks, providing advice as appropriate for medical issues and referring to other agencies for assistance as needed. Healthline also have a number of staff who are Mandarin speakers to assist.

Q: What is being done to identify those who have not self-isolated?

A: A data-match between the Ministry of Health and Customs has been established so that it is possible to identify those people who have arrived in New Zealand from mainland China (not including Hong Kong, Macau, and Taiwan), Iran, northern Italy and South Korea but who have not self-registered. Healthline is currently calling these individuals.

Q: What arrangements are in place for people who do not have suitable accommodation to self-isolate?

A: People who do not have suitable accommodation to self-isolate should contact the Government Helpline on [0800 779 997](tel:0800779997), or the [All of Government Welfare Number, 0800 779 997](tel:0800779997), to discuss their circumstances. For further information, please see the All of Government Factsheet

[\(\[https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf\]\(https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf\)\)](https://www.health.govt.nz/system/files/documents/pages/covid19_all_of_government_factsheet_17_feb_2020_0.pdf).

c. Border management of travellers who have arrived via destinations where COVID-19 is present (other than mainland China)

Q: Are there any travel restrictions in place for people arriving from countries with confirmed cases of novel coronavirus (COVID-19) other than mainland China?

A: Travel restrictions are in place for people arriving from or travelling through Iran and mainland China (not including Hong Kong, Macau and Taiwan) in the last 14 days.

d. Number of countries that have reported COVID-19

Q: Why do the country numbers used by New Zealand vary from the World Health Organisation numbers?

A: The WHO includes Hong Kong, Taipei / Taiwan and Macau under mainland China. New Zealand counts these territories as outside mainland China.

IN CONFIDENCE



SITREP 57
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 16 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1500 hours 16 March 2020.

SUMMARY

1. An outbreak of novel coronavirus (COVID-19) originated in mainland China with the epicentre in Hubei Province. The Director-General of the World Health Organization (WHO) has stated that Europe has now become the epicentre of the pandemic. There are more reported cases and deaths than the rest of the world combined, apart from mainland China. **As of 16 March, there are eight confirmed and two probable cases in New Zealand. One of the confirmed cases was diagnosed and confirmed in Australia.**
2. As reported by the WHO on 15 March 2020, globally there has been an increase of 10,982 confirmed cases (153,517 confirmed cases in total) and 343 new deaths reported (5,735 confirmed deaths in total).
3. On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). On 11 March 2020, the WHO characterised COVID-19 as a pandemic, advice from the WHO is that a shift from containment to mitigation would be wrong and dangerous and that this is a controllable pandemic. The WHO consider the risk of this event remains very high in China, very high at the regional level and very high at the global level.
4. **New border measures came into effect at 0100 hours 15 March 2020:**

New Zealand Border Measures

Category 1a – travel restrictions, all arrivals (NZ citizens and permanent residents) requested to register with Healthline	Mainland China and Iran
Category 1b – no travel restrictions, all arrivals requested to register with Healthline	All countries not listed in 1a
Category 2 – people travelling from Category 2 countries should be aware of COVID-19 symptoms and do not have to self-isolate if well.	Cook Islands, Fiji, Kiribati, Marshall Islands, Federated States of Micronesia, Nauru, New Caledonia, Niue, Palau, Papua New Guinea, Samoa, Solomon Islands, Tonga, Tokelau, Vanuatu, Wallis and Futana

KEY MESSAGES

5. **New Zealand is taking a Keep it Out, Stamp It Out and Slow It Down approach with continued border management and containment measures in place.**

6. All of us have a role to play in stopping further spread. Fundamental to New Zealand's response is not putting yourself or others at risk if you are unwell - not going to work or being out in public if you are sick. Please stay home if you're unwell.
7. Now is the time to be even more vigilant. Everyone can help by ensuring good health etiquette – washing hands for 20 seconds and drying them well, sneezing into your elbow, and not touching your face.
8. Healthline is experiencing high volumes of calls and continues to add resources and people to the team, to manage these. The Ministry is actively working with Healthline to find ways to further boost its workforce.
9. The WHO has now declared COVID-19 a pandemic. The announcement formalises New Zealand's current approach to COVID-19. All our planning has been on the basis that COVID-19 was in the early stages of a pandemic.
10. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
11. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
12. We continue to regularly review border restrictions and advice around any changes required.
13. New Zealand is continuing to actively track and monitor COVID-19 in New Zealand and updates case figures on its website daily.
14. The Ministry of Health's assessment remains that with continued vigilance the chance of a widespread community outbreak is expected to remain low to moderate.
15. New Zealand will continue to see isolated cases. Close contacts of any cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.

OUTBREAK SITUATION

16. As of 15 March 2020, there are eight confirmed cases and two probable cases. One of the eight cases in NZ was diagnosed and confirmed in Australia. It will be reported to the WHO by Australia. There have been 514 negative cases of COVID-19 in New Zealand. There are 67 cases that are classified as under investigation.
17. Of the eight confirmed cases, one case has travel history to Denmark, one has travel history to United States of America, one has travel history to Iran, two have travel history to Northern Italy, and two are household contacts of the probable case who was exposed in Iran. The eighth case was diagnosed and confirmed in Australia and then travelled to New Zealand.
18. As reported by the WHO on 15 March 2020, there are 5,735 confirmed deaths globally, 3,085 in Hubei Province. Based on the number of reported cases globally,

the case fatality rate is approximately 3.7%. The risk of death is reported to increase with age.

19. As reported by the WHO on 15 March 2020, Italy has reported 21,157 confirmed cases (3,497 new cases) and 1,441 deaths (173 new deaths). Iran has reported 12,729 confirmed cases (1,365 new cases) and 608 deaths (94 new deaths). The Republic of Korea has reported a total 8,162 confirmed cases (76 new cases) and 75 deaths (3 new deaths). Spain has reported 5,753 confirmed cases (1,522 new cases) and 136 deaths (16 new deaths). The United States of America has reported 1,678 confirmed cases (0 new cases) and 41 deaths (0 new deaths).
20. As reported by the WHO on 15 March 2020, 9 new countries/territories/areas have reported confirmed cases in the past 24 hours.

RISK ASSESSMENT

21. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
22. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.
 - The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
 - The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

NEW ZEALAND RISK SUMMARY

23. **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains HIGH.
24. Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently MODERATE. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
25. **Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is HIGH, the likelihood of sustained transmission is MODERATE and the likelihood of widespread outbreaks is LOW. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
26. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
27. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be HIGH both for public health staff, the wider health sector and the community.
28. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

WHOLE OF GOVERNMENT RESPONSE – NEW ZEALAND BORDER RESPONSE

29. Additional border measures announced by Cabinet took effect last night. Category 1A includes mainland China and Iran; current border restrictions continue to apply. Category 1B now includes all other international arrivals, except the Pacific. All travellers (New Zealanders and foreign nationals) are expected to self-isolate for 14 days from when they departed from the overseas country. Category 2 travellers are from all Pacific Islands Forum members including Tokelau, Wallis and Futuna but not including French Polynesia. All these travellers are expected to self-monitor (but not self-isolate) for 14 days from when they depart from the Pacific Island country or territory. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt. The measures will be reviewed by Monday 30 March 2020.
30. A temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds, took effect from 23:59 on 14 March 2020. The maritime border measures do not apply to cargo ships or marine crew, to keep sea freight routes open for imports and exports, including essential supplies. A number of cruise vessels are in New Zealand waters as they entered prior to the new border measures. A small number of passengers on three cruise vessels were tested for COVID-19 over the weekend. With one exception, these travellers had not been in close contact with confirmed cases

and had none had travel history to category 1A countries. The passengers were tested as precautionary measures. The contact of a confirmed case had been in self-isolation, but the vessel did not allow any crew or passengers to disembark while awaiting the test results. All test results were negative.

31. A border advisory with FAQs will be sent to public health and border sector stakeholders to address queries about the implementation of the new measures. Clarification is being sought on implementation for transit passengers, vessel and airline crew, self-isolation, domestic travel, travellers wishing to leave New Zealand, and groups travelling with horses.
32. In the 24 hours ending 15 March 2020, the New Zealand Customs Service data reported one flight arrived at Auckland International Airport yesterday from mainland China with 51 passengers. No direct flights arrived from other category 1A countries. Passengers from all international flights, other than direct flights from the Pacific, are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries.

NEW ZEALAND HEALTH SECTOR RESPONSE

33. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
34. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland and Southern Community Laboratories in Dunedin are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.

NATIONAL TELEHEALTH SERVICE UPDATE

35. On 15 March 2020 Healthline managed approximately 4,563 inbound / outbound calls. Many callers seeking information do not wish to disclose any information about themselves. There were 710 callers with concerns about COVID-19 who disclosed some information. Of these callers, 108 were diverted to the Healthline COVID-19 website for information.
36. Of the callers concerned about COVID-19 who did disclose some information:
 - 232 callers were experiencing cold or flu-like symptoms
 - 331 (47%) were regarding people who had been outside NZ in the previous 4 weeks
 - 89% received self-care advice or information
 - 48 required the use of an interpreter.
37. Details on people registered and / or in self-isolation are:
 - 2,875 registered (people or households) and currently in isolation (inclusive of estimate of 270 cards not yet received for 13 and 14 March 2020)
 - 7,070 have completed isolation
 - Approximately 700 additional household members in isolation or completed isolation
 - 10,645 total registrations.

See Figures 3, 4 and 5 in the Appendices for information further detail.

WELFARE

- 38.** The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
- 39.** The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
- 40.** NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

IN CONFIDENCE

APPENDICES

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19, 15 March 2020

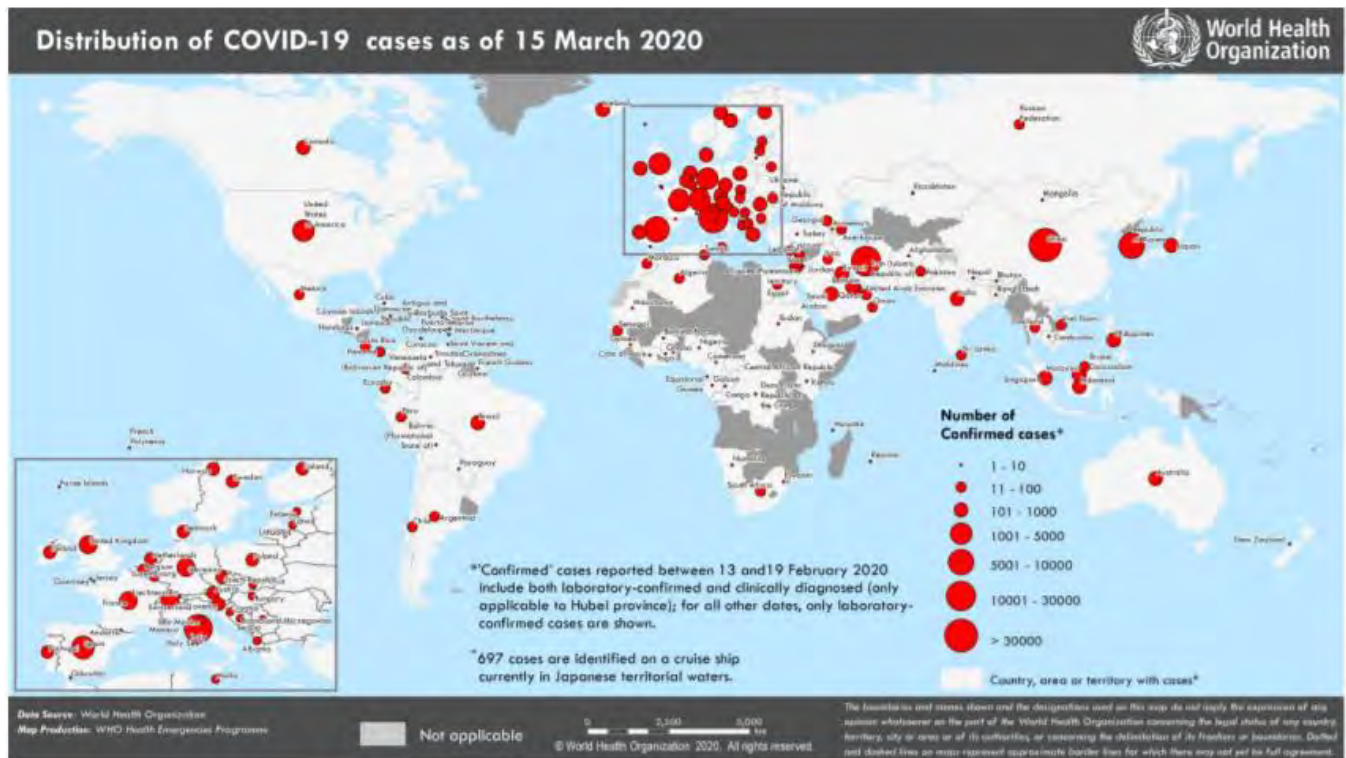


Figure 2: Epidemic curve of confirmed COVID-19 cases reported outside of China, by date of report and WHO region, 15 March 2020

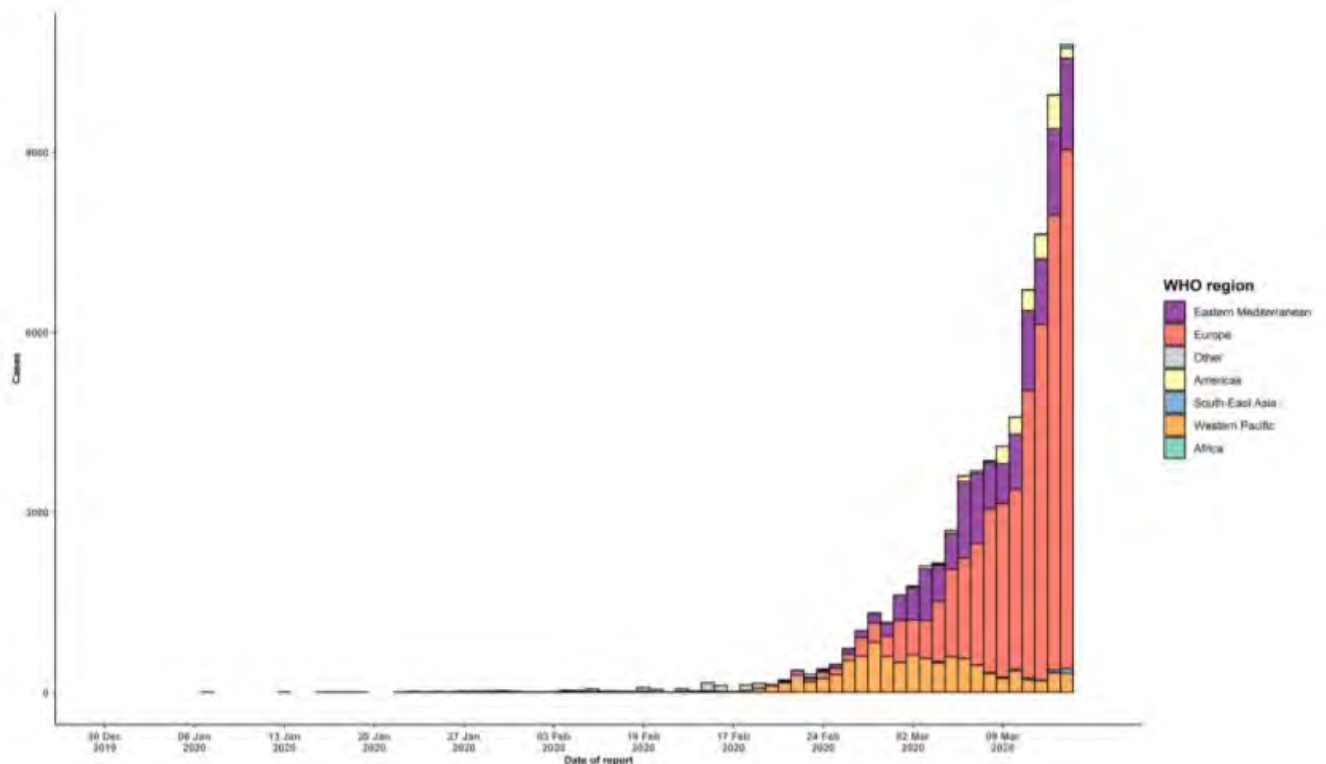


Figure 3: Healthline COVID-19 related call outcomes

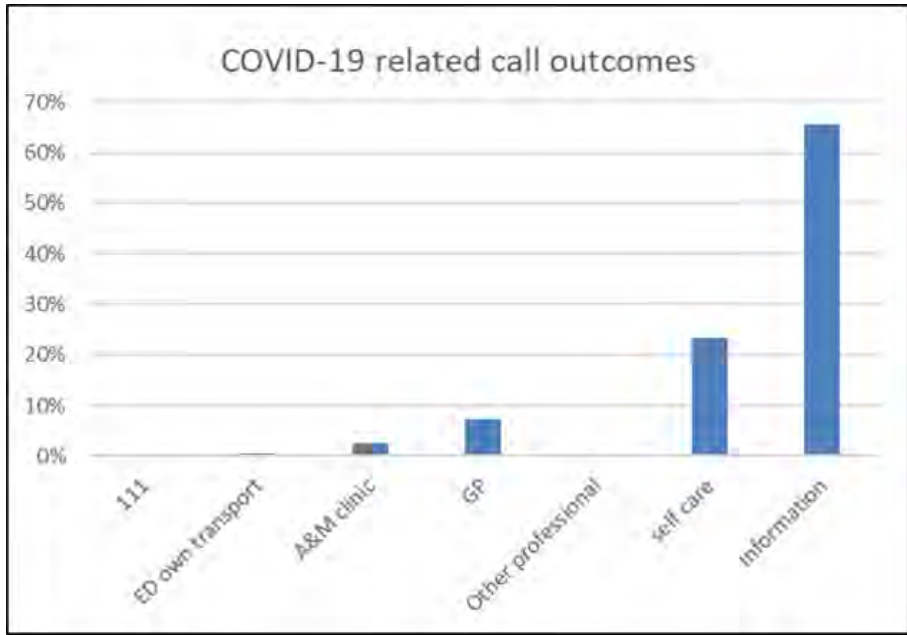


Figure 4: Healthline COVID-19 calls by DHB

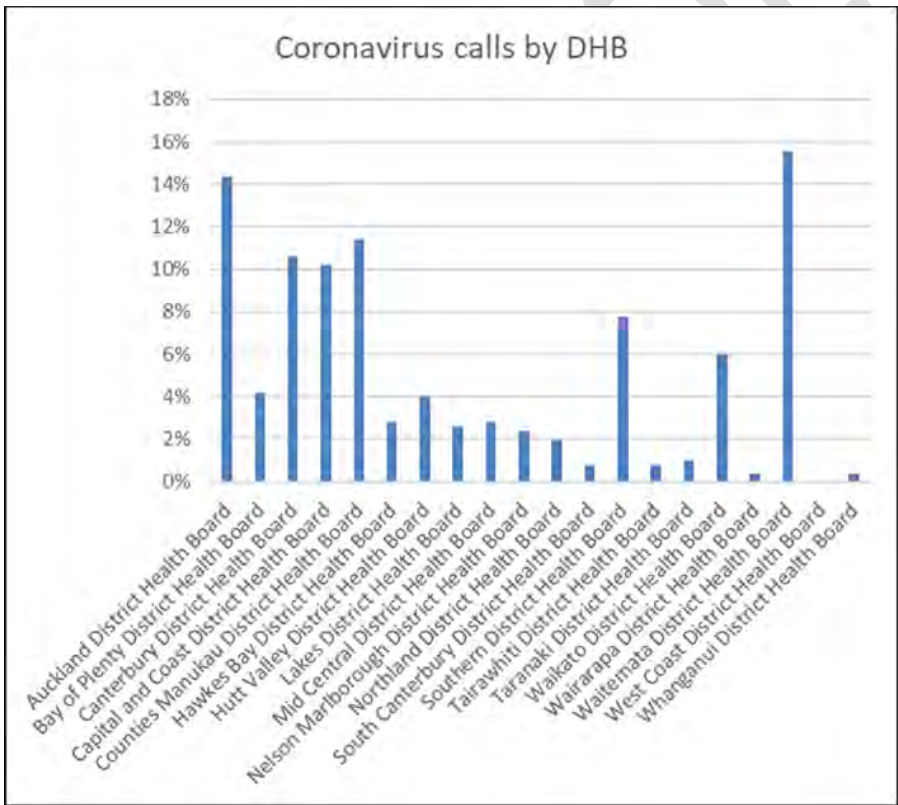


Figure 5: Isolation by location

Row Labels	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown			17	83	23	39	338	60	322	70	90	84	253	1379
unknown2								2	2		2			6
Auckland	3	1	16	30	12	29	22	15	25	30	29	48	46	306
Northland				1				1	1	1				4
Waitemata	3		9	10	16	13	35	19	20	31	30	44	68	298
Bay of Plenty						1	2	4	2	2	2	4	4	21
Counties Manukau	3	2	7	11	7	27	18	14	18	23	28	24	30	212
Waikato	3			7	3	1	5	1	1	5	2	5	18	51
Lakes						2	5	1	2	2	1	1	5	19
Hutt Valley				1			1		8	2	3	1	2	18
Southern	1			1	2	3		4	2	8	6	5	9	41
Nelson Marlborough					1	1	1	1	2			3	4	13
Canterbury			2	5	1	11	10	4	4	8	3	22	45	115
South Canterbury							1							1
Hawkes Bay						1	1		1		1		3	7
Capital and Coast	1		2	5	1	2	4	2	4		15	12	6	54
Taranaki		1						1						2
MidCentral				2		2	5	4		1	1	1	2	18
Tairāwhiti											1		1	2
Whanganui								2						2
Wairarapa						1	2							3
Wellington						1								1
North Shore	1		1											2
Grand Total	15	4	54	156	66	134	450	135	414	183	214	254	496	2575

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on 17 March 2020.**

Prepared by: Bridget Murphy and Martin Anderson, NHCC Intelligence

Approved by: Hamish Gibson, NHCC Response Manager



SITREP 58
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 17 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 17 March 2020.

SUMMARY

1. **As of 17 March, there are 10 confirmed cases, two probable cases and two suspect cases in New Zealand.**
2. An outbreak of novel coronavirus (COVID-19) originated in mainland China with the epicentre in Hubei Province. The Director-General of the World Health Organization (WHO) has stated that Europe has now become the epicentre of the pandemic. **The total number of cases and deaths outside China has overtaken the total number of cases in China.**
3. As reported by the WHO on **16 March 2020**, globally there has been an **increase of 13,903 confirmed cases (167,511 confirmed cases in total) and 862 new deaths reported (6,606 confirmed deaths in total).**
4. On 31 January 2020 WHO declared a Public Health Emergency of International Concern (PHEIC). On 11 March 2020, the WHO characterised COVID-19 as a pandemic, advice from the WHO is that a shift from containment to mitigation would be wrong and dangerous and that this is a controllable pandemic. The WHO consider the risk of this event remains very high in China, very high at the regional level and very high at the global level.
5. **It's important to note that health professionals will look at each case on an individual basis and they are able to order testing for a person, even if they don't meet the current COVID-19 case definition.**
6. **WHO currently recommends testing contacts of confirmed cases only if they show symptoms of COVID-19. This is what we're doing in New Zealand.**

KEY MESSAGES

7. New Zealand is taking a Keep it Out, Stamp It Out and Slow It Down approach with continued border management and containment measures in place.
8. The WHO has now declared COVID-19 a pandemic. The announcement formalises New Zealand's current approach to COVID-19. All our planning has been on the basis that COVID-19 was in the early stages of a pandemic.

9. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
10. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
11. We continue to regularly review border restrictions and advice around any changes required.
12. New Zealand is continuing to actively track and monitor COVID-19 in New Zealand and the Ministry of Health updates case figures on its website daily.
13. The Ministry of Health's assessment remains that with continued vigilance the chance of a widespread community outbreak is expected to remain low to moderate.
14. All of us have a role to play in stopping further spread. Fundamental to New Zealand's response is not putting yourself or others at risk if you are unwell. Everyone can help by ensuring good health etiquette – stay home if you're unwell, washing and drying your hands well, sneeze into your elbow, and not touching your face.
15. New Zealand will continue to see isolated cases. Close contacts of any cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
16. New Zealand continues to improve its capacity to test for COVID-19.
17. Healthline is experiencing high volumes of calls and continues to add resources and people to the team, to manage these. The Ministry is actively working with Healthline to find ways to further boost its workforce.

OUTBREAK SITUATION

18. As at 8.25am on 17 March, there are 10 confirmed cases, 2 probable cases, 2 suspect cases, 571 negatives and 213 cases are classified as under investigation.
19. Of the 10 confirmed cases, three cases have travel history to United States of America, two have travel history to Northern Italy, one case has travel history to Denmark, one has travel history to Iran, and two are household contacts of the probable case who was exposed in Iran. One case was diagnosed and confirmed in Australia and then travelled to New Zealand.
20. As reported by the WHO on 16 March 2020, there are 6,606 confirmed deaths and 167,511 confirmed cases globally. Based on the number of reported cases globally, the case fatality rate is approximately 3.9%. The risk of death is reported to increase with age.
21. As reported by the WHO on 16 March 2020, 4 new countries/territories/areas (Uzbekistan, Uruguay, Rwanda and Seychelles) have reported confirmed cases in the past 24 hours. See Figures 1 and 2 below for further information from WHO.

Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 16 March 2020

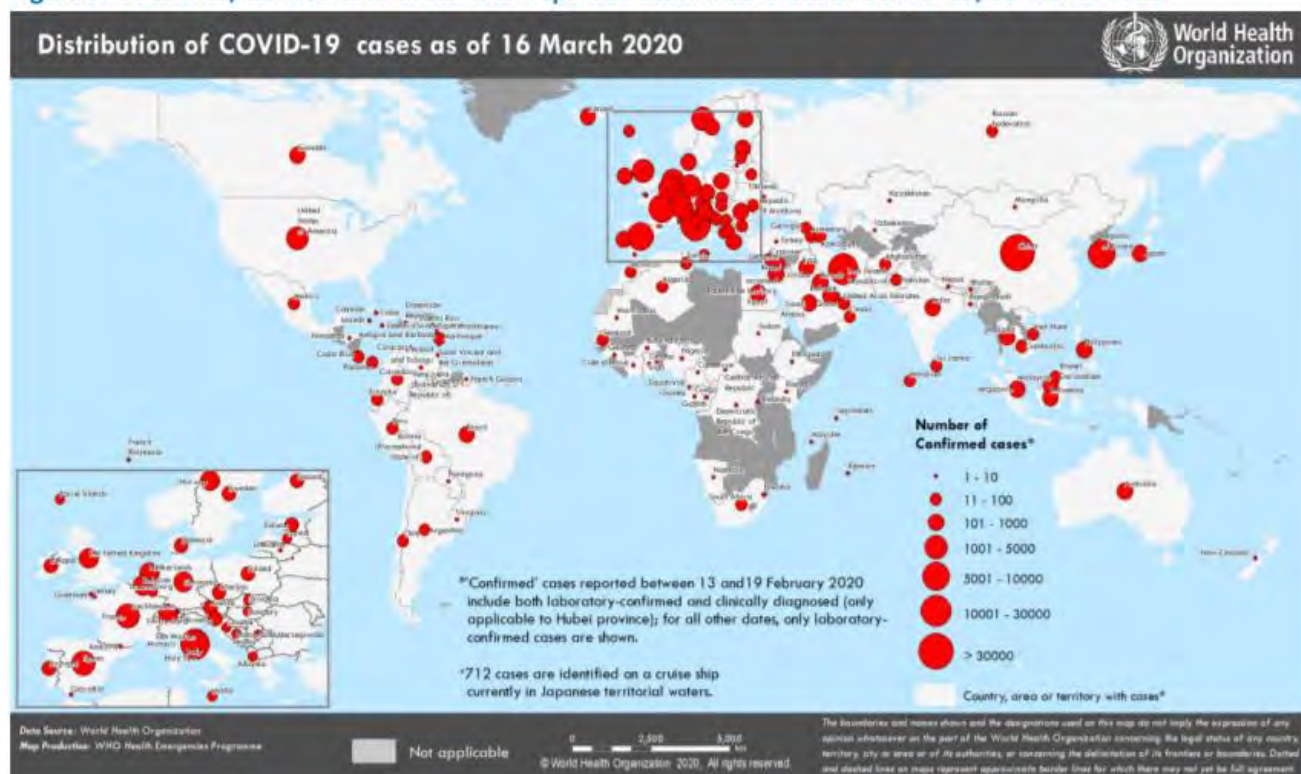
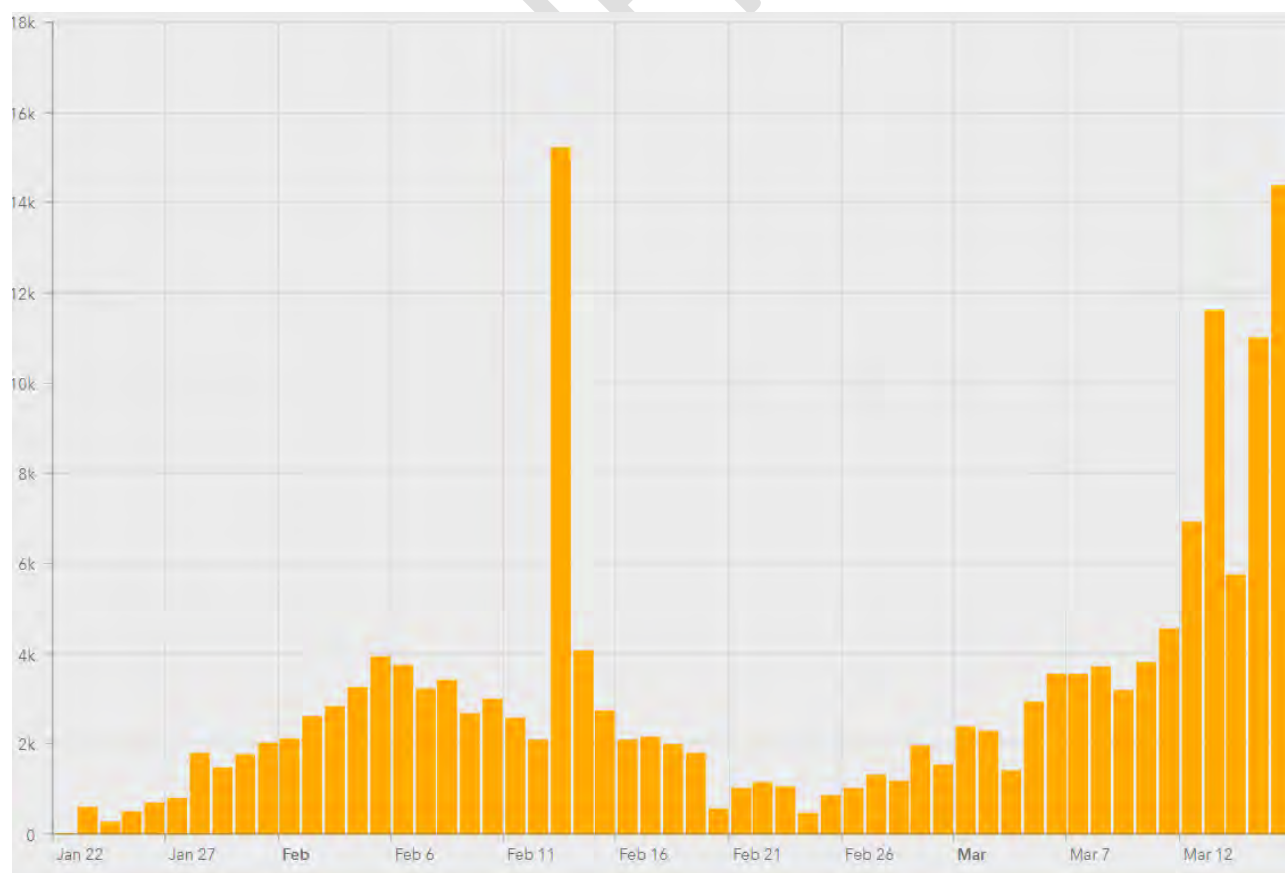


Figure 2: Global confirmed cases by date of report, as at 16 March 2020



RISK ASSESSMENT

22. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
23. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
- The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.
 - The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
 - The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

NEW ZEALAND RISK SUMMARY

24. **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains HIGH.
25. Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently MODERATE. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
26. **Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is HIGH, the likelihood of sustained transmission is MODERATE and

the likelihood of widespread outbreaks is LOW This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.

27. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
28. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be HIGH both for public health staff, the wider health sector and the community.
29. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

WHOLE OF GOVERNMENT RESPONSE – NEW ZEALAND BORDER RESPONSE

30. Additional border measures came into effect at 0100 hours 15 March 2020.
 - Category 1A includes mainland China and Iran; current border restrictions continue to apply.
 - Category 1B now includes all other international arrivals, except the Pacific. All travellers (New Zealanders and foreign nationals) are expected to self-isolate for 14 days from when they departed from the overseas country.
 - Category 2 travellers are from all Pacific Islands Forum members including Tokelau, Wallis and Futuna but not including French Polynesia. All these travellers are expected to self-monitor (but not self-isolate) for 14 days from when they depart from the Pacific Island country or territory.
 - Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt. The measures will be reviewed by Monday 30 March 2020.
31. Health exit measures for travellers leaving New Zealand to travel to the Pacific are being implemented starting today at all airports (Auckland, Wellington and Christchurch) with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight.
32. There is a temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds, took effect from 23:59 on 14 March 2020. The maritime border measures do not apply to cargo ships or marine crew, to keep sea freight routes open for imports and exports, including essential supplies. As at 16 March 2020, there were 12 cruise vessels in New Zealand waters with two departing for Australia. Four vessels are proceeding to ports to disembark all passengers and one is progressively disembarking passengers. This is to ensure passengers can obtain flights to their home countries. One vessel has moved to dry dock in Auckland, two are birthed taking on essential supplies, and one was due to birth for supplies but has cancelled. One cruise vessel is continuing its coastal programme, but it is unclear whether it will be completed as the impacts of the tropical cyclone due to hit the upper North Island may mean the vessels sails directly to Australia to avoid the cyclone. Another cruise vessel, denied entry to Hobart, sought to return to New Zealand but was declined.

33. A border advisory with FAQs was sent to public health and border sector stakeholders to address queries about the implementation of the new measures. Further FAQs are being developed as queries are received and will be sent today or tomorrow.
34. In the 24 hours ending 16 March 2020, the New Zealand Customs Service data reported one flight arrived at Auckland International Airport yesterday from mainland China with 40 passengers. No direct flights arrived from other category 1A countries. Passengers from all international flights, other than direct flights from the Pacific, are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries.

NEW ZEALAND HEALTH SECTOR RESPONSE

35. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956.
36. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland and Southern Community Laboratories in Dunedin are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.

NATIONAL TELEHEALTH SERVICE UPDATE

37. Healthline are entering a new phase of operation. Our volumes are beyond what our infrastructure and resourcing can easily accommodate. Our new mode of operation will be:
- Focusing Healthline on providing clinical advice to those with symptoms (including call backs from govt helpline services)
 - Ensuring informational calls move to the Ministry of Health helpline
 - Ensuring administrative calls that may carry some clinical input are moved to clinical partners with Healthline trained staff
 - Scaling up our infrastructure and clinical staffing to support our anticipated ongoing increase in need for clinical advice.
38. Actively controlling our incoming volume so that we choose which calls are not serviced in times of excess demand, rather than uncontrolled overloading of our infrastructure.
39. On 16 March 2020 Healthline managed approximately 7,065 inbound / outbound calls. This is seven times more than we would normally receive – and government helpline infrastructure responded to just over 3,000 of these with clinical callers receiving a call back from Healthline.
40. Of the callers concerned about COVID-19 who did disclose some information:
- 236 callers were experiencing cold or flu-like symptoms
 - 206 (40%) were regarding people who had been outside NZ in the previous 4 weeks
 - 83% received self-care advice or information
 - 39 required the use of an interpreter.
41. Details on people registered and / or in self-isolation are:
- 2,931 registered (people or households) and currently in isolation (inclusive of estimate of 350 cards not yet received for Friday, Saturday or Sunday, and 500

people who have registered through the new online registration tool - these aren't yet fully processed into the back end)

- An estimated 20,000 passengers who crossed the border on Monday who have completed passenger registration cards. These will arrive at Canon today for scanning / keying
- 7,563 have completed isolation
- Approximately 700 additional household members (in isolation or completed isolation)
- 11,194 + 20,000 total registrations.

42. See the Appendix for information further detail.

WELFARE

43. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
44. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
45. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX

Figure 3: Isolation by location

Row Labels	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown			17	83	25	39	338	60	322	70	90	84	1128
unknown2								2	2		2		6
Auckland	3	1	16	30	12	29	22	15	25	30	29	48	260
Northland				1				1	1	1			4
Waitemata	3		9	10	16	13	35	19	20	31	30	44	230
Bay of Plenty						1	2	4	2	2	2	4	17
Counties Manukau	3	2	7	11	7	27	18	14	18	23	28	24	182
Waikato	3			7	3	1	5	1	1	5	2	5	33
Lakes						2	5	1	2	2	1	1	14
Hutt Valley				1			1		8	2	3	1	16
Southern	1			1	2	3		4	2	8	6	5	32
Nelson Marlborough					1	1	1	1	2			3	9
Canterbury			2	5	1	11	10	4	4	8	3	22	70
South Canterbury							1						1
Hawkes Bay						1	1		1		1		4
Capital and Coast	1		2	5	1	2	4	2	4		15	12	48
Taranaki		1						1					2
MidCentral				2		2	5	4		1	1	1	16
Tairāwhiti											1		1
Whanganui								2					2
Wairarapa						1	2						3
Wellington						1							1
North Shore	1		1										2
Grand Total	15	4	54	156	68	134	450	135	414	183	214	254	2081

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on 18 March 2020.**

Prepared by: Bridget Murphy and Martin Kennedy, NHCC Intelligence

Approved by: Hamish Gibson, pp the NHCC Response Manager



SITREP 59
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 18 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 18 March 2020.

SUMMARY

1. **As at 8.25am on 18 March, in New Zealand there are 15 confirmed cases, 2 probable cases and 501 cases are classified as under investigation.**
2. An outbreak of novel coronavirus (COVID-19) originated in mainland China with the epicentre in Hubei Province. The Director-General of the World Health Organization (WHO) has stated that Europe has now become the epicentre of the pandemic. The total number of cases and deaths outside China has overtaken the total number of cases in China.
3. As reported by the WHO on 17 March 2020, globally there has been an increase of 11,526 confirmed cases (179,112 confirmed cases in total) and 475 new deaths reported (7,426 confirmed deaths in total).
4. **From today (2 weeks earlier than originally scheduled), free flu vaccines will be available from GP clinics and selected pharmacies for people aged 65 and over, pregnant people, and those with chronic conditions.**
5. It's important to note that health professionals will look at each case on an individual basis and they are able to order testing for a person, even if they don't meet the current COVID-19 case definition.
6. WHO currently recommends testing contacts of confirmed cases only if they show symptoms of COVID-19. This is what we're doing in New Zealand.

KEY MESSAGES

7. New Zealand is taking a Keep it Out, Stamp It Out and Slow It Down approach with continued border management and containment measures in place.
8. The WHO has now declared COVID-19 a pandemic. The announcement formalises New Zealand's current approach to COVID-19. All our planning has been on the basis that COVID-19 was in the early stages of a pandemic.
9. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

10. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
11. We continue to regularly review border restrictions and advice around any changes required.
12. New Zealand is continuing to actively track and monitor COVID-19 in New Zealand and updates case figures on its website daily.
13. There have been an additional four cases of COVID-19 confirmed in New Zealand since 17 March 2020.
14. The Ministry of Health's assessment remains that with continued vigilance the chance of a widespread community outbreak is expected to remain low to moderate.
15. New Zealand will continue to see isolated cases. Close contacts of any cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
16. New Zealand continues to improve its capacity to test for COVID-19. Our current capacity is 770 tests for COVID-19 each day and we expect that to be around 1500 per day later this week.
17. All of us have a role to play in stopping further spread. Fundamental to New Zealand's response is not putting yourself or others at risk if you are unwell. Everyone can help by ensuring good health etiquette – stay home if you're unwell, washing and drying your hands well, sneeze into your elbow, and not touching your face.
18. Healthline is experiencing high volumes of calls and continues to add resources and people to the team, to manage these.

OUTBREAK SITUATION

19. As at 8.25am on 18 March, there are 15 confirmed cases, 2 probable cases and 501 cases classified as under investigation. 652 cases have been made 'not a case'.
20. Of the 15 confirmed cases, 12 have an overseas travel history. The source countries were United States (4), Italy (2), Austria (1), Australia (1), Iran (1), Denmark (1), Germany (1), and Portugal (1). Of the three confirmed cases with no overseas travel, two are household contacts of a probable case who was exposed in Iran and one was a contact of a confirmed case who travelled to Germany.
21. As reported by the WHO on 17 March 2020, there are 7,426 confirmed deaths and 179,112 confirmed cases globally. Based on the number of reported cases globally, the case fatality rate is approximately 3.9%. The risk of death is reported to increase with age.
22. As reported by the WHO on 17 March 2020, 8 new countries/territories/areas (Guam, Somalia, Bahamas, Aruba, United States Virgin Islands, Benin, Liberia, United Republic of Tanzania) have reported confirmed cases in the past 24 hours. See Figures 1 and 2 below for further information from WHO.

Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 16 March 2020

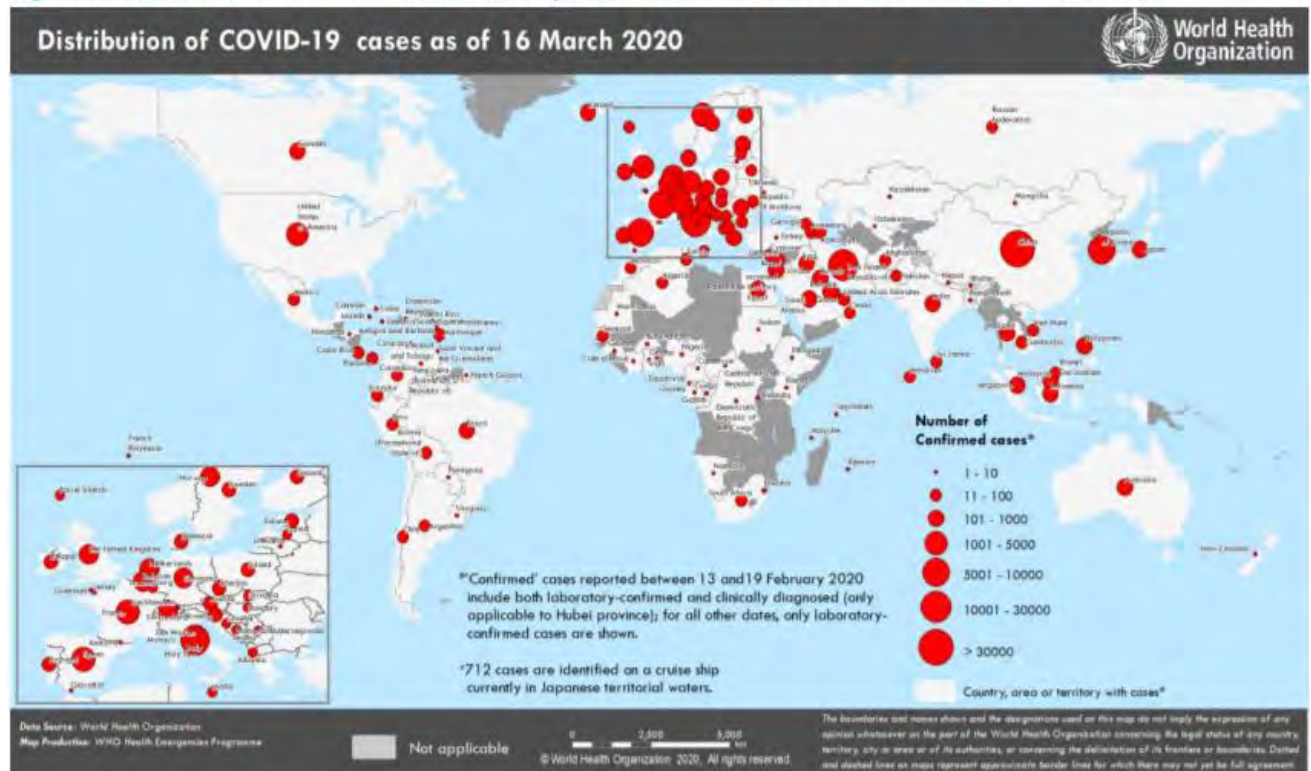
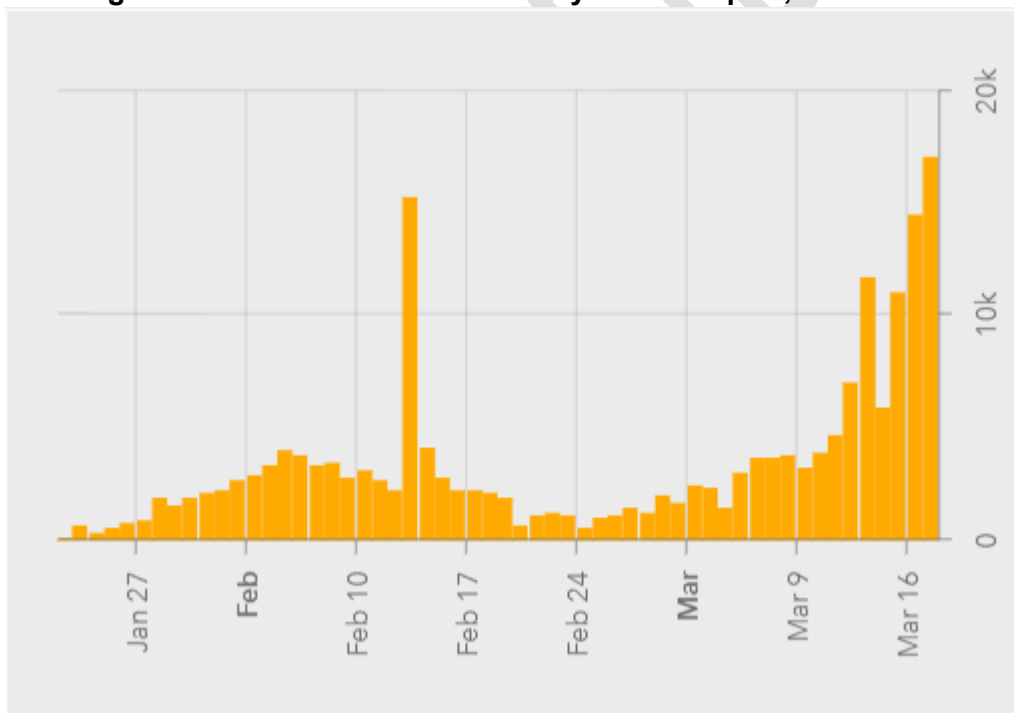


Figure 2: Global confirmed cases by date of report, as at 17 March 2020



WHOLE OF GOVERNMENT RESPONSE

New Zealand border response

23. Additional border measures came into effect at 0100 hours 15 March 2020.

- Category 1A includes mainland China and Iran; current border restrictions continue to apply.
 - Category 1B now includes all other international arrivals, except the Pacific. All travellers (New Zealanders and foreign nationals) are expected to self-isolate for 14 days from when they departed from the overseas country.
 - Category 2 travellers are from all Pacific Islands Forum members including Tokelau, Wallis and Futuna but not including French Polynesia. All these travellers are expected to self-monitor (but not self-isolate) for 14 days from when they depart from the Pacific Island country or territory.
 - Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt. The measures will be reviewed by Monday 30 March 2020.
24. Health exit measures for travellers leaving New Zealand to travel to the Pacific **are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch)**. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight.
25. There is a temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds. The maritime border measures do not apply to cargo ships or marine crew, to keep sea freight routes open for imports and exports, including essential supplies. **One cruise vessel was denied entry to New Zealand during the previous 24 hours. This vessel is operated by a New Zealand based company and has fewer than 50 passengers on board. It has not called in to any overseas ports since departing New Zealand. Further discussions will be held with the vessel operator and a request for an exemption to the cruise vessel ban may be made to the Ministers with Powers to Act.**
26. In the 24 hours ending **17 March 2020**, the New Zealand Customs Service data reported **no direct flights arrived from mainland China or other category 1A countries**. Passengers from all international flights, other than direct flights from the Pacific, are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries. **At Auckland International Airport, 78 people were assessed by nursing staff. Airport Police spoke with three passengers who had refused to complete the passenger health form, they subsequently did complete the form.**

New Zealand health sector response

27. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. **It became a quarantinable disease on 11 March 2020.**
28. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland, and Southern Community Laboratories in Dunedin are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
29. See Figures 2, 3 and 4 below for further information on (a) the number and location of confirmed cases in New Zealand, (b) laboratory capacity and (c) the number of people tested.

Figure 2: COVID tests completed in New Zealand.

	Auckland	Wellington*	Otago	Dunedin	Total NZ
Confirmed cases	9	3	1	2	15
Probable cases	2	0	0	0	2
Deaths	0	0	0	0	0

* Including 1 case tested and confirmed in Australia

Figure 3: Capacity of labs to test for covid-19, as at 18 March 2020

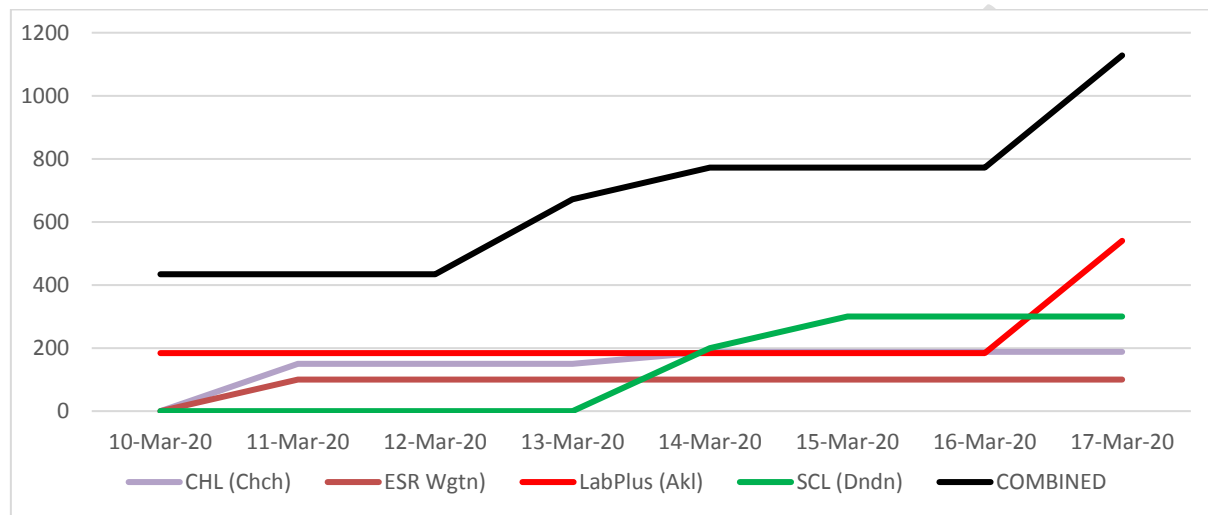
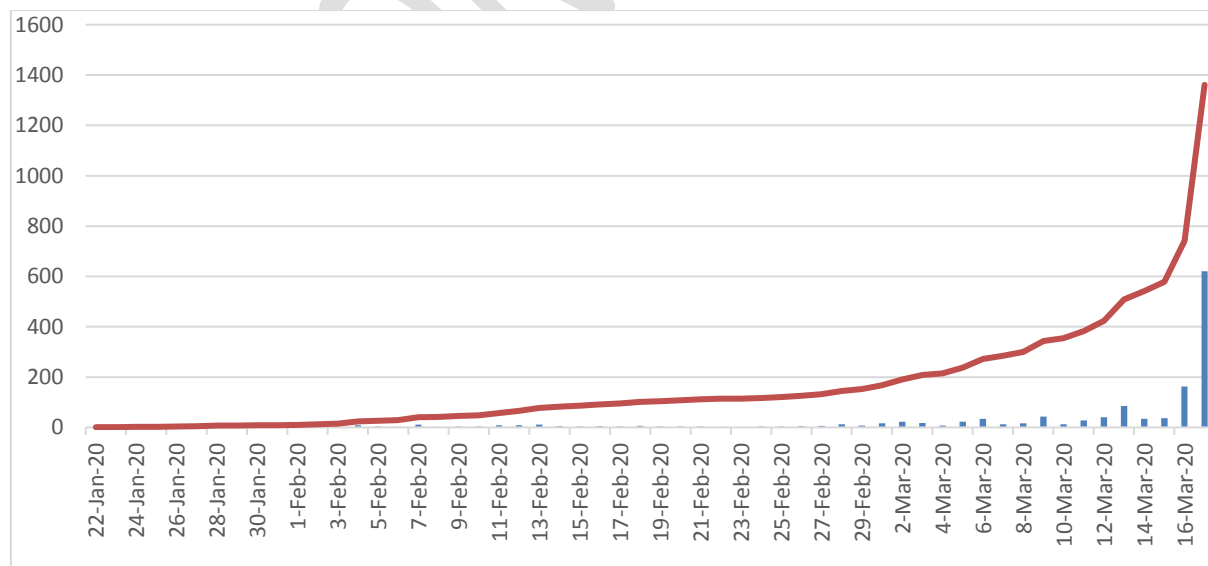


Figure 4: COVID-19 tests daily and cumulative totals, as at 18 March 2020



National Telehealth Service update

30. On 17 March 2020 Healthline managed approximately 10,396 inbound / outbound calls. This is 10 times more than we would normally receive – 4,720 of these with

clinical callers receiving a call back from Healthline. From today nurses are in the government helpline call centres to try to reduce the call back levels.

31. An increasing number of callers are seeking to report people they believe are not self-isolating correctly. Some of these are incorrect understanding of rules (e.g. mowing the lawns whilst self-isolated, which is fine), but many appear examples of people wilfully ignoring the requirements. We are working with NHCC to understand what processes we should use for these.
32. Of the 633 callers concerned about COVID-19 who did disclose some information:
- 256 callers were experiencing cold or flu-like symptoms
 - 185 (29%) were regarding people who had been outside NZ in the previous 4 weeks
 - 80% received self-care advice or information

Table: People registered and/or in self-isolation

3,777 people/households	Currently in isolation, inclusive of 1,115 online calls not yet in the consolidated register.
7,972	Completed isolation
~700	Additional household members (in isolation or completed isolation)
12,449	Total registered
~40,000	have crossed the border since midnight Sunday, and have completed paper forms that are currently being processed

Table: Isolation by location, by numbers of days in 14-day isolation period

Row Labels	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown	16	33	48	33	51	54	84	121	113	47	339	60	328	75	91	1493
unknown2												2	2		2	6
Auckland	12	14	16	14	14	14	28	30	14	29	22	15	28	32	31	313
Northland	2			1				1		3		1	1	2		11
Waitemata	13	11	7	4	13	16	12	10	16	13	35	19	20	31	30	250
Bay of Plenty	2	5			1			2		1	2	4	2	2	2	23
Counties Manukau	10	8	6	13	16	13	8	11	7	31	18	15	19	23	28	226
Waikato	16	2			4		3	8	3	1	5	1	1	5	2	51
Lakes	2	2		1	5	1				2	5	1	2	2	1	24
Hutt Valley	2	1	2		1	1		1			3		8	2	3	24
Southern	6				3		3	2	2	3		4	2	8	6	39
Nelson Marlborough	2	1			1				1	1	1	1	2			10
Canterbury	5	12	3	2	6	4	2	5	1	11	13	4	4	8	3	83
South Canterbury											1					1
Hawkes Bay		1								1	1		1		1	5
Capital and Coast	13	8	1	1	1	1	2	6	1	2	5	3	4		15	63
Taranaki	1	1				1			1		1	1		1		7
MidCentral	1	2						2		2	5	4		1	1	18
Tairāwhiti					4										1	5
Whanganui			2									2				4
Wairarapa										1	2					3
Wellington										1						1
North Shore					1		1									2
Grand Total	103	101	85	69	121	105	143	199	159	149	458	137	424	192	217	2662

33. See the appendices for further information.

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment

- 34. Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains HIGH.
- 35.** Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently MODERATE. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
- 36. Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is HIGH, the likelihood of sustained transmission is MODERATE and the likelihood of widespread outbreaks is LOW This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
- 37.** However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
- 38.** Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be HIGH both for public health staff, the wider health sector and the community.
- 39. Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

- 40.** The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
- 41.** The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
- The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on

health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.

- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

- 42.** The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
- 43.** The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
- 44.** NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

IN CONFIDENCE

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on 19 March 2020.**

Prepared by: Bridget Murphy, Martin Kennedy and Martin Anderson, NHCC Intelligence

Approved by: Hamish Gibson, pp the NHCC Response Manager



SITREP 60
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 19 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 19 March 2020.

SUMMARY

1. As at 9:11am on 19 March 2020: **26 confirmed cases, and 2 probable cases.**
2. An outbreak of novel coronavirus (COVID-19) originated in mainland China with the epicentre in Hubei Province. The Director-General of the World Health Organization (WHO) has stated that Europe has now become the epicentre of the pandemic. Overall, there have now been more cases reported outside of China. **Over recent days reported case numbers have been increasing most rapidly in Italy, Spain, Iran, France and Germany.**
3. As reported by the WHO on **18 March 2020**, globally there has been an increase of **15,123** confirmed cases (**191,127** confirmed cases in total) and **786** new deaths reported (**7,807** confirmed deaths in total).
4. In the situation report of 17 March, the WHO note that the risk of infection remains low for people who are not in an area where COVID-19 is spreading, those who have not travelled from an area where COVID-19 is spreading, those who have not been in contact with an infected patient.
5. **Data from the first patients in the USA indicates that fatality was highest in patients aged 85 and over (10 to 27%), followed by 3 to 11% among patients aged 65-84 years, 1 to 3% for those aged 55 to 64 and <1% for those aged 20 to 54 years. No ICU admissions or fatalities were recorded among persons 19 years and under.**
6. It's important to note that health professionals will look at each case on an individual basis.
7. WHO currently recommends testing contacts of confirmed cases only if they show symptoms of COVID-19. This is what we're doing in New Zealand.

KEY MESSAGES

8. New Zealand is taking a Keep it Out, Stamp It Out and Slow It Down approach.

9. The WHO has now declared COVID-19 a pandemic. The announcement formalises New Zealand's current approach to COVID-19. All our planning has been on the basis that COVID-19 was in the early stages of a pandemic.
10. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
11. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
12. We continue to regularly review border restrictions and advice around any changes required.
13. New Zealand is continuing to actively track and monitor COVID-19 in New Zealand.
14. New Zealand will continue to see isolated cases. Close contacts of any cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
15. New Zealand continues to improve its capacity to test for COVID-19. Our current test capacity is 1128 per day and we expect that to be around 1500 per day later this week.
16. All of us have a role to play in stopping further spread. Fundamental to New Zealand's response is not putting yourself or others at risk. Everyone can help by ensuring good health etiquette – stay home if you're unwell, washing and drying your hands well, sneeze into your elbow, and not touching your face.
17. Healthline is experiencing high volumes of calls and continues to add resources and people to the team, to manage these.
18. A centralised contact tracing system has been stood up to assist Public Health Units to manage the increasing work at the regional level.

OUTBREAK SITUATION

19. As at 9:11am on 19 March 2020 morning: 26 confirmed cases, 2 probable cases, 685 cases are classified as under investigation and 724 cases that have been made 'not a case'.
20. As reported by the WHO on 18 March 2020, globally there has been 7,807 confirmed deaths and 191,127 confirmed cases. Based on the number of reported cases globally, the case fatality rate is approximately 4.1%.
21. As reported by the WHO on 18 March 2020, 1 new countries/territories/areas (Montenegro) has reported confirmed cases in the past 24 hours. See Figures 1 and 2 below for further information from WHO.

Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 18 March 2020

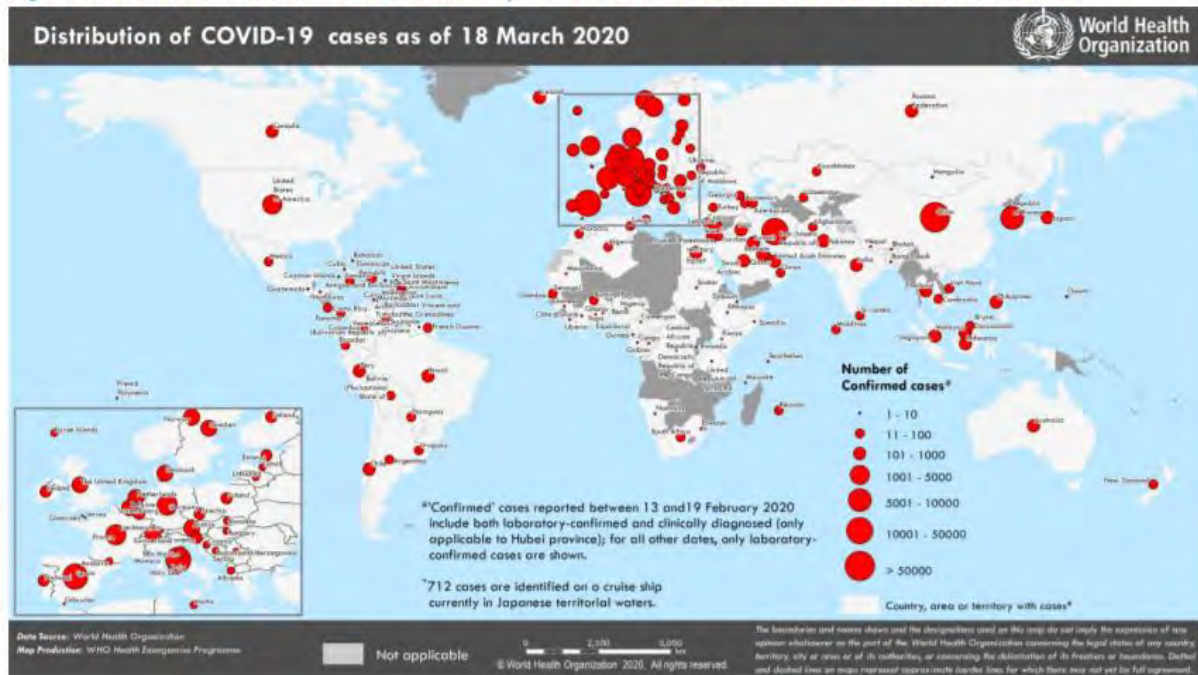
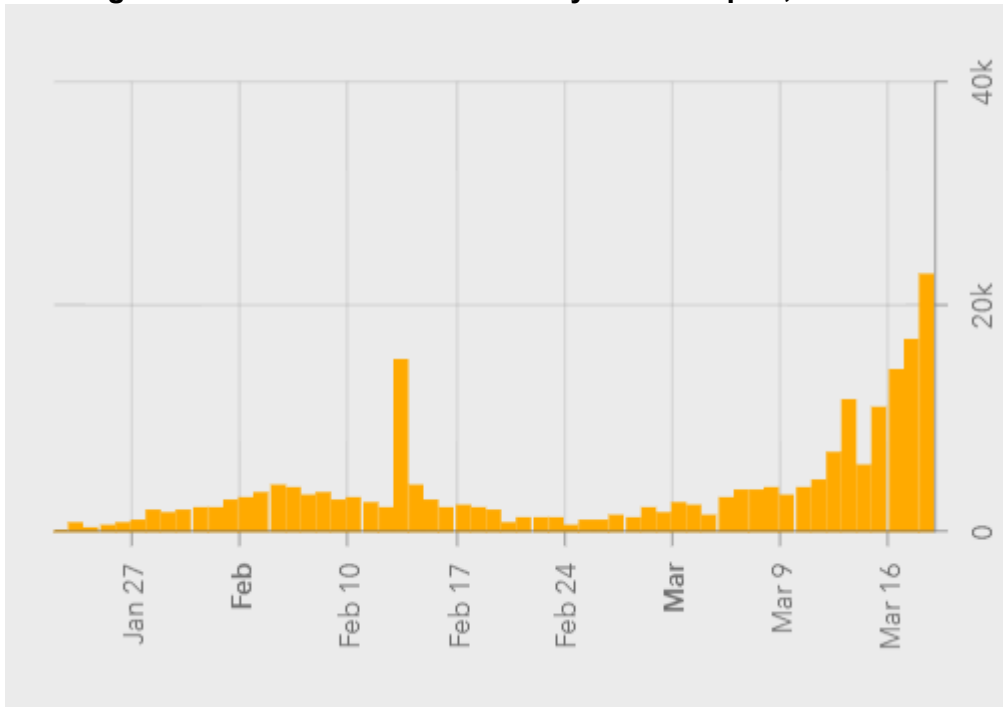


Figure 2: Global confirmed cases by date of report, as at 18 March 2020



WHOLE OF GOVERNMENT RESPONSE

New Zealand border response

22. Additional border measures came into effect at 0100 hours 15 March 2020.
- Category 1A includes mainland China and Iran; current border restrictions continue to apply.
 - Category 1B now includes all other international arrivals, except the Pacific. All travellers (New Zealanders and foreign nationals) are expected to self-isolate for 14 days from when they departed from the overseas country.
 - Category 2 travellers are from all Pacific Islands Forum members including Tokelau, Wallis and Futuna but not including French Polynesia. All these travellers are expected to self-monitor (but not self-isolate) for 14 days from when they depart from the Pacific Island country or territory.
 - Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt. The measures will be reviewed by Monday 30 March 2020.
23. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight.
24. There is a temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds. The maritime border measures do not apply to cargo ships or marine crew, to keep sea freight routes open for imports and

exports, including essential supplies. One cruise vessel was denied entry to New Zealand. This vessel is operated by a New Zealand based company and has fewer than 50 passengers on board. It has not called in to any overseas ports since departing New Zealand. Further discussions will be held with the vessel operator and a request for an exemption to the cruise vessel ban may be made to the Ministers with Powers to Act.

25. Passengers from all international flights, other than direct flights from the Pacific, are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries. A new passenger arrival card will come into effect on Friday 20 March 2020, which will include questions about COVID-19, and will require passengers to provide self-isolation information including their address. This provides for stronger compliance if required.

New Zealand health sector response

26. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
27. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland, and Southern Community Laboratories in Dunedin are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
28. See Table 1 and figures 3 and 4 below for further information on (a) the number and location of confirmed cases in New Zealand, (b) laboratory capacity and (c) the number of people tested.

Table 1: confirmed and probable cases by DHB (30 Jan 2020 to 19 Mar 2020). Data source: EpiSurv as of 19 Mar, 9.11am

Status	Auckl and	Canter bury	Capital and Coast*	Counties Manukau	Lak es	Sout hern	Tara naki	Waik ato	Waite mata	To tal
Confir med	5	1	3	3	1	4	2	2	5	26
Proba ble	0	0	0	1	0	0	0	0	1	2
Death s	0	0	0	0	0	0	0	0	0	0

* including one case tested and confirmed in Australia

Figure 3: Capacity of labs to test for covid-19, as at 19 March 2020

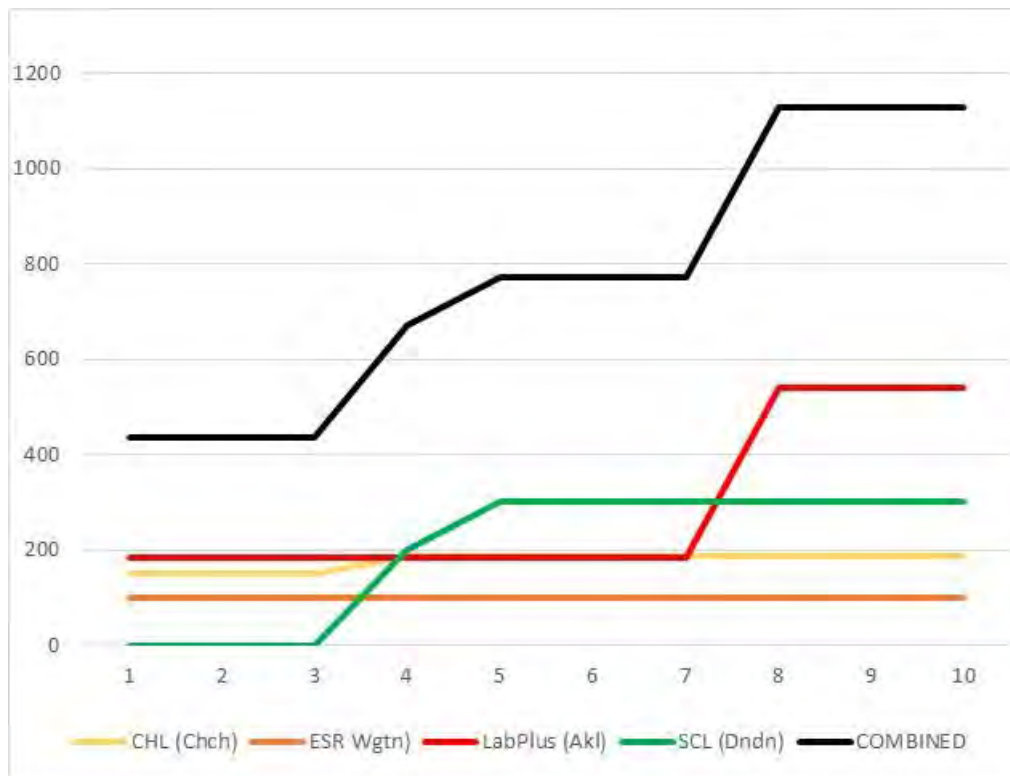
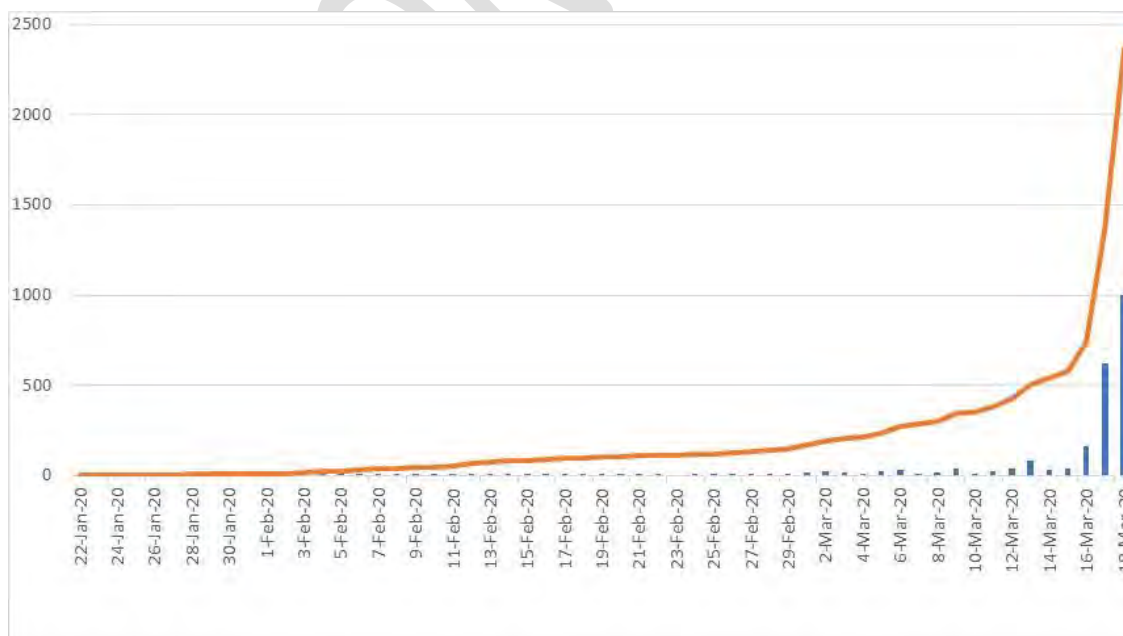


Figure 4: COVID-19 tests daily and cumulative totals, as at 19 March 2020



National Telehealth Service update

29. On 18 March 2020 Healthline managed approximately 10,078 inbound / outbound calls. This is more than 10 times we would normally have managed – and the government helpline infrastructure responded to 4,532 of these with clinical callers receiving a call back from Healthline where nurse floor walkers were at capacity..
30. Of the 275 callers concerned about COVID-19 who did disclose some information:
- a. 100 callers were experiencing cold or flu-like symptoms
 - b. 94 (34%) were regarding people who had been outside NZ in the previous 4 weeks
 - c. 85% received self-care advice or information

Table: People registered and/or in self-isolation

4,961 people/households	Currently in isolation inclusive of 1941 online self-registrations not yet in the consolidated register.
8,210	Completed isolation
~700	Additional household members (in isolation or completed isolation)
13,871	Total registrations
26,355	19,355 border records to end 17/03 + estimate of a further 7,000 for 18/03 = 26,355 registrations that are not yet in the consolidated register

Table: Isolation by location, by numbers of days in 14-day isolation period

Row Labels	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown	21	21	35	114	100	69	73	92	132	118	67	342	67	331	81	1663
Auckland	19	14	18	22	17	14	17	29	31	15	30	22	15	29	33	325
Ashburton					5											5
Northland	2	2			1				1		3		1	1	2	13
Waitemata	11	13	11	8	8	13	24	13	11	16	13	37	20	20	32	250
Bay of Plenty	3	2	6			1			2		1	2	4	2	2	25
Counties Manukau	12	10	6	11	13	16	14	9	11	7	31	18	17	20	23	218
Waikato	9	11	2		1	4		3	8	7	2	5	1	2	5	60
Lakes	4	2	2		1	5	1				2	5	1	2	2	27
Hutt Valley	4	2	1	2		4	1		2			3		8	2	29
Southern	10	5				4	1	3	2	2	3		4	2	8	44
Nelson Marlborough		2	1			1				1	1	1	1	4		12
Canterbury	23	5	14	4	7	7	5	3	5	5	11	13	4	4	8	118
South Canterbury	3			1								1				5
Hawkes Bay			1								1	1	2	1		6
Capital and Coast	13	13	8	2	1	2	3	2	6	4	3	5	3	4		69
Taranaki	5	1	1	3			1			1		1	1		1	15
MidCentral	4	1	1	1					2		2	5	4		1	21
Tairāwhiti						4										4
Whanganui				2									2			4
Wairarapa											1	2				3
Christchurch				10	8	1	3									22
Manukau				5	2		1									8
Wellington				3	3						1	1				8
North Shore				2	4	1	3	2								12
Papakura											1					1
New Plymouth				5	1		2									8
Rodney					3				1							4
Waitakere				1	1	2	1									5
Hamilton					5											5
Tasman					1											1
Upper Hutt					1											1
Palmerston North				1	1											2
Rotorua				2	1											3
Dunedin				9	2								1			12
Kapiti Coast					2											2
South Wairarapa					1											1
Waimate					1											1
Taupo					3											3
Tauranga				1												1
Whangarei						1										1
Selwyn				1												1
Invercargill				1												1
Southland				1												1
Grand Total	143	104	107	212	194	149	150	156	214	176	173	464	148	430	200	3020

31. See the appendices for further information.

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment

1. **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains HIGH.
2. Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently MODERATE. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
3. **Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is HIGH, the likelihood of sustained transmission is MODERATE and the likelihood of widespread outbreaks is LOW This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be HIGH both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

7. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on

health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.

- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

IN CONFIDENCE

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on 19 March 2020.**

Prepared by: Bridget Murphy, Martin Kennedy and Martin Anderson, NHCC Intelligence

Approved by: Hamish Gibson, pp the NHCC Response Manager



SITREP 61
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 20 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 20 March 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

New Zealand

1. As at 8:41am on 20 March 2020: **39 confirmed cases, and 3 probable cases.**
2. Additional border measures came into effect at 11:59 hours 19 March 2020. Only New Zealand residents and citizens (and their children and partners) will be permitted to enter New Zealand.
3. There is a shortage of swabs in New Zealand, so it is important that testing is only done when case criteria are met and only one swab should be used per person. GPs must not test those without epidemiological links.

Global

4. An outbreak of novel coronavirus (COVID-19) originated in mainland China with the epicentre in Hubei Province. The Director-General of the World Health Organization (WHO) has stated that Europe has now become the epicentre of the pandemic. Overall, there have now been more cases reported outside of China. Over recent days reported case numbers have been increasing most rapidly in Italy, Spain, Iran, France and Germany.
5. As reported by the WHO on 18 March 2020, globally there has been an increase of 15,123 confirmed cases (191,127 confirmed cases in total) and 786 new deaths reported (7,807 confirmed deaths in total). This information will be updated when it becomes available.
6. In the situation report of 17 March, the WHO note that the risk of infection remains low for people who are not in an area where COVID-19 is spreading, those who have not travelled from an area where COVID-19 is spreading, those who have not been in contact with an infected patient.
7. Data from the first patients in the USA indicates that fatality was highest in patients aged 85 and over (10 to 27%), followed by 3 to 11% among patients

aged 65 to 84 years, 1 to 3% for those aged 55 to 64 and <1% for those aged 20 to 54 years. No ICU admissions or fatalities were recorded among persons 19 years and under.

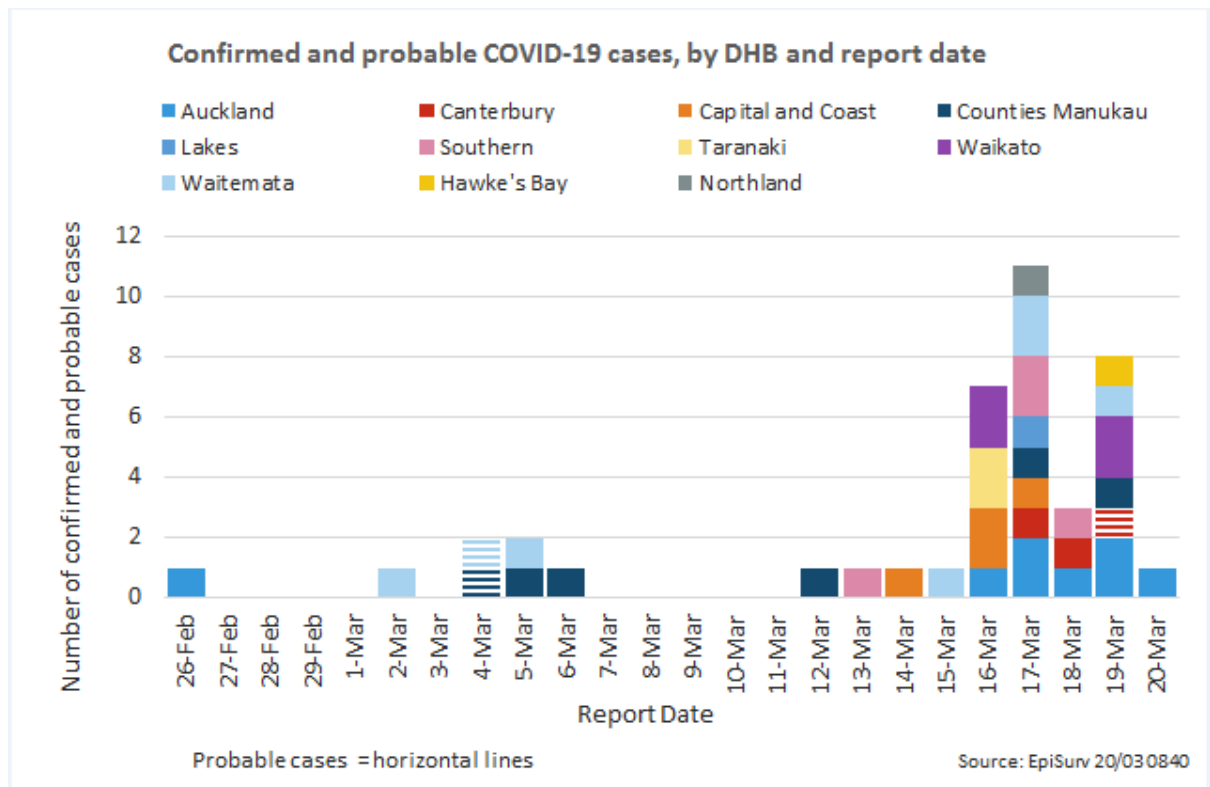
KEY MESSAGES

8. New Zealand is taking a Keep it Out, Stamp It Out and Slow It Down approach.
9. The WHO has now declared COVID-19 a pandemic. The announcement formalises New Zealand's current approach to COVID-19. All our planning has been on the basis that COVID-19 was in the early stages of a pandemic.
10. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
11. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
12. We continue to regularly review border restrictions and advice around any changes required.
13. New Zealand is continuing to actively track and monitor COVID-19 in New Zealand.
14. New Zealand will continue to see isolated cases. Close contacts of any cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
15. New Zealand continues to improve its capacity to test for COVID-19. Our current test capacity is 1128 per day and we expect that to be around 1500 per day later this week.
16. All of us have a role to play in stopping further spread. Fundamental to New Zealand's response is not putting yourself or others at risk. Everyone can help by ensuring good health etiquette – stay home if you're unwell, washing and drying your hands well, sneeze into your elbow, and not touching your face.
17. Healthline is experiencing high volumes of calls and continues to add resources and people to the team, to manage these.
18. A centralised contact tracing system has been stood up to assist Public Health Units to manage the increasing work at the regional level.

OUTBREAK SITUATION

New Zealand

19. As at 11.00 am on 20 March 2020: 39 confirmed cases, 3 probable cases, 894 cases are classified as under investigation and 844 cases that have been made 'not a case'. (Note the graph does not include the second case confirmed on 20 March 2020.) See the figure below for information by DHB:



Global

20. As reported by the WHO on 18 March 2020, globally there has been 7,807 confirmed deaths and 191,127 confirmed cases. Based on the number of reported cases globally, the case fatality rate is approximately 4.1%. This information will be updated when it becomes available from the WHO.
21. As reported by the WHO on 18 March 2020, 1 new country/territory/area (Montenegro) reported confirmed cases in the past 24 hours. See Figures 1 and 2 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 18 March 2020

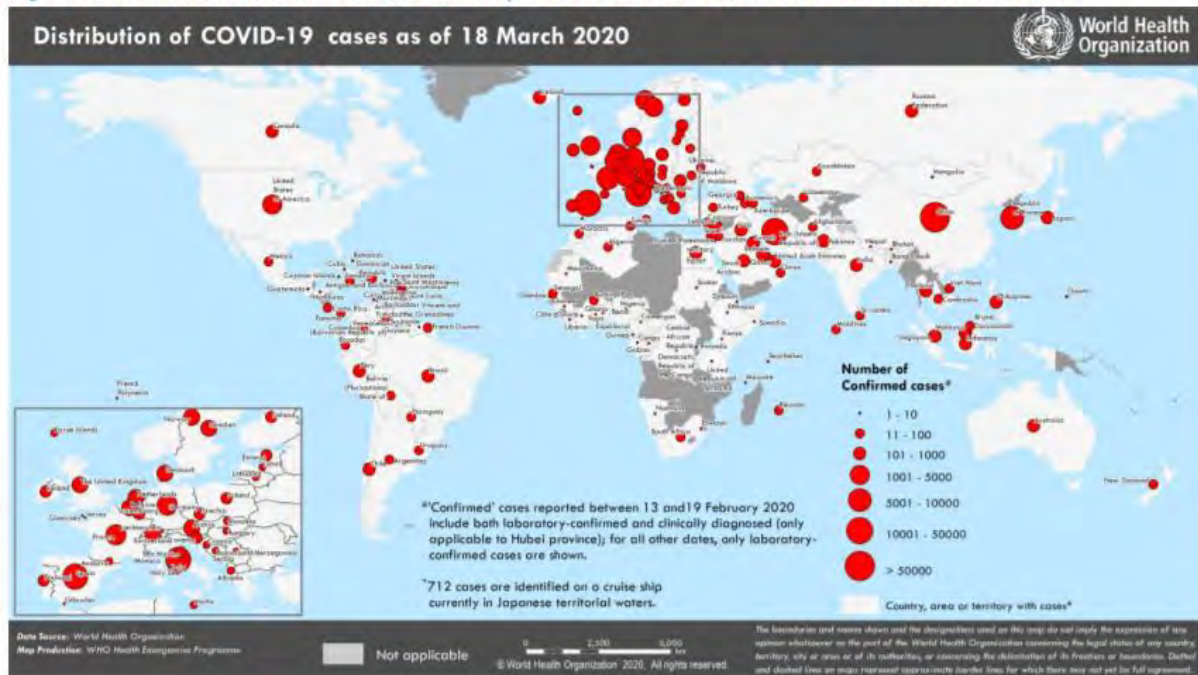
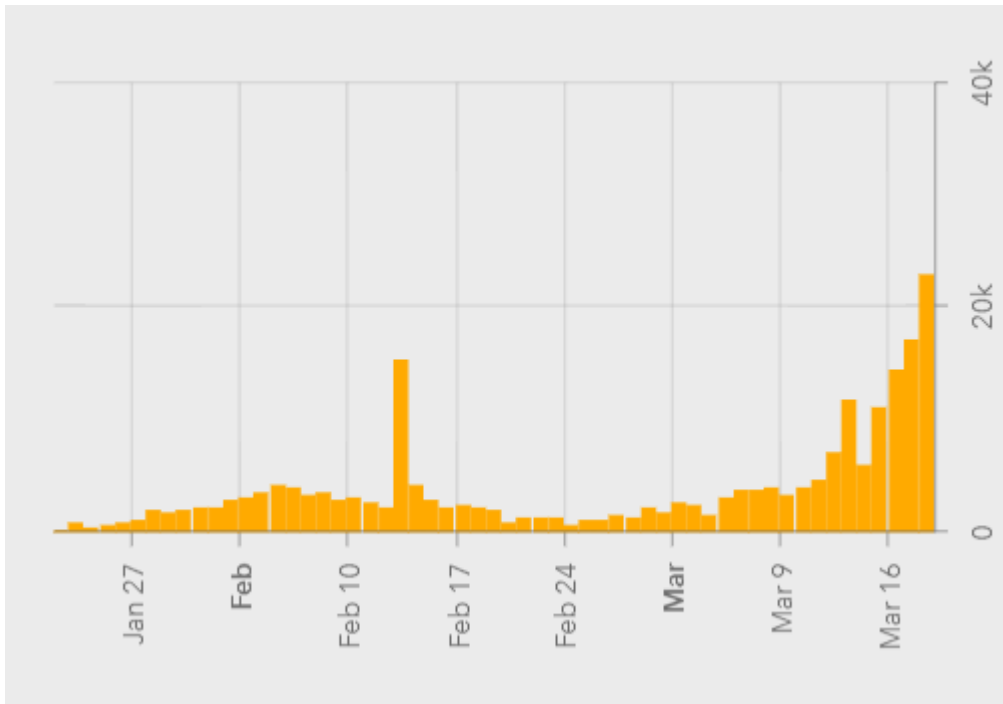


Figure 2: Global confirmed cases by date of report, as at **18 March 2020**



WHOLE OF GOVERNMENT RESPONSE

New Zealand border response

22. Additional border measures came into effect at 11.59 hours 19 March 2020. Only New Zealand residents and citizens (and their children and partners) will be permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers, humanitarian reasons, and others. Everyone permitted to enter New Zealand is expected to self-isolate for 14 days from when they departed from the overseas country. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt. The measures will be reviewed by Monday 30 March 2020. An urgent update was sent to border stakeholders at 6.35pm last night and responses provided to queries. Further information will be provided today.
23. There is a temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds. The maritime border measures do not apply to cargo ships or marine crew, to keep sea freight routes open for imports and exports, including essential supplies. There are five cruise vessels in New Zealand waters. All have discharged their passengers and are preparing for departure (eg loading stores, undertaking engineering works, awaiting instructions). One cruise vessel has no passengers on board, has departed Cairns to remain at sea and is requesting drydock in Auckland in early April.

24. Passengers from all international flights are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries. The new passenger arrival card **came into effect at 03.00 am** on Friday 20 March 2020. It includes questions about COVID-19, requires passengers to provide self-isolation information (including their address), and provides for stronger compliance if required.
25. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight.

New Zealand health sector response

26. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
27. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland, Waikato Hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
28. See Table 1 and figures 3 and 4 below for further information on (a) the number and location of confirmed cases in New Zealand, (b) laboratory capacity and (c) the number of people tested.

Table 1: confirmed and probable cases by DHB (30 Jan 2020 to 20 Mar 2020). Data source: EpiSurv as of 20 Mar, 11.00 am.

	Auckland	Canterbury	Capital and Coast*	Counties Manukau	Hawke's Bay	Lakes	Northland	Southern	Taranaki	Waikato	Waitemata	Total
Confirmed	9	2	4	5	1	1	1	4	2	4	6	39
Probable	0	1	0	1	0	0	0	0	0	0	1	3
Deaths	0	0	0	0	0	0	0	0	0	0	0	0

Figure 3: Daily capacity of labs to test for covid-19, as at 19 March 2020

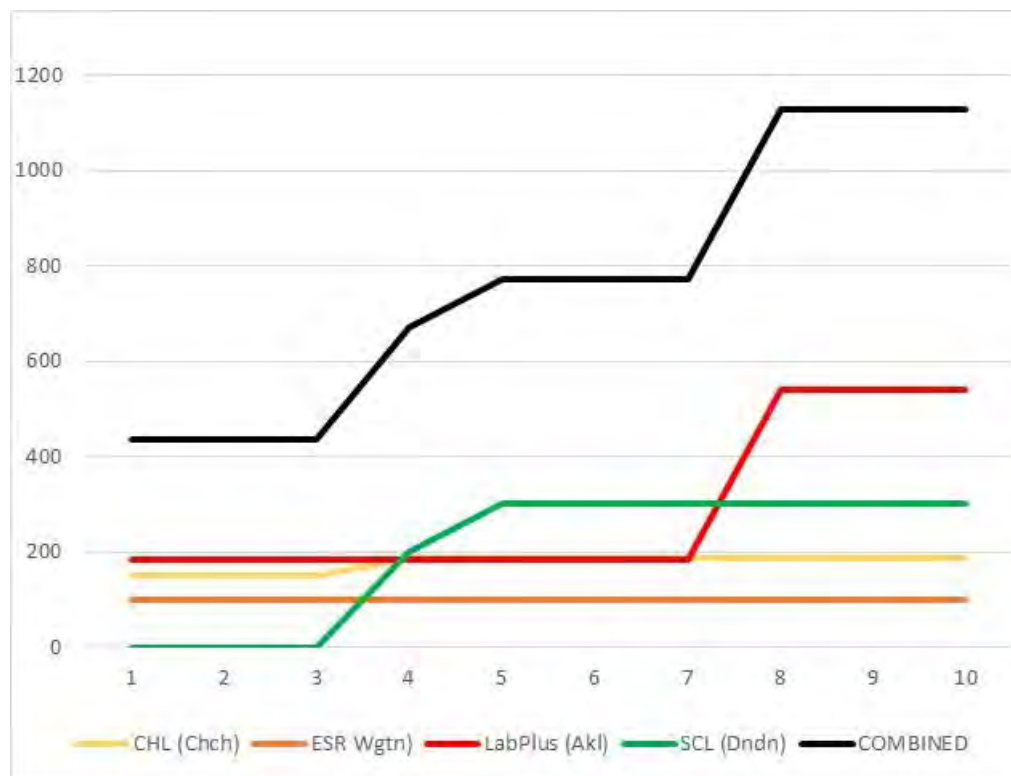
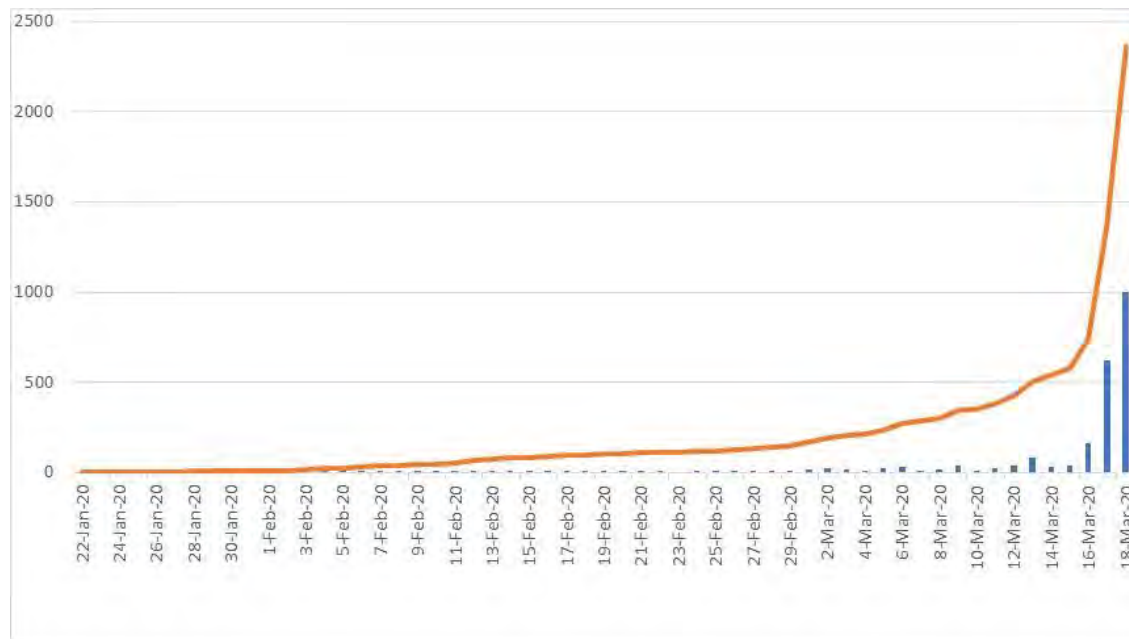


Figure 4: COVID-19 tests daily and cumulative totals, as at 19 March 2020

On 18 March 2020, 1002 tests were done.



National Telehealth Service update

29. On **19 March 2020** Healthline managed approximately **9,255** inbound / outbound calls. This is more than 10 times we would normally have managed – and the government helpline infrastructure responded to **3,405** of these with clinical callers receiving a call back from Healthline where nurse floor walkers were at capacity.
30. Of the **275** callers concerned about COVID-19 who did disclose some information:
- a. **51% of** callers were experiencing cold or flu-like symptoms
 - b. **31%** were regarding people who had been outside NZ in the previous 4 weeks
 - c. **80%** received self-care advice or information

Table: People registered and/or in self-isolation

7,985 people/households	Currently in isolation inclusive of 1941 online self-registrations not yet in the consolidated register.
8,410	Completed isolation
~700	Additional household members (in isolation or completed isolation)
17,090	Total registrations
32,755	18,755 border records to end 17/03 + estimate of a further 14,000 for 18/03 = 32,755 registrations that are not yet in the consolidated register

Table: Isolation by location, by numbers of days in 14-day isolation period

Row Labels	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown	21	21	35	114	100	69	73	92	132	118	67	342	67	331	81	1663
Auckland	19	14	18	22	17	14	17	29	31	15	30	22	15	29	33	325
Ashburton					5											5
Northland	2	2			1				1		3		1	1	2	13
Waitemata	11	13	11	8	8	13	24	13	11	16	13	37	20	20	32	250
Bay of Plenty	3	2	6			1			2		1	2	4	2	2	25
Counties Manukau	12	10	6	11	13	16	14	9	11	7	31	18	17	20	23	218
Waikato	9	11	2		1	4		3	8	7	2	5	1	2	5	60
Lakes	4	2	2		1	5	1				2	5	1	2	2	27
Hutt Valley	4	2	1	2		4	1		2			3		8	2	29
Southern	10	5				4	1	3	2	2	3		4	2	8	44
Nelson Marlborough		2	1			1				1	1	1	1	4		12
Canterbury	23	5	14	4	7	7	5	3	5	5	11	13	4	4	8	118
South Canterbury	3			1								1				5
Hawkes Bay			1								1	1	2	1		6
Capital and Coast	13	13	8	2	1	2	3	2	6	4	3	5	3	4		69
Taranaki	5	1	1	3			1			1		1	1		1	15
MidCentral	4	1	1	1					2		2	5	4		1	21
Tairāwhiti						4										4
Whanganui				2									2			4
Wairarapa											1	2				3
Christchurch				10	8	1	3									22
Manukau				5	2		1									8
Wellington				3	3						1	1				8
North Shore				2	4	1	3	2								12
Papakura											1					1
New Plymouth				5	1		2									8
Rodney					3				1							4
Waitakere				1	1	2	1									5
Hamilton					5											5
Tasman					1											1
Upper Hutt					1											1
Palmerston North				1	1											2
Rotorua				2	1											3
Dunedin				9	2								1			12
Kapiti Coast					2											2
South Wairarapa					1											1
Waimate					1											1
Taupo					3											3
Tauranga				1												1
Whangarei						1										1
Selwyn				1												1
Invercargill				1												1
Southland				1												1
Grand Total	143	104	107	212	194	149	150	156	214	176	173	464	148	430	200	3020

31. See the appendices for further information.

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment

1. **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains HIGH.
2. Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently MODERATE. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
3. **Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is HIGH, the likelihood of sustained transmission is MODERATE and the likelihood of widespread outbreaks is LOW This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
5. Public health impact: the impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of cases in New Zealand would be HIGH both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

7. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on

health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.

- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

IN CONFIDENCE

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on 21 March 2020.**

Prepared by: Bridget Murphy, Martin Kennedy and Martin Anderson, NHCC Intelligence

Approved by: Hamish Gibson, pp the NHCC Response Manager



SITREP 62
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 21 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 21 March 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

New Zealand

1. The Prime Minister has announced a new covid-19 specific alert system. We are on Level 2: the disease is contained but risk is growing. Further information will be on the Ministry of Health website shortly.
2. As at 8:00am on 21 March 2020: **53 confirmed cases, and 5 probable cases.** Two of the cases since sitrep 61 are under investigation as they do not have obvious links to overseas travel.
3. Additional border measures came into effect at 11:59 hours 19 March 2020. Only New Zealand residents and citizens (and their children and partners) will be permitted to enter New Zealand.

Global

4. An outbreak of novel coronavirus (COVID-19) originated in mainland China with the epicentre in Hubei Province. The Director-General of the World Health Organization (WHO) has stated that Europe has now become the epicentre of the pandemic. Overall, there have now been more cases reported outside of China. Over recent days reported case numbers have been increasing most rapidly in Italy, Spain, Iran, France and Germany.
5. As reported by the WHO on 20 March 2020, globally there has been an increase of **24,247 confirmed cases (234,073 confirmed cases in total) and 1,061 new deaths reported (9,840 confirmed deaths in total).**
6. In the situation report of 17 March, the WHO note that the risk of infection remains low for people who are not in an area where COVID-19 is spreading, those who have not travelled from an area where COVID-19 is spreading, those who have not been in contact with an infected patient.

7. Data from the first patients in the USA indicates that fatality was highest in patients aged 85 and over (10 to 27%), followed by 3 to 11% among patients aged 65 to 84 years, 1 to 3% for those aged 55 to 64 and <1% for those aged 20 to 54 years. No ICU admissions or fatalities were recorded among persons 19 years and under.

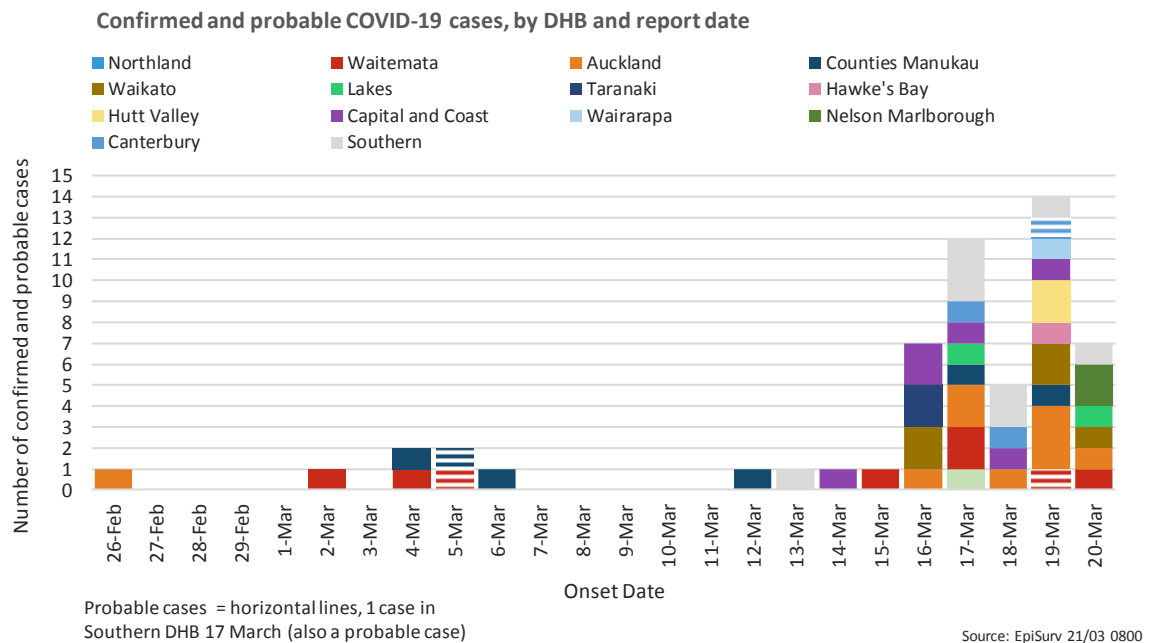
KEY MESSAGES

8. New Zealand is taking a Keep it Out, Stamp It Out and Slow It Down approach. **The Prime Minister announced a new covid-19 specific alert system. We are on level 2: the disease is contained but risk is growing.**
9. The WHO has now declared COVID-19 a pandemic. The announcement formalises New Zealand's current approach to COVID-19. All our planning has been on the basis that COVID-19 was in the early stages of a pandemic.
10. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
11. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
12. We continue to regularly review border restrictions and advice around any changes required.
13. New Zealand is continuing to actively track and monitor COVID-19 in New Zealand.
14. Close contacts of any cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
15. New Zealand continues to improve its capacity to test for COVID-19. Our current test capacity is **1664** per day and we expect that rise further over the next few days.
16. All of us have a role to play in stopping further spread. Fundamental to New Zealand's response is not putting yourself or others at risk. Everyone can help by ensuring good health etiquette — stay home if you're unwell, washing and drying your hands well, sneeze into your elbow, and not touching your face.
17. Healthline is experiencing high volumes of calls and continues to add resources and people to the team, to manage these.
18. A centralised contact tracing system has been stood up to assist Public Health Units to manage the increasing work at the regional level.

OUTBREAK SITUATION

New Zealand

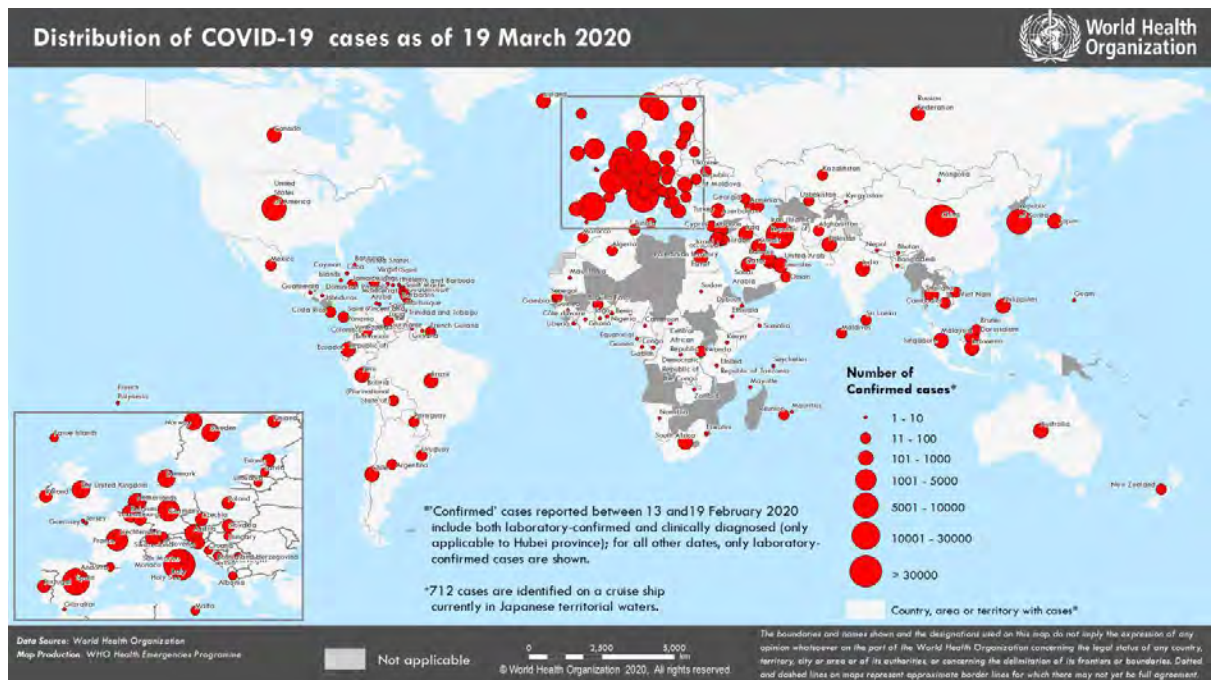
19. As at 11.00 am on **21 March 2020: 53 confirmed cases, and 5 probable cases.** See the figure below for information by DHB:



Global

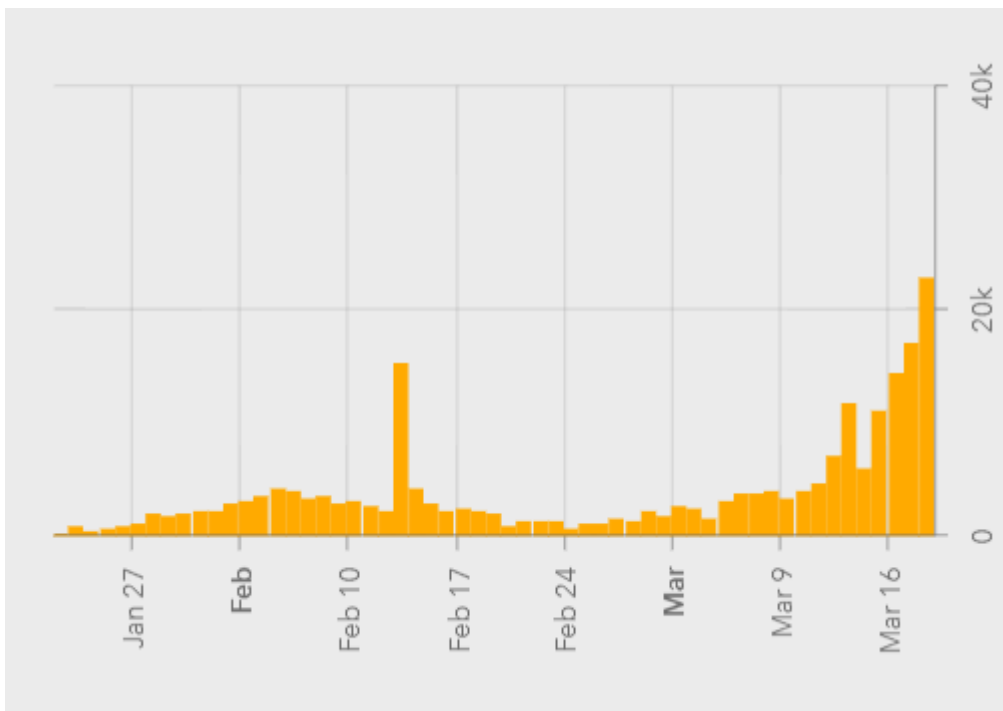
20. As reported by the WHO on 20 March 2020 (10.28am), globally there have been 9,840 confirmed deaths and 234,073 confirmed cases across 177 countries, areas or territories. Based on the number of reported cases globally, the case fatality rate is approximately 4.2%. This information will be updated when it becomes available from the WHO.
21. As reported by the WHO on 20 March 2020, 7 new country/territory/area (African Region 3, Eastern Mediterranean Region 1, European Region 1, and Region of the Americas 2) reported confirmed cases. See Figures 1 and 2 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 19



On 20 March 2020, the WHO reported that the number of confirmed cases worldwide has exceeded 200 000. It took over three months to reach the first 100,000 confirmed cases, and only 12 days to reach the next 100,000.

Figure 2: Global confirmed cases by date of report, as at 18 March 2020



WHOLE OF GOVERNMENT RESPONSE

New Zealand border response

22. Additional border measures came into effect at 11.59 hours 19 March 2020. Only New Zealand residents and citizens (and their children and partners) will be permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers, humanitarian reasons, and others. Everyone permitted to enter New Zealand is expected to self-isolate for 14 days from when they departed from the overseas country. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt. The measures will be reviewed by Monday 30 March 2020. An urgent update was sent to border stakeholders at 6.35pm last night and responses provided to queries. A border advisory was sent last night and is available on Ministry of Health website.
23. There is a temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds. The maritime border measures do not apply to cargo ships or marine crew, to keep sea freight routes open for imports and exports,

including essential supplies. Officials have been informed of COVID-19 cases on two cruise vessels recently in New Zealand waters and now in Australia. Work is underway to trace the New Zealanders on the vessels and to inform overseas countries of any nationals they had on the vessels.

24. Passengers from all international flights are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries. The new passenger arrival card came into effect at 03.00 am on Friday 20 March 2020. It includes questions about COVID-19, requires passengers to provide self-isolation information (including their address), and provides for stronger compliance if required.
25. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight.

New Zealand health sector response

26. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
27. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland, Waikato Hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
28. See Table 1 and figures 3 and 4 below for further information on (a) the number and location of confirmed cases in New Zealand, (b) laboratory capacity and (c) the number of people tested.

Table 1: confirmed and probable cases by DHB (30 Jan 2020 to 20 Mar 2020). Data source: EpiSurv as of 21 March 2020, 11.00 am.

(This table was produced a few hours before the MoH announcement of 53 cases.)

Status			
DHB	Confirmed	Probable	Deaths
Northland	1	0	0
Waitemata	7	1	0
Auckland	8	1	0
Counties Manukau	5	1	0
Waikato	5	0	0
Lakes	2	0	0
Taranaki	2	0	0
Hawke's Bay	1	0	0
Hutt Valley	2	0	0
Capital and Coast*	6	0	0
Wairarapa	1	0	0
Nelson Marlborough	2	0	0
Canterbury	2	1	0
Southern	7	1	0
Total	51	5	0

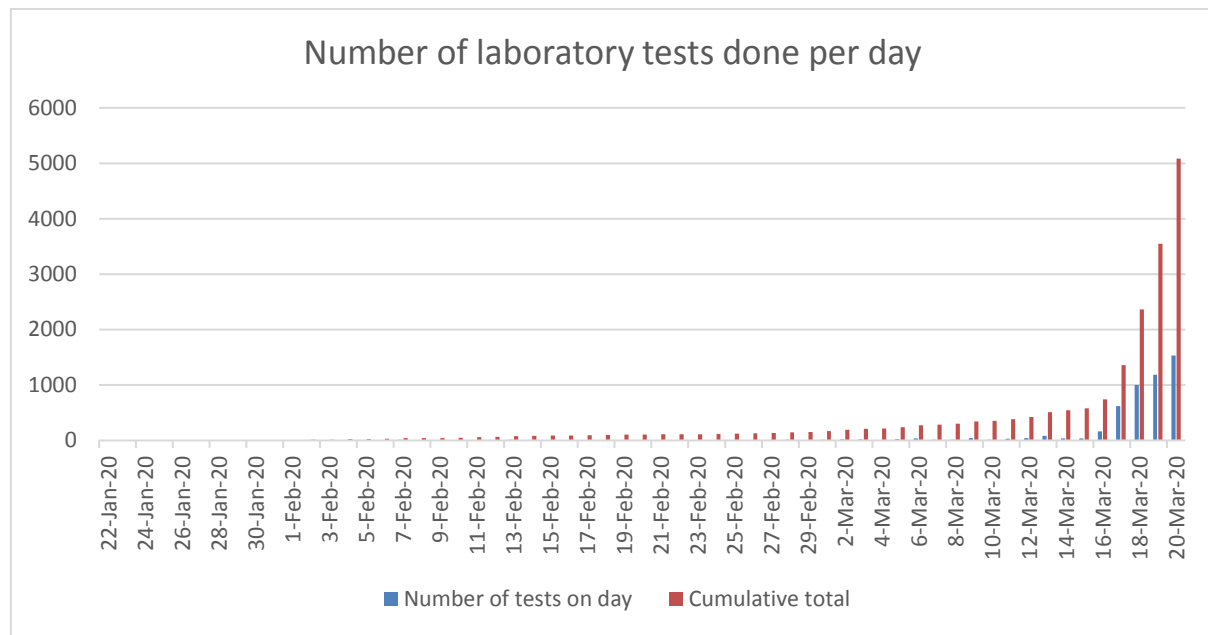
* including one case tested and confirmed in Australia

Figure 3: Daily capacity of labs to test for covid-19, as at 21 March 2020

Date	10-Mar-20	11-Mar-20	12-Mar-20	13-Mar-20	14-Mar-20	15-Mar-20	16-Mar-20	17-Mar-20	18-Mar-20	19-Mar-20	20-Mar-20	21-Mar-20
Capacity	434	434	434	672	772	772	772	1128	1128	1128	1128	1664

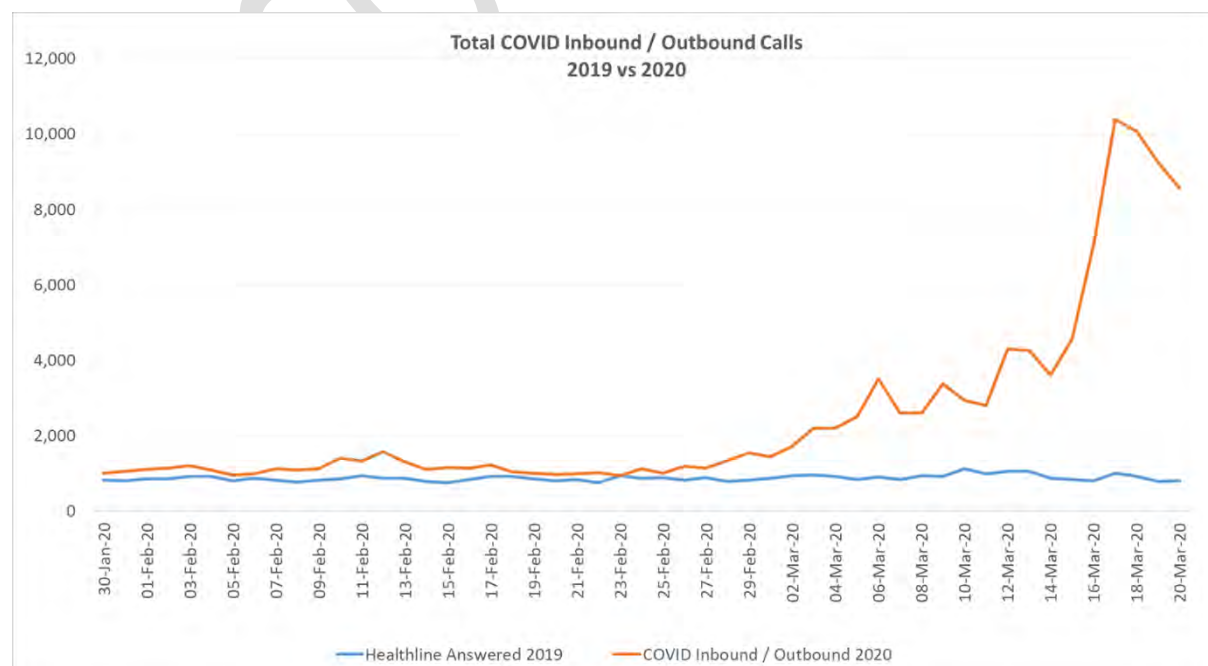
Figure 4: COVID-19 tests daily and cumulative totals, as at 20 March 2020

On 20 March 2020, 1,535 tests were done.



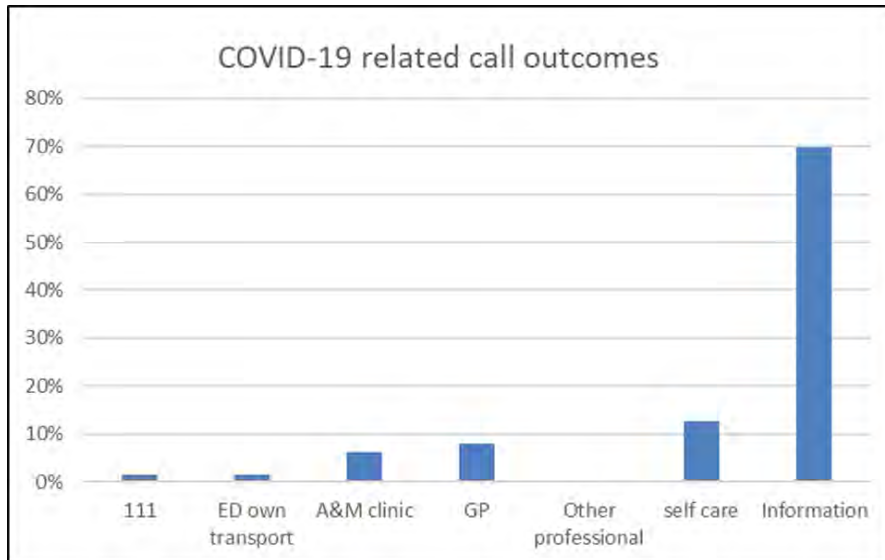
National Telehealth Service update

On 20 March in total circa 8,560 calls were answered / outbound calls made - the government helpline infrastructure responded to 3,059 of these - where a clinical discussion was needed there was either a clinical floor walker available to take over the call or a call back was made by a clinician. The increased level of call back means that whilst we had fewer calls answered yesterday we saw far more calls closed with a single contact rather than a call back. The graph below compares yesterday to the same day last year:



On 20 March the clinical trends we have seen mean that:

- 40% of callers were experiencing cold or flu-like symptoms
- 27% were regarding people who had been outside NZ in the previous 4 weeks
- 83% received self-care advice or information



Self-Isolation Counts

In terms of self-isolation overall as at 12 pm 21 March:

- **11,531** registered (people or households) and currently in isolation, inclusive of all online self-registrations to date and 2381 border records with us but not yet in consolidated register
- **8,845** have completed isolation
- Approximately 700 additional household members (in isolation or completed isolation)
- **21,076** total registrations
- Plus an additional 34,920 border arrivals to end 19/03 + estimate of a further 7,000 for 20/03 = **41,920** registrations that are not yet in the consolidated register
- **FULL TOTAL OF EXPECTED REGISTRATIONS TO END 20/3 = 62,996**

Isolation by location

Row Labels	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown	125	600	653	415	209	300	187	95	88	106	142	129	68	346	67	3530
Auckland	26	166	251	180	83	91	57	19	17	32	34	16	32	25	17	1046
Lower Hutt			5	1		1										7
Ashburton							5									5
Northland	3	13	15	8	8	4	1				1		3		1	57
Waitemata	31	171	195	125	50	64	31	20	26	14	12	17	16	38	20	830
Bay of Plenty	13	54	56	50	19	6	12	1			3		3	6	6	229
Counties Manukau	31	148	179	137	69	65	30	23	14	12	13	7	37	18	17	800
Waikato	11	42	68	51	21	22	7	6		5	12	8	2	5	1	261
Lakes	8	32	39	27	21	6	3	9	1	1			2	5	2	156
Hutt Valley	7	45	70	27	21	26	9	5	3	3	2			3		221
Southern	10	45	85	51	17	18	12	6	10	4	3	2	5	1	4	273
Nelson Marlborough	2	7	10	11	6	4	3	2				1	1	1	1	49
Canterbury	30	131	160	95	33	48	19	11	7	5	6	5	11	13	4	578
South Canterbury	4	8	17	5	2	3	3							1		43
Hawkes Bay	8	21	17	13	6	8	2						1	1	2	79
Capital and Coast	14	95	143	133	43	39	30	4	3	3	6	4	4	8	5	534
Taranaki	1	20	36	22	4	8	3		1	1		3		1	1	101
MidCentral	7	36	44	32	12	7	7		1		4	1	2	5	4	162
Tairāwhiti	1	8	38	10	1	4	1	4								67
Whanganui		2	4			2									2	10
West Coast						2										2
Wairarapa	1	2	1	1	1		1						1	2		10
Christchurch						10	8	1	1							20
Manukau						5	2		1							8
Wellington						3	3						1			7
North Shore						2	4	1	3	2						12
Papakura													1			1
New Plymouth						5	1		2							8
Rodney							3				1					4
Waitakere							1	2	1							4
Hamilton							5									5
Tasman							1									1
Upper Hutt							1									1
Palmerston North						1	1									2
Rotorua						2	1									3
Dunedin						9	2								1	12
Kapiti Coast							2									2
South Wairarapa							1									1
Waimate							1									1
Taupo							3									3
Tauranga						1										1
Whangarei								1								1
Selwyn						1										1
Invercargill						1										1
Southland						1										1
Grand Total	333	1646	2086	1394	626	769	463	210	179	188	239	193	190	479	155	9150

29. See the appendices for further information.

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment

1. **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains HIGH.
2. Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently MODERATE. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
3. **Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is HIGH, the likelihood of sustained transmission is MODERATE and the likelihood of widespread outbreaks is LOW This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
5. Public health impact: the impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of cases in New Zealand would be HIGH both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

7. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on

health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.

- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on 22 March 2020.**

Prepared by: Rebecca Drew and Martin Kennedy, NHCC Intelligence

Approved by: Gina the NHCC Response Manager



SITREP 63
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 22 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 22 March 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

New Zealand

1. The Prime Minister has announced a new covid-19 specific alert system. We are on Level 2: Reduce the disease is contained but risk is growing. Further information will be on the Ministry of Health website shortly.
2. As at 1:00pm on 22 March 2020: 67 confirmed cases, 4 probable cases and 8 suspect cases. 825 cases are under investigation. There are 14 new confirmed cases reported in the last 24 hours.
3. Additional border measures came into effect at 11:59 hours 19 March 2020. Only New Zealand residents and citizens (and their children and partners) will be permitted to enter New Zealand.

Global

4. An outbreak of novel coronavirus (COVID-19) originated in mainland China with the epicentre in Hubei Province. The Director-General of the World Health Organization (WHO) has stated that Europe has now become the epicentre of the pandemic. Overall, there have now been more cases reported outside of China. Over recent days reported case numbers have been increasing most rapidly in Italy, Spain, Iran, France and Germany.
5. As reported by the WHO on 21 March 2020, globally there has been an increase of 32,000 confirmed cases (266,073 confirmed cases in total) and 1,344 new deaths reported (11,184 confirmed deaths in total).
6. In the situation report of 17 March, the WHO note that the risk of infection remains low for people who are not in an area where COVID-19 is spreading, those who have not travelled from an area where COVID-19 is spreading, those who have not been in contact with an infected patient.

7. Data from the first patients in the USA indicates that fatality was highest in patients aged 85 and over (10% to 27%), followed by 3% to 11% among patients aged 65 to 84 years, 1% to 3% for those aged 55 to 64 and <1% for those aged 20 to 54 years. No ICU admissions or fatalities were recorded among persons 19 years and under.

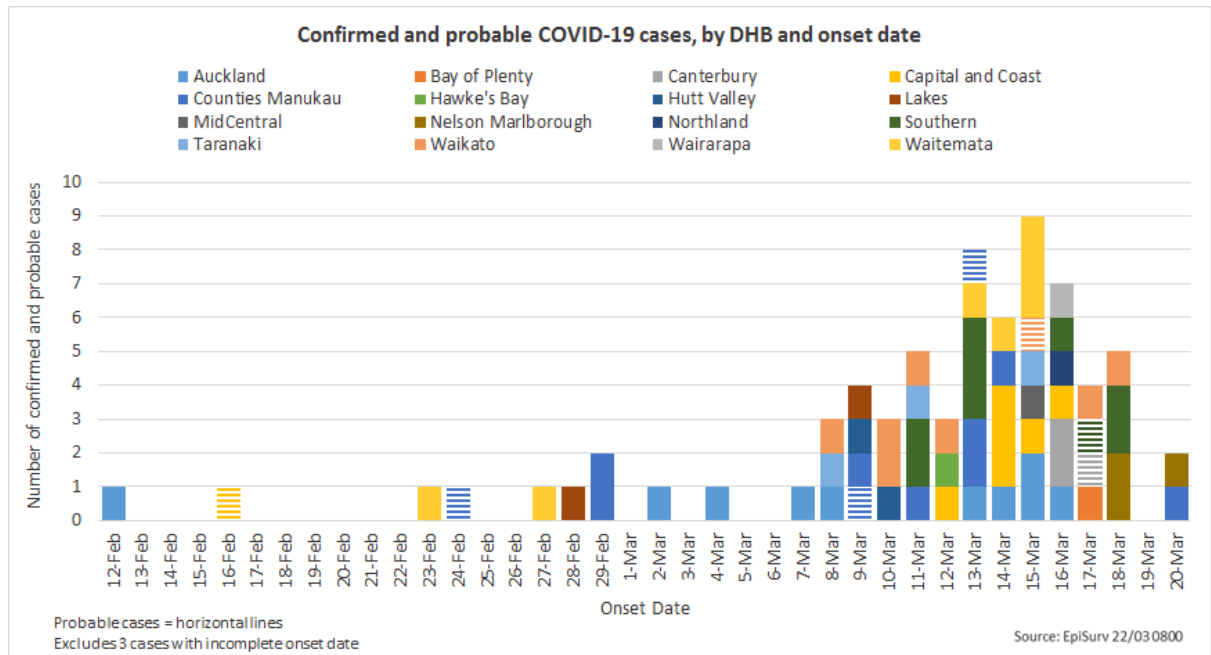
KEY MESSAGES

8. New Zealand is taking a Keep it Out, Stamp It Out and Slow It Down approach. **The Prime Minister announced a new covid-19 specific alert system. We are on Level 2: Reduce: the disease is contained but risk is growing.**
9. The WHO has declared COVID-19 a pandemic. The announcement formalises New Zealand's current approach to COVID-19. All our planning has been on the basis that COVID-19 was in the early stages of a pandemic.
10. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
11. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
12. We continue to regularly review border restrictions and advice around any changes required.
13. New Zealand is continuing to actively track and monitor COVID-19 in New Zealand.
14. Close contacts of any cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
15. New Zealand continues to improve its capacity to test for COVID-19. Our current test capacity is **1,664** per day and we expect that rise further over the next few days.
16. All of us have a role to play in stopping further spread. Fundamental to New Zealand's response is not putting yourself or others at risk. Everyone can help by ensuring good health etiquette — stay home if you're unwell, washing and drying your hands well, sneeze into your elbow, and not touching your face.
17. Healthline is experiencing high volumes of calls and continues to add resources and people to the team, to manage these.
18. A centralised contact tracing system has been stood up to assist Public Health Units to manage the increasing work at the regional level.

OUTBREAK SITUATION

New Zealand

19. As at 1.00pm on **22 March 2020: 67 confirmed cases, 4 probable cases and 8 suspect cases**. See the graph below for information by DHB:



Global

20. As reported by the WHO on 21 March 2020 (11.10am NZT), globally there have been 11,184 confirmed deaths and 266,073 confirmed cases across 183 countries, areas or territories. Based on the number of reported cases globally, the case fatality rate is approximately 4.2%. This information will be updated when it becomes available from the WHO.
21. As reported by the WHO on 21 March 2020, 6 new country/territory/area (African Region 2, European Region 1, Region of the Americas 1, South-East Asia Region 1 and Western Pacific Region 1) reported confirmed cases. See Figures 1 and 2 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

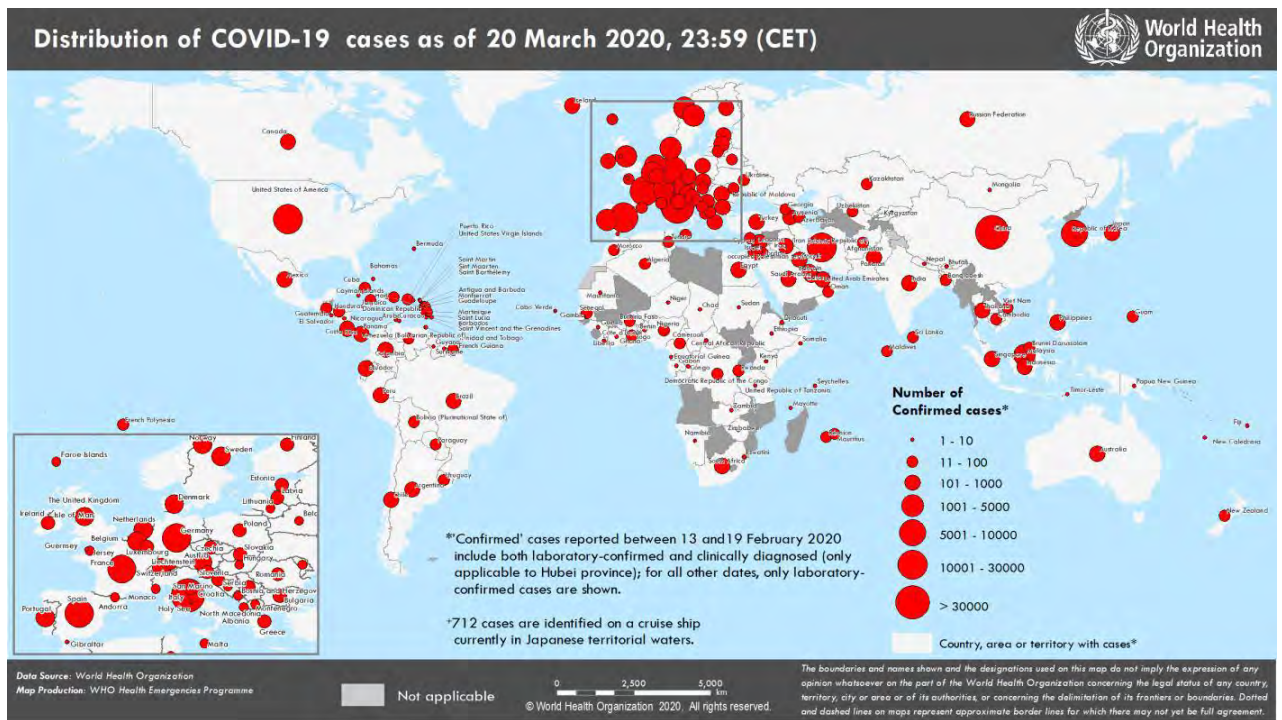
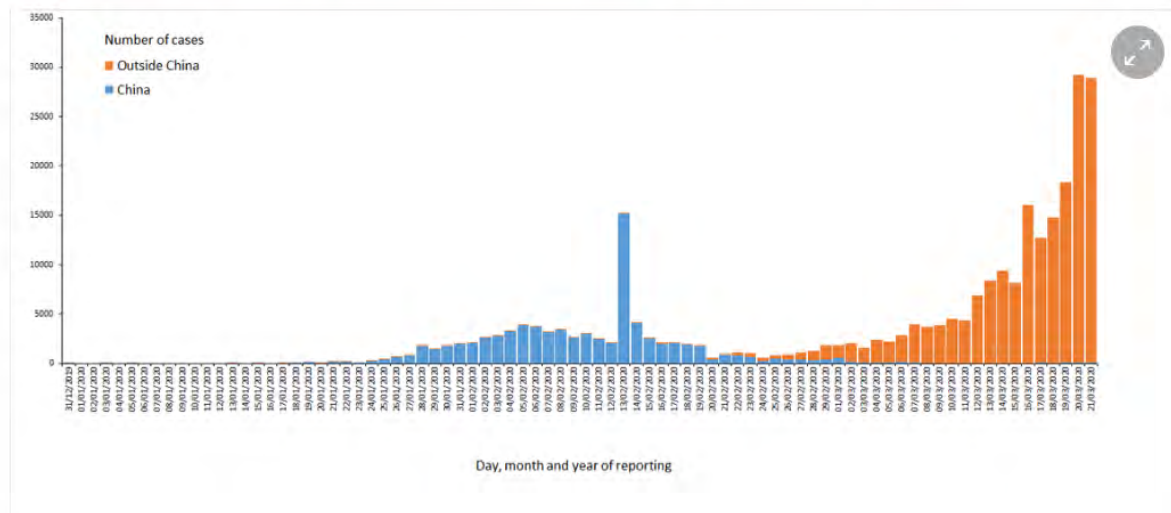


Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 19 March 2020

Figure 2: Global confirmed cases by date of report, as at 21 March 2020

Distribution of COVID-19 cases worldwide, as of 21 March 2020



WHOLE OF GOVERNMENT RESPONSE

New Zealand border response

22. Additional border measures came into effect at 11.59 hours 19 March 2020. Only New Zealand residents and citizens (and their children and partners) will be permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers, humanitarian reasons, and others. Everyone permitted to enter New Zealand is expected to self-isolate for 14 days from when they departed from the overseas country. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt. The measures will be reviewed by Monday 30 March 2020. **Border stakeholders have been advised of the update.**
23. There is a temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds. The maritime border measures do not apply to cargo ships or marine crew, to keep sea freight routes open for imports and exports, including essential supplies. Officials have been informed of COVID-19 cases on two cruise vessels recently in New Zealand waters and now in Australia. Work is underway to trace the New Zealanders on the vessels and to inform overseas countries of any nationals they had on the vessels.
24. Passengers from all international flights are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries. The new passenger arrival card came into effect at 03.00 am on Friday 20 March 2020. It includes questions about COVID-19, requires passengers to provide self-isolation information (including their address), and provides for stronger compliance if required.
25. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and

Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight.

New Zealand health sector response

26. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
27. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland, Waikato Hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. They accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
28. See Table 1 and figures 3 and 4 below for further information on (a) the number and location of confirmed cases in New Zealand, (b) laboratory capacity and (c) the number of people tested.

Table 1: confirmed and probable cases by DHB (30 Jan 2020 to 20 Mar 2020). Data source: EpiSurv as of 22 March 2020, 8.00 am.

(This table was produced a few hours before this sitrep being finalised).

Status			
DHB	Confirmed	Probable	Deaths
Northland	1	0	0
Waitemata	7	1	0
Auckland	9	4	0
Counties Manukau	7	3	0
Waikato	8	0	0
Lakes	2	0	0
Taranaki	3	1	0
Hawke's Bay	1	0	0
Hutt Valley	2	0	0
Capital and Coast*	6	0	0
Wairarapa	1	0	0
Nelson Marlborough	2	1	0
Canterbury	3	1	0
Southern	9	1	0
Total	61	12	0

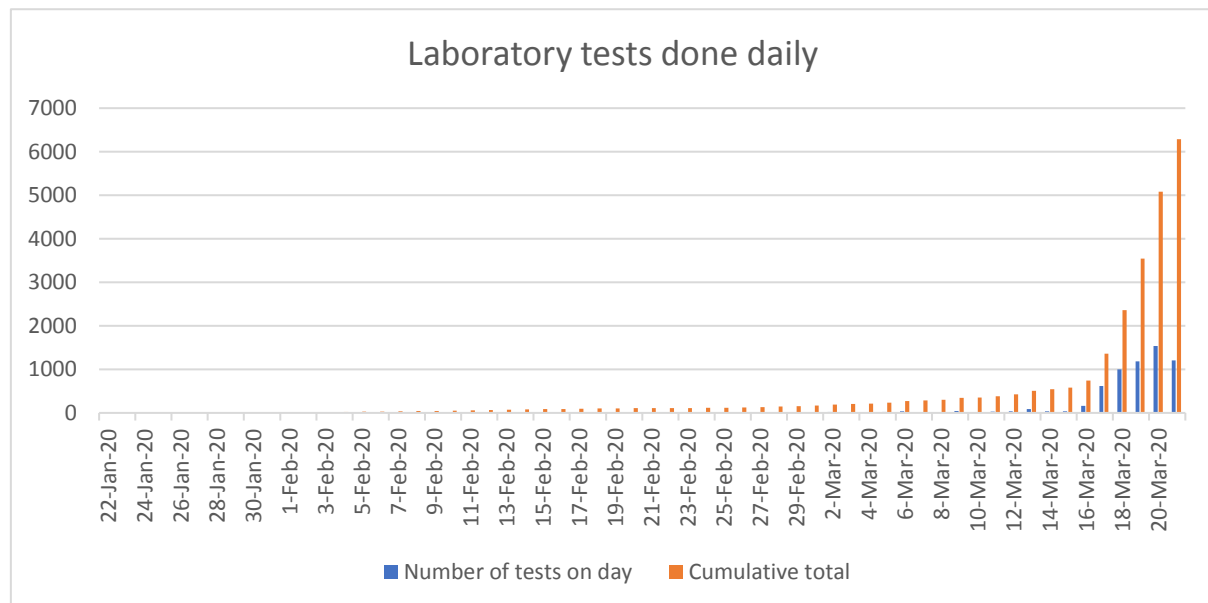
* including one case tested and confirmed in Australia

Figure 3: Daily capacity of labs to test for covid-19, as at 21 March 2020

Date	10-Mar-20	11-Mar-20	12-Mar-20	13-Mar-20	14-Mar-20	15-Mar-20	16-Mar-20	17-Mar-20	18-Mar-20	19-Mar-20	20-Mar-20	21-Mar-20	22-Mar-20
Capacity	434	434	434	672	772	772	772	1128	1128	1128	1128	1664	1857

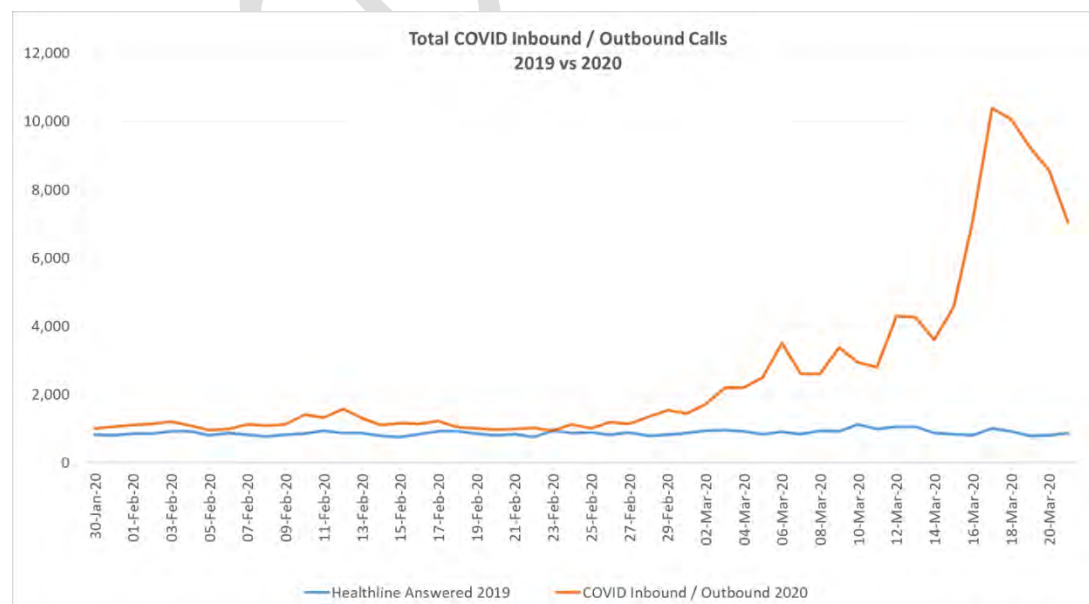
Figure 4: COVID-19 tests daily and cumulative totals, as at 21 March 2020

On 21 March 2020, 1,207 tests were done.



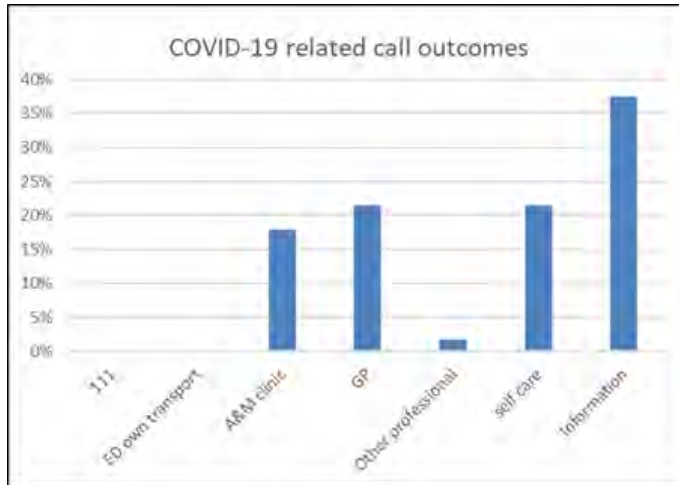
National Telehealth Service update

On 21 March in total circa 7,035 calls were answered / outbound calls made - the government helpline infrastructure responded to 2,144 of these - where a clinical discussion was needed there was either a clinical floor walker available to take over the call or a call back was made by a clinician. The increased level of call back means that whilst we had fewer calls answered yesterday we saw far more calls closed with a single contact rather than a call back. The graph below compares yesterday to the same day last year:



On 21 March the clinical trends we have seen mean that:

- **50%** of callers were experiencing cold or flu-like symptoms
- **30%** were regarding people who had been outside NZ in the previous 4 weeks
- **59%** received self-care advice or information



Self-Isolation Counts

In terms of self-isolation overall as at 12 pm 21 March:

- **15,805** registered (people or households) and currently in isolation, inclusive of all online self-registrations to date and **5,639** border records with us but not yet in consolidated register
- **9,003** have completed isolation
- Approximately 700 additional household members (in isolation or completed isolation)
- **25,508** total registrations
- Plus an additional 31,662 border arrivals to end 19/03 + estimate of a further 4,000 for 20 and 21/03 = **45,662** registrations that are not yet in the consolidated register
- FULL TOTAL OF EXPECTED REGISTRATIONS TO END 21/3 = **71,170**

Isolation by location

Row Labels	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown	50	351	646	694	382	196	360	192	109	93	109	142	132	75	349	3880
Auckland	16	92	194	246	155	86	97	55	22	18	36	37	16	35	25	1130
Lower Hutt				5	1		1	1								8
Ashburton								5								5
Northland	1	3	14	15	11	5	4	1				1		3		58
Waitemata	30	94	192	195	113	50	78	30	21	26	14	15	17	16	38	929
Bay of Plenty	8	34	70	51	40	21	12	13	2		1	4		3	6	265
Counties Manukau	18	86	170	177	125	61	85	23	25	14	12	13	8	37	18	872
Waikato	10	28	51	71	45	18	27	4	7		5	12	8	2	5	293
Lakes	5	15	38	38	25	18	6	3	9	1	1	1	1	2	5	168
Hutt Valley	6	31	48	76	21	21	31	10	6	5	5	2			3	265
Southern	7	31	58	79	49	14	27	9	6	11	4	3	2	5	2	307
Nelson Marlborough	2	11	8	12	9	6	5	3	2				1	1	1	61
Canterbury	11	111	137	177	75	33	54	15	11	7	6	6	5	11	13	672
South Canterbury	1	8	9	17	7	3	4	2	1						1	53
Hawkes Bay	8	15	24	19	12	4	12	4						1	1	100
Capital and Coast	12	58	106	159	107	50	41	47	6	6	6	6	5	5	8	622
Taranaki	1	12	20	43	15	3	10	4		1	1		3		1	114
MidCentral	1	16	39	44	29	13	9	6	1	3		4	1	2	5	173
Tairāwhiti		1	42	4	10		4	6	4	1						72
Whanganui			6				2									8
West Coast							2									2
Wairarapa		1	2	1	1	1	1							1	2	10
Christchurch							10	8	1	1						20
Manukau							5	2		1						8
Wellington							3	3						1		7
North Shore							2	4	1	3	2					12
Papakura														1		1
New Plymouth							5	1		2						8
Rodney								3				1				4
Waitakere								1	2	1						4
Hamilton								5								5
Tasman								1								1
Upper Hutt								1								1
Palmerston North							1	1								2
Rotorua							2	1								3
Dunedin							9	2								11
Kapiti Coast								2								2
South Wairarapa								1								1
Waimate								1								1
Taupo								3								3
Tauranga							1									1
Whangarei									1							1
Selwyn							1									1
Invercargill							1									1
Southland							1									1
Grand Total	187	998	1874	2123	1232	603	913	473	237	194	202	247	199	201	483	10166

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment

1. **Importation risk:** Even with the containment measures in place and the border measures currently in place for arrivals from Category one countries, the likelihood of cases being imported into New Zealand from these countries remains HIGH.
2. Given the daily increase in countries reporting cases and the number of countries reporting local transmission, our geographic accessibility and taking into account the varied public health capacity amongst other countries, the likelihood of one or more cases being imported to New Zealand from other countries is currently MODERATE. However, if transmission continues to increase outside of China, the importation risk for New Zealand will need to be reassessed again.
3. **Risk of transmission within New Zealand:** Based on the current situation outside of China and on the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is HIGH, the likelihood of sustained transmission is MODERATE and the likelihood of widespread outbreaks is LOW This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
5. Public health impact: the impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of cases in New Zealand would be HIGH both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

7. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level.**
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on

health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.

- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

IN CONFIDENCE

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on 23 March 2020.**

Prepared by: Rebecca Drew and Martin Anderson, NHCC Intelligence

Approved by: Gina Anderson-Lister, NHCC Response Manager



SITREP 64
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 23 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 23 March 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

New Zealand

1. The Prime Minister has announced a new covid-19 specific alert system. We are on Level 2: Reduce the disease is contained but risk is growing. Further information will be on the Ministry of Health website shortly.
2. As at 1:00pm on 23 March 2020: 102 confirmed cases, 10 probable cases and 10 suspect cases. There are 36 new confirmed cases reported in the last 24 hours.
3. Additional border measures came into effect at 11:59 hours 19 March 2020. Only New Zealand residents and citizens (and their children and partners) will be permitted to enter New Zealand.

Global

4. An outbreak of novel coronavirus (COVID-19) originated in mainland China with the epicentre in Hubei Province. The Director-General of the World Health Organization (WHO) has stated that Europe has now become the epicentre of the pandemic. Overall, there have now been more cases reported outside of China. Over recent days reported case numbers have been increasing most rapidly in Italy, Spain, Iran, France and Germany.
5. As reported by the WHO on 22 March 2020, globally there has been an increase of 26,069 confirmed cases (292,142 confirmed cases in total) and 1,600 new deaths reported (12,784 confirmed deaths in total).
6. In the situation report of 17 March, the WHO note that the risk of infection remains low for people who are not in an area where COVID-19 is spreading, those who have not travelled from an area where COVID-19 is spreading, those who have not been in contact with an infected patient.

7. Data from the first patients in the USA indicates that fatality was highest in patients aged 85 and over (10% to 27%), followed by 3% to 11% among patients aged 65 to 84 years, 1% to 3% for those aged 55 to 64 and <1% for those aged 20 to 54 years. No ICU admissions or fatalities were recorded among persons 19 years and under.

KEY MESSAGES

8. New Zealand is taking a Keep it Out, Stamp It Out and Slow It Down approach. The Prime Minister announced a new covid-19 specific alert system. We are on "Level 2: Reduce." At this level, the disease is contained but risk is growing.
9. The WHO has declared COVID-19 a pandemic. The announcement formalises New Zealand's current approach to COVID-19. All our planning has been on the basis that COVID-19 was in the early stages of a pandemic.
10. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
11. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
12. We continue to regularly review border restrictions and advice around any changes required.
13. New Zealand is continuing to actively track and monitor COVID-19 in New Zealand.
14. Close contacts of any cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
15. New Zealand continues to increase its capacity to test for COVID-19. Our current test capacity is 1,857 per day and we expect this will rise further over the next few days.
16. All of us have a role to play in stopping further spread. Fundamental to New Zealand's response is not putting yourself or others at risk. Everyone can help by ensuring good health etiquette — stay home if you're unwell, washing and drying your hands well, sneeze into your elbow, and not touching your face.
17. Healthline is experiencing high volumes of calls and continues to add resources and people to the team, to manage these.
18. A centralised contact tracing system has been stood up to assist Public Health Units to manage the increasing work at the regional level.

OUTBREAK SITUATION

New Zealand

19. As at 1.00pm on **23 March 2020: 102 confirmed cases, 10 probable cases and 10 suspect cases**. See Table 1, below paragraph 29, for details about the location of confirmed cases.

Global

20. As reported by the WHO on 22 March 2020 (11.10am NZT), globally there have been 12,784 confirmed deaths and 292,142 confirmed cases across 186 countries, areas or territories. Based on the number of reported cases globally, the case fatality rate is approximately 4.4%.
21. As reported by the WHO on 22 March 2020, 4 new countries/territories/areas from the African Region have reported confirmed cases. See Figures 1 and 2 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 22 March 2020

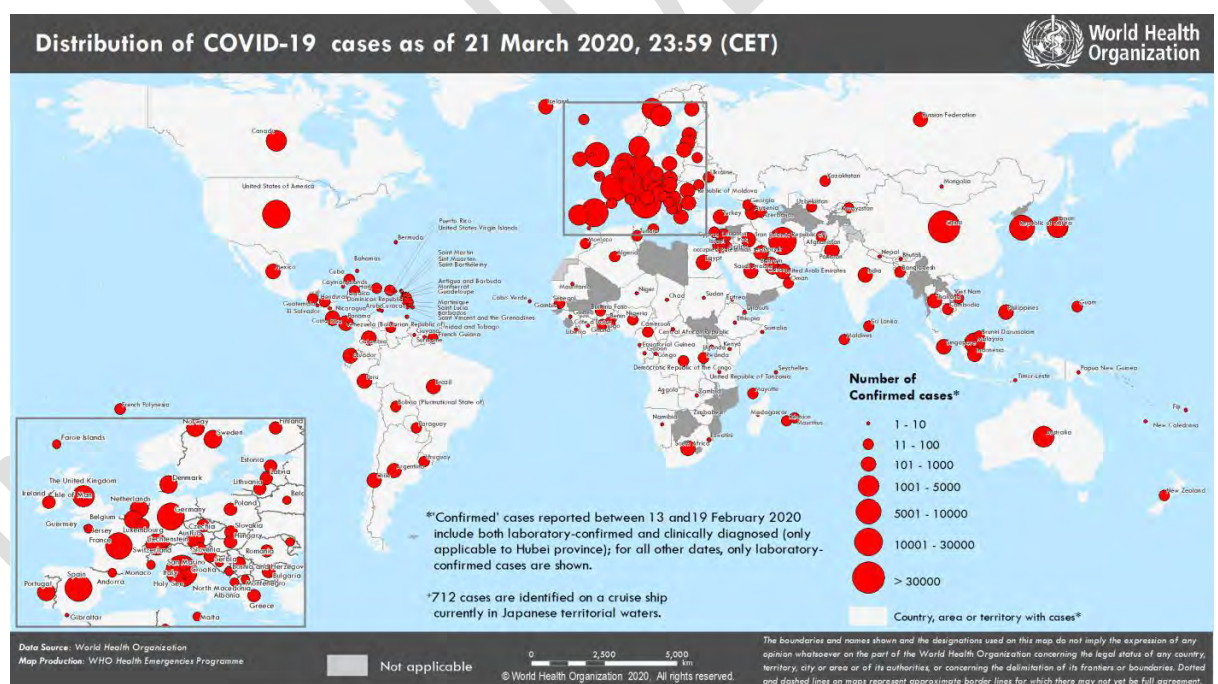
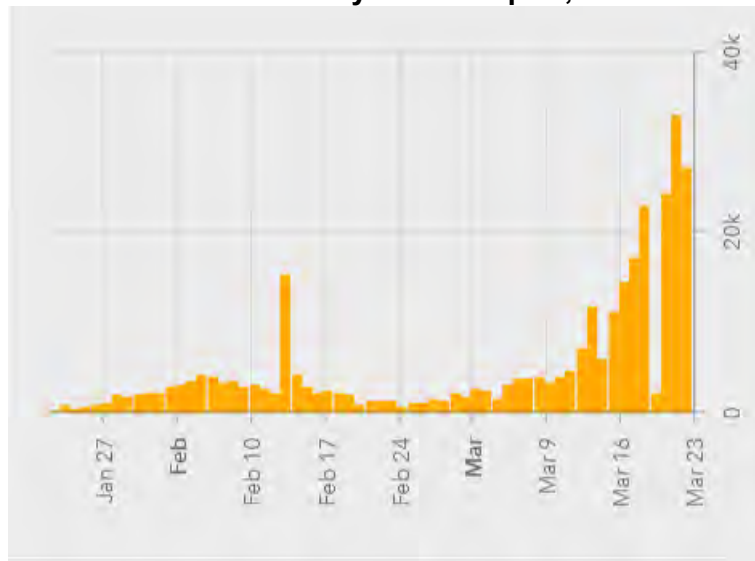


Figure 2: Global confirmed cases by date of report, as at 22 March 2020



WHOLE OF GOVERNMENT RESPONSE

New Zealand border response

22. Additional border measures came into effect at 11.59 hours 19 March 2020. Only New Zealand residents and citizens (and their children and partners) will be permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers, humanitarian reasons, and others. Everyone permitted to enter New Zealand is expected to self-isolate for 14 days from when they departed from the overseas country. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt. The measures will be reviewed by Monday 30 March 2020. Border stakeholders have been advised of the update.
23. There is a temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds. The maritime border measures do not apply to cargo ships or marine crew, to keep sea freight routes open for imports and exports, including essential supplies. Officials have been informed of COVID-19 cases on two cruise vessels recently in New Zealand waters and now in Australia. Work continues to trace the New Zealanders on the vessels and to inform overseas countries of any nationals they had on the vessels.
24. Passengers from all international flights are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries. The new passenger arrival card came into effect at 03.00 am on Friday 20 March 2020. It includes questions about COVID-19, requires passengers to provide self-isolation information (including their address), and provides for stronger compliance if required.
25. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked

about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight.

26. Ministers with Powers to Act have approved two “transit windows” to assist repatriation of foreign nationals. Third country nationals flying to their home country will be able to transit in Auckland International Airport. Both windows will commence at 10:00am Monday 23 March. The initial window will allow for transit via Australia until the end of their transit window at 1500 Tuesday 24 March (NZT). The second will allow certain categories of travellers to transit New Zealand of up to one week (ie up to and including Sunday 29 March). Health screening for transit passengers is being undertaken. Health staff will work closely with MFAT and Immigration officials to implement the screening of these passengers.

New Zealand health sector response

27. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
28. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland, Waikato Hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. **HealthScope in Auckland is likely to begin testing within a few days.** The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
29. See Table 1 and figures 3 and 4 below for further information on (a) the number and location of confirmed cases in New Zealand, (b) laboratory capacity and (c) the number of people tested.

Table 1: Confirmed and probable cases by DHB (30 Jan 2020 to 20 Mar 2020). Data source: EpiSurv as of 23 March 2020, 8.00 am.

(This table was produced a few hours before this sitrep being finalised).

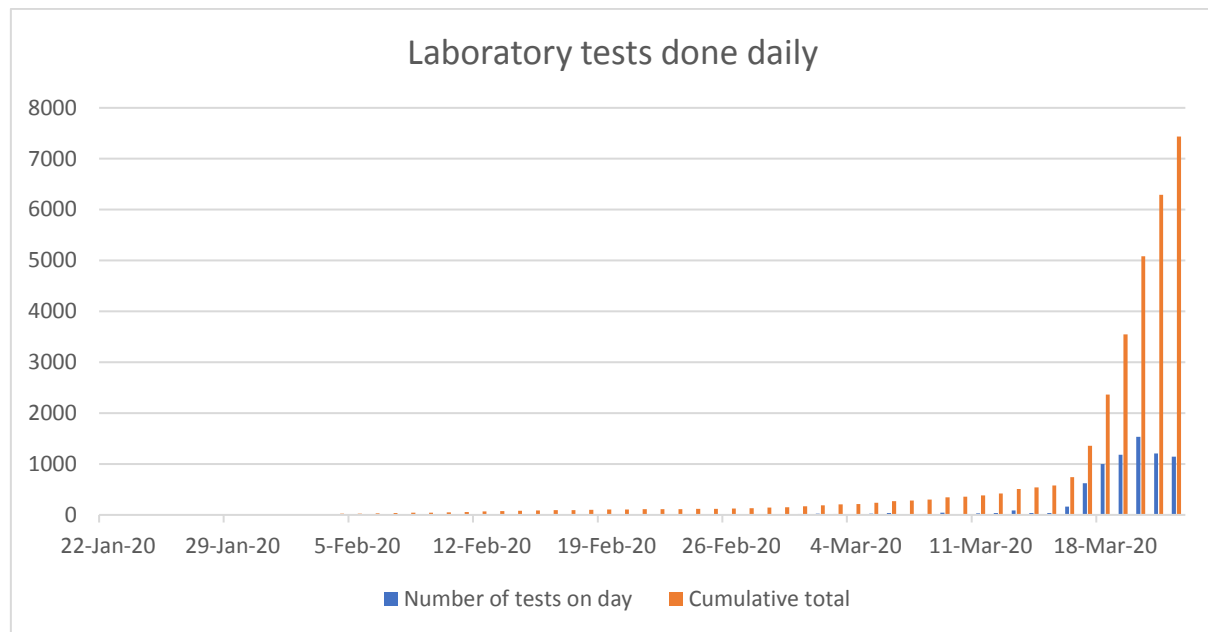
	Status		
DHB	Confirmed	Probable	Deaths
Northland	2		0
Waitemata	11	1	0
Auckland	16	2	0
Counties Manukau	14	2	0
Waikato	9	2	0
Lakes	2		0
Bay of Plenty	1		
Taranaki	4		0
Hawke's Bay	1		0
MidCentral	2		
Hutt Valley	3		0
Capital and Coast*	12		0
Wairarapa	3		0
Nelson Marlborough	4	2	0
Canterbury	9		0
Southern	9	1	0
Total	102	10	0

* including one case tested and confirmed in Australia

Figure 3: Daily capacity of labs to test for covid-19, as at 23 March 2020

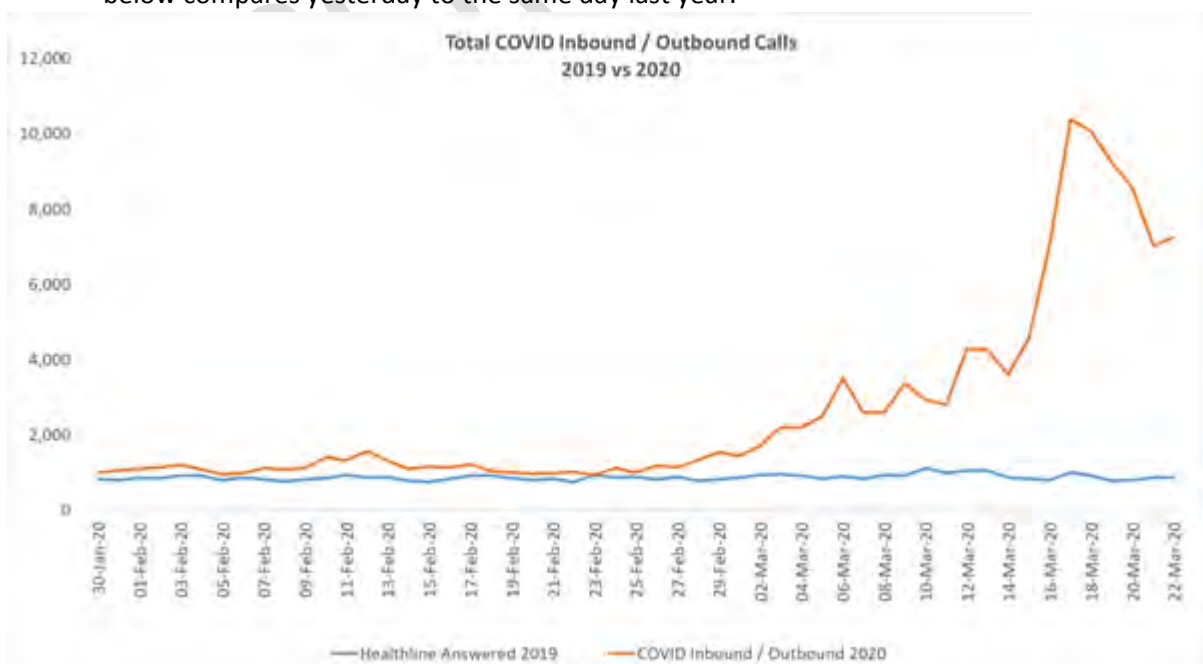
Date	10 Mar-20	11 Mar-20	12 Mar-20	13 Mar-20	14 Mar-20	15 Mar-20	16 Mar-20	17 Mar-20	18 Mar-20	19 Mar-20	20 Mar-20	21 Mar-20	22 Mar-20	23 Mar-20
Capacity	434	434	434	672	772	772	772	1128	1128	1128	1128	1664	1857	1857

Figure 4: COVID-19 tests daily and cumulative totals, as at 22 March 2020



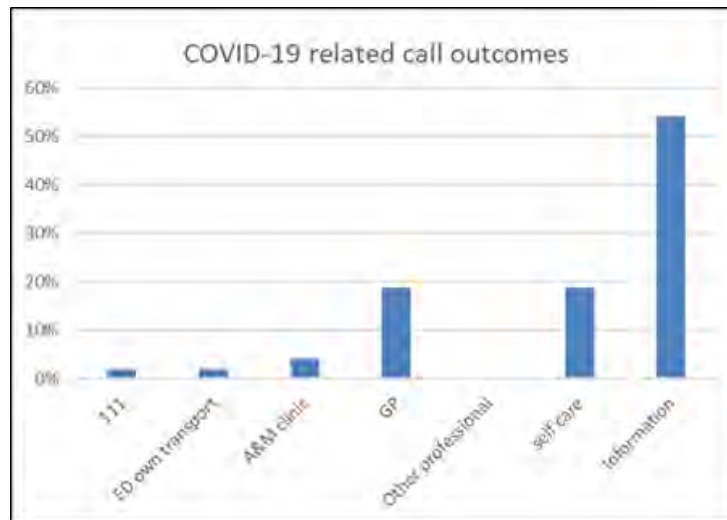
National Telehealth Service update

30. On 22 March in total circa 7,252 calls were answered / outbound calls made - the government helpline infrastructure responded to 1,914 of these - where a clinical discussion was needed there was either a clinical floor walker available to take over the call or a call back was made by a clinician. In the last 3 days the clinical call lengths have increased by two minutes, indicating increased complexity in the discussions. The graph below compares yesterday to the same day last year:



31. On 22 March the clinical trends we have seen mean that:

- **48%** of callers were experiencing cold or flu-like symptoms
- **13%** were regarding people who had been outside NZ in the previous 4 weeks
- **73%** received self-care advice or information



Self-Isolation Counts

32. In terms of self-isolation overall as at 12 pm 23 March:

- **20,986** registered (people or households) and currently in isolation, inclusive of all online self-registrations to date and **3,368** border records with us but not yet in consolidated register
- **9,568** have completed isolation
- Approximately 700 additional household members (in isolation or completed isolation)
- **31,254** total registrations
- Plus an additional 35,061 border arrivals (for 16 to 19 March 2020 and 21 March 2020) + estimate of a further 14,000 (for 20 and 22 March 2020) = **49,061** registrations that are not yet in the consolidated register
- FULL TOTAL OF EXPECTED REGISTRATIONS TO END **22 March 2020** = **80,315**

Isolation by location

Row Labels	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown	77	231	290	643	1037	3132	3048	547	364	235	186	192	208	188	130	10508
Auckland	20	91	50	99	144	115	114	148	96	85	54	58	56	33	58	1221
Lower Hutt						1		1	1					5		8
Ashburton									5							5
Northland	5	5	5	8	7	8	8	12	2		1	2	1		7	71
Waitemata	24	60	72	105	129	91	59	142	68	59	52	53	34	36	29	1013
Bay of Plenty	11	42	22	42	46	38	28	36	23	15	5	5	10	3	6	332
Counties Manukau	24	77	76	107	110	132	87	123	64	66	31	23	22	17	46	1005
Waikato	10	19	23	35	43	32	17	44	14	18	7	11	17	16	11	317
Lakes	5	14	12	26	26	22	18	19	20	16	1	2	1	11	3	196
Hutt Valley	10	19	32	33	44	23	25	47	20	16	12	12	8	2	6	309
Southern	3	24	24	41	38	40	15	53	29	16	16	18	7	9	10	343
Nelson Marlborough	2	11	10	5	4	9	8	9	6	5		2	2	4	4	81
Canterbury	36	64	70	114	97	65	58	113	49	48	28	22	16	15	21	816
South Canterbury	2	3	7	11	11	6	3	9	3	3		2	1		2	63
Hawkes Bay	2	13	6	11	15	9	9	18	4	3	3	3	6	5	1	108
Capital and Coast	20	40	60	63	87	81	60	92	84	33	17	14	18	18	22	709
Taranaki	2	10	14	12	27	11	5	13	16	2	2	2	4	8	2	130
MidCentral	5	12	10	21	23	23	14	23	24	10	6	2	9	3	4	189
Tairāwhiti		1	1	35	4	8	5	4	7	6	2	1				74
Whanganui		2		4				2	2							10
West Coast										2						2
Wairarapa	1				1	3	1		2						1	9
Christchurch								10	8	1	1					20
Manukau								5	2		1					8
Wellington								3	3						1	7
North Shore								2	4	1	3	2				12
Papakura															1	1
New Plymouth								5	1		2					8
Rodney									3				1			4
Waitakere									1	2	1					4
Hamilton									5							5
Tasman									1							1
Upper Hutt									1							1
Palmerston North								1	1							2
Rotorua								2	1							3
Dunedin								9	2							11
Kapiti Coast									2							2
South Wairarapa									1							1
Waimate									1							1
Taupo									3							3
Tauranga								1								1
Whangarei										1						1
Selwyn								1								1
Invercargill								1								1
Southland								1								1
Grand Total	259	738	784	1415	1893	3849	3582	1496	943	643	431	426	421	373	365	17618

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is: **very high in mainland China; very high at the regional level; very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on

health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.

- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on 24 March 2020.**

Prepared by: Li-Chia Yeh, NHCC Intelligence

Approved by: Bruce McKay, NHCC Response Manager



SITREP 65
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 24 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 24 March 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

New Zealand

1. The Prime Minister has announced a new covid-19 specific alert system. We are on **Level 3: Restrict**. See more information about alerts here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. As at 1300 hours on **24 March 2020: 155 combined confirmed and probable cases**. There are **43 combined new confirmed and probable cases** reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. **As at 1300 hours on 24 March 2020 there are 12 confirmed recovered cases.**
4. Additional border measures came into effect at 1159hrs 19 March 2020. Only New Zealand residents and citizens (and their children and partners) will be permitted to enter New Zealand.

Global

5. An outbreak of novel coronavirus (COVID-19) originated in mainland China with the epicentre in Hubei Province. The Director-General of the World Health Organization (WHO) has stated that Europe has now become the epicentre of the pandemic. Overall, there have now been more cases reported outside of China. Over recent days reported case numbers have been increasing most rapidly in Italy, Spain, Iran, France and Germany.
6. As reported by the **WHO on 23 March 2020, globally there has been an increase of 40,788 confirmed cases (332,930 confirmed cases in total) and 1,727 new deaths reported (14,510 confirmed deaths in total).**

7. In the situation report of 17 March, the WHO note that the risk of infection remains low for people who are not in an area where COVID-19 is spreading, those who have not travelled from an area where COVID-19 is spreading, and those who have not been in contact with an infected patient.
8. Data from the first patients in the USA indicates that fatality was highest in patients aged 85 and over (10% to 27%), followed by 3% to 11% among patients aged 65 to 84 years, 1% to 3% for those aged 55 to 64 and <1% for those aged 20 to 54 years. No ICU admissions or fatalities were recorded among persons 19 years and under.

KEY MESSAGES

9. New Zealand is taking a Keep it Out, Stamp It Out and Slow It Down approach. The Prime Minister announced a new covid-19 specific alert system. We are on "Level 3: Restrict." At this level, there is heightened risk that the disease is not contained. New Zealand will move to Level 4: Eliminate at 2359hrs on 25 March 2020.
10. The WHO has declared COVID-19 a pandemic. The announcement formalises New Zealand's current approach to COVID-19. All our planning has been on the basis that COVID-19 was in the early stages of a pandemic.
11. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
12. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
13. We continue to regularly review border restrictions and advice around any changes required.
14. New Zealand is continuing to actively track and monitor COVID-19 in New Zealand.
15. Close contacts of any cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
16. New Zealand continues to increase its capacity to test for COVID-19. Our current test capacity is 1,883 per day and we expect this will rise further over the next few days.
17. All of us have a role to play in stopping further spread. Fundamental to New Zealand's response is not putting yourself or others at risk. Everyone can help by ensuring good health etiquette - stay home if you're unwell, washing and drying your hands well, sneeze into your elbow, and not touching your face.
18. Healthline is experiencing high volumes of calls and continues to add resources and people to the team, to manage these.
19. A centralised contact tracing system has been stood up to assist Public Health Units to manage the increasing work at the regional level.

OUTBREAK SITUATION

New Zealand

20. As at 1300 hours on 24 March 2020: 155 combined confirmed and probable cases. There are 43 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
21. As at 1300 hours on 24 March 2020 there are 12 confirmed recovered cases.

Global

22. As reported by the WHO on 23 March 2020 (11.10am NZT), globally there have been 14,510 confirmed deaths and 332,930 confirmed cases across 190 countries, areas or territories. Based on the number of reported cases globally, the case fatality rate is approximately 4.4%.
23. As reported by the WHO on 23 March 2020, 3 new countries/territories/areas from the African Region [1], Region of the Americas [1], and Eastern Mediterranean Region [1] have reported confirmed cases. See Figures 1 and 2 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 23 March 2020

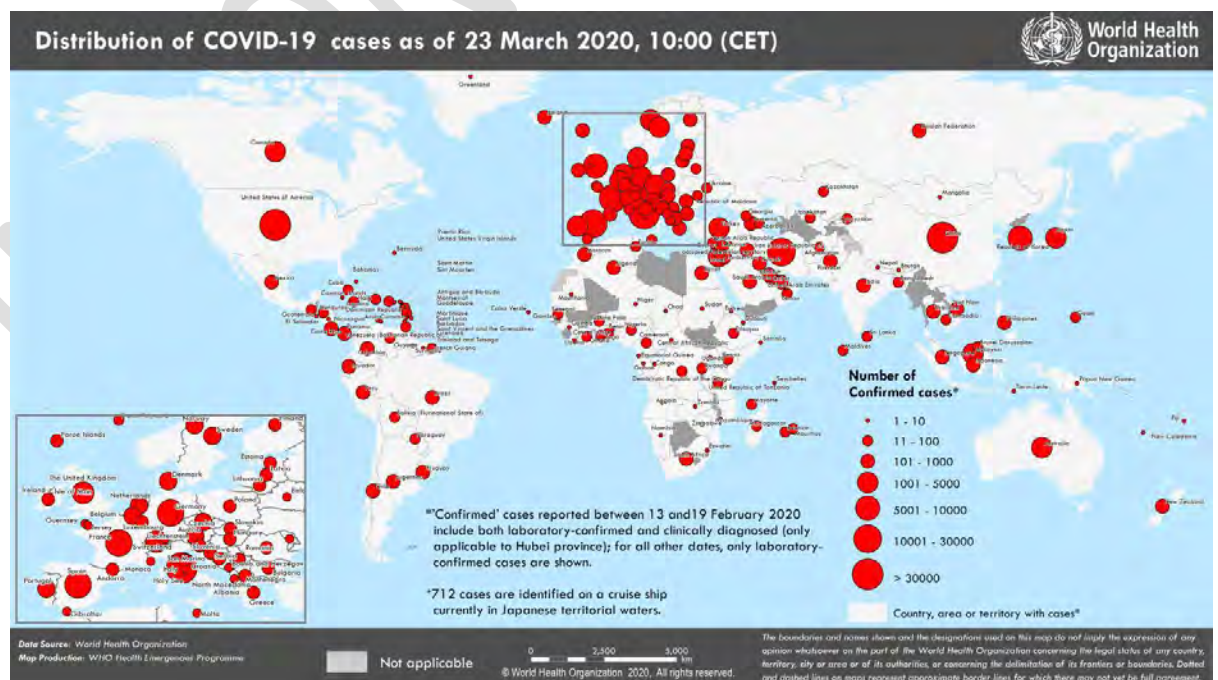
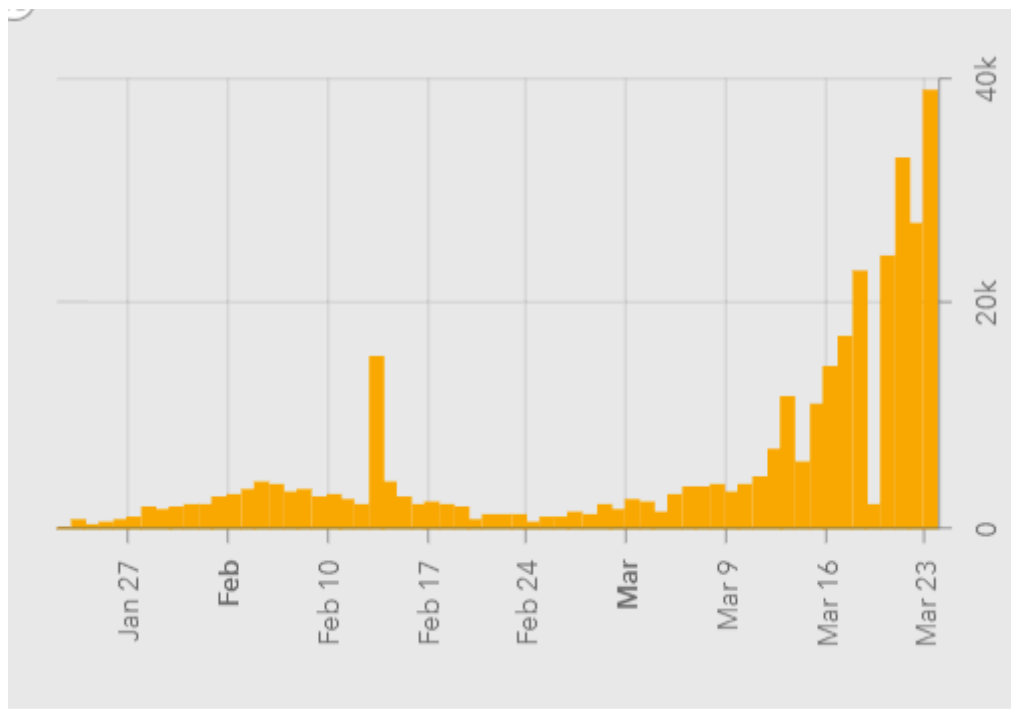


Figure 2: Global confirmed cases by date of report, as at 23 March 2020



WHOLE OF GOVERNMENT RESPONSE

New Zealand border response

24. Additional border measures came into effect at 11.59 hours 19 March 2020. Only New Zealand residents and citizens (and their children and partners) will be permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers, humanitarian reasons, and others. Everyone permitted to enter New Zealand is expected to self-isolate for 14 days from when they departed from the overseas country. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt. The measures will be reviewed by Monday 30 March 2020. Border stakeholders have been advised of the update.
25. There is a temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds. The maritime border measures do not apply to cargo ships or marine crew, to keep sea freight routes open for imports and exports, including essential supplies. Officials have been informed of COVID-19 cases on two cruise vessels recently in New Zealand waters and now in Australia. Work continues to trace the New Zealanders on the vessels and to inform overseas countries of any nationals they had on the vessels.
26. Passengers from all international flights are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries. The new passenger arrival card came into

effect at 03.00 am on Friday 20 March 2020. It includes questions about COVID-19, requires passengers to provide self-isolation information (including their address), and provides for stronger compliance if required.

27. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight.
28. Ministers with Powers to Act approved two transit windows to assist repatriation of foreign nationals. Third country nationals flying to their home country will be able to transit in Auckland International Airport. Both windows will commence at 1000hrs Monday 23 March. The initial window will allow for transit via Australia until the end of their transit window at 1500hrs Tuesday 24 March (NZT). The second will allow certain categories of travellers to transit New Zealand for up to one week (i.e. up to and including Sunday 29 March). Health screening for transit passengers is in place. Health staff will work closely with MFAT and Immigration officials to implement the screening of these passengers.
29. The COVID-19 Interagency Self-Isolation and Quarantine Workstream is in the process of establishing a number of quarantine facilities within Auckland, Wellington and Christchurch. The facility in Auckland is closest to standing up and will be primarily in place to support the potential for unwell passengers that are transiting from the Pacific Islands through Auckland International Airport to another international destination. This facility will be in place to provide accommodation to any passengers that undergo exit health screening as they depart Auckland and are deemed too unwell to fly or are demonstrating symptoms of COVID-19. The criteria for entry into other facilities is still in the development phase.

New Zealand health sector response

30. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
31. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland, Waikato Hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. HealthScope in Auckland is likely to begin testing within a few days. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
32. See figures 3 and 4 below for further information on (a) the number and location of confirmed cases in New Zealand, (b) laboratory capacity and (c) the number of people tested.

Table 1: Confirmed and probable cases by DHB (Data source: EpiSurv as of 24 March 2020, 0800hrs.)

(This table was produced a few hours before this sitrep was finalised).

DHB	Status		
	Confirmed	Probable	Deaths
Northland	2	0	0
Waitemata	15	1	0
Auckland	24	2	0
Counties Manukau	17	2	0
Waikato	11	2	0
Lakes	2	0	0
Bay of Plenty	1	0	0
Taranaki	4	0	0
Hawke's Bay	1	0	0
MidCentral	3	0	0
Hutt Valley	3	1	0
Capital and Coast*	11	3	0
Wairarapa	3	0	0
Nelson Marlborough	10	0	0
Canterbury	8	1	0
Southern	11	1	0
Total	126	13	0

* including one case tested and confirmed in Australia

Figure 3: Daily capacity of labs to test for covid-19, as at 24 March 2020

On 24 March 2020 the capacity is 1883 tests per day.

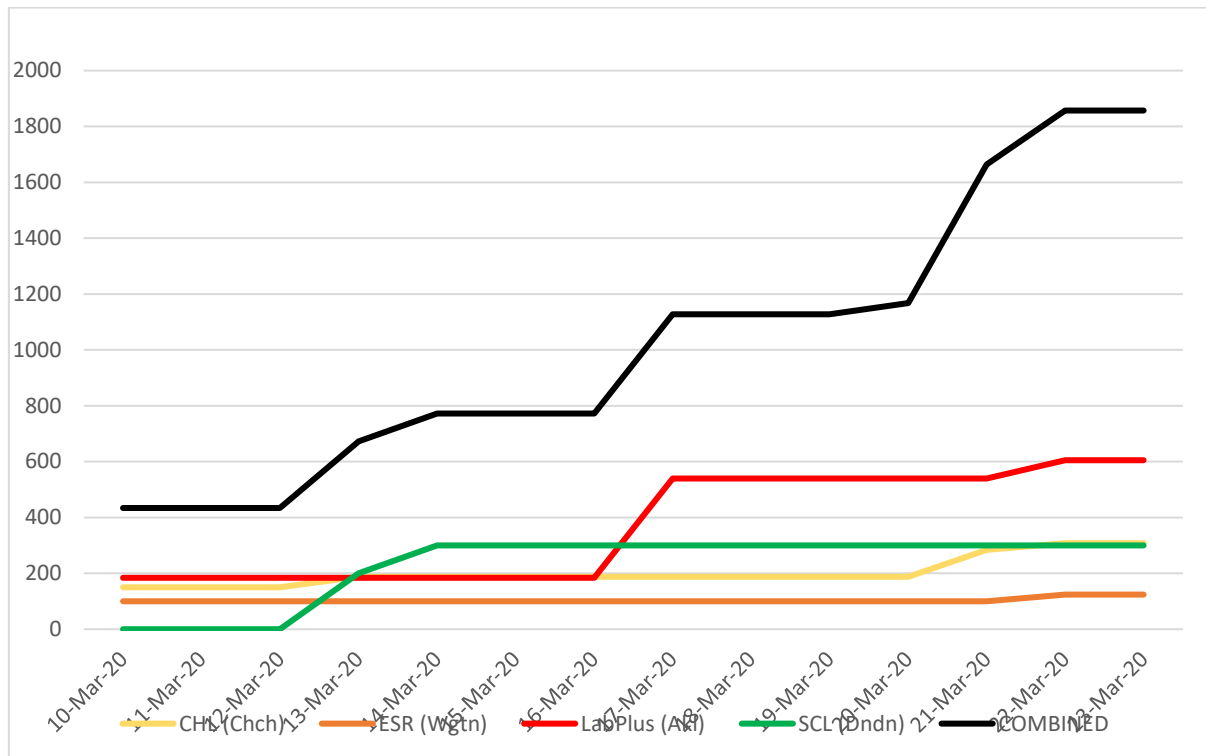
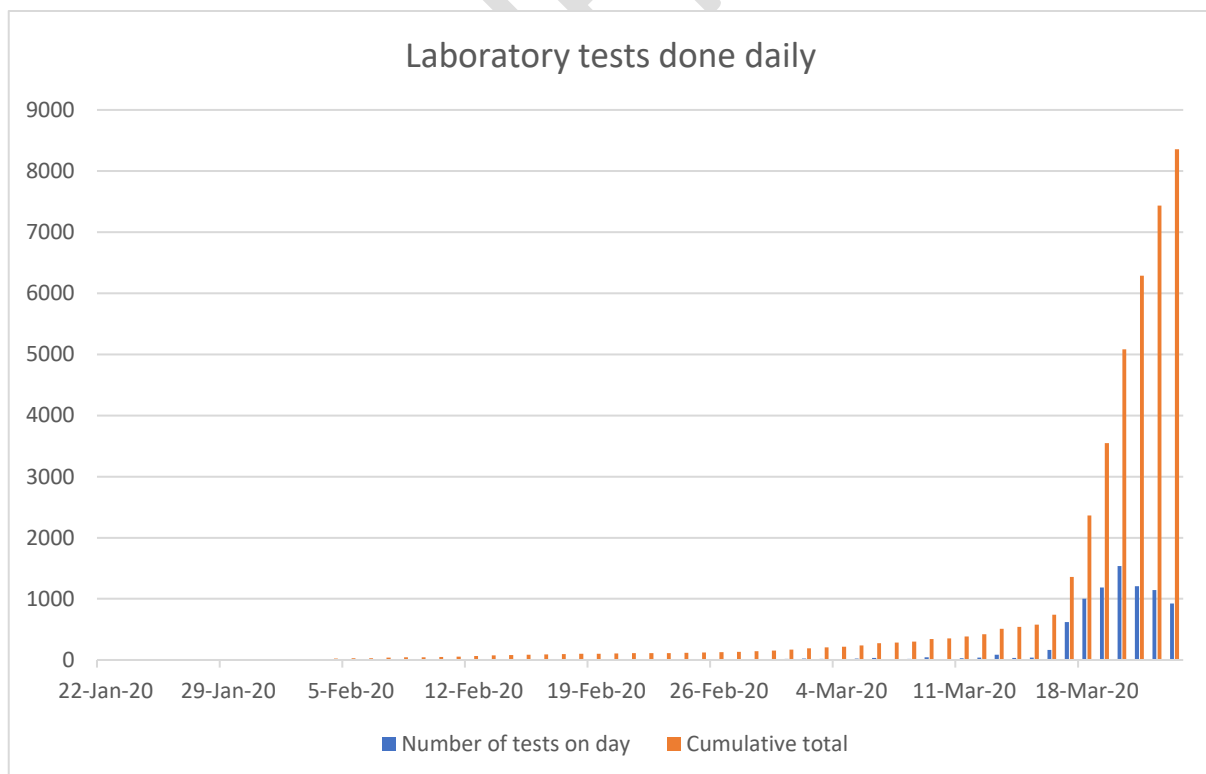


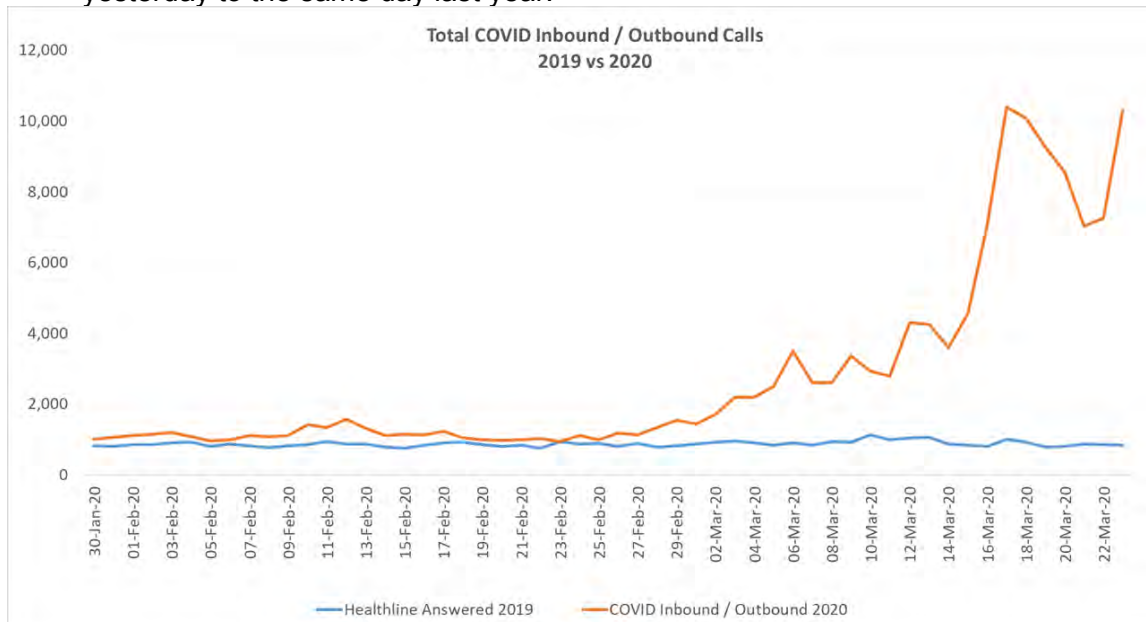
Figure 4: COVID-19 tests daily and cumulative totals, as at 23 March 2020

On 23 March 2020, 926 tests were done.



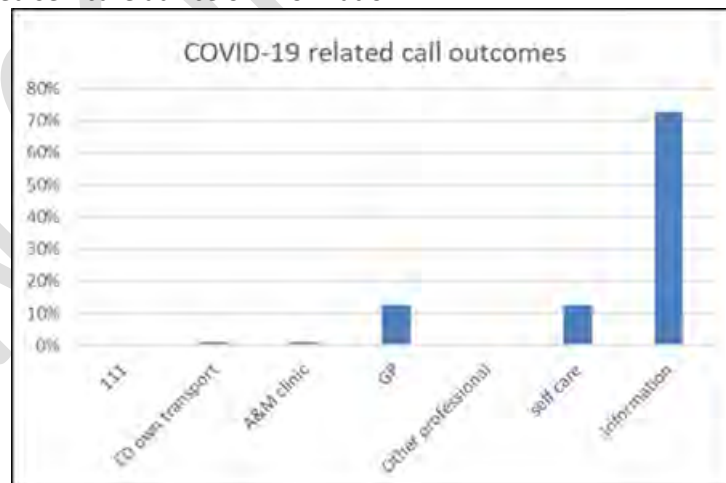
National Telehealth Service update

33. On **23 March 2020** in total circa **10,305** calls were answered / outbound calls made – the government helpline infrastructure handled 2,036 of these – 20% needed clinical advice. In the last day the clinical call lengths have increased by one minute, indicating increased complexity in the discussions. The graph below compares yesterday to the same day last year:



34. On **23 March 2020** the clinical trends we have seen mean that:

- **47%** of callers were experiencing cold or flu-like symptoms
- **24%** were regarding people who had been outside NZ in the previous 4 weeks
- **85%** received self-care advice or information



Self-Isolation Counts

35. In terms of self-isolation overall as at 1200hrs **23 March 2020**:
- **26,998** registered (people or households) and currently in isolation, inclusive of all online self-registrations to date and **3,368** border records with us but not yet in consolidated register
 - **9,956** have completed isolation
 - Approximately 700 additional household members (in isolation or completed isolation)

- **36,954** total registrations including 6,400 new registrations on 23 March 2020.
- Plus an additional 43,359 border arrivals (for 16 to 21 March, 23 March 2020) + estimate of a further 7,000 (for 22 March 2020) = **52,359** registrations that are not yet in the consolidated register
- FULL TOTAL OF EXPECTED REGISTRATIONS TO END **23 March 2020 = 89,313**

Isolation by location

Row Labels	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	Grand Total
Unknown	64	385	425	362	768	1747	5076	4153	570	416	267	199	202	217	196	15047
Auckland	24	89	127	67	98	158	125	128	161	104	98	58	62	57	35	1391
Lower Hutt			1				1		1	1					5	9
Ashburton										5						5
Northland	2	13	13	7	10	5	9	7	14	2	2	1	2	1		88
Waitemata	15	91	110	91	110	139	94	67	143	79	63	53	58	40	39	1192
Bay of Plenty	10	36	63	25	31	60	43	28	42	31	17	5	5	10	3	409
Counties Manukau	55	129	137	101	117	114	139	92	133	85	76	35	29	26	22	1290
Waikato	7	35	31	28	37	40	40	15	48	17	24	8	12	17	16	375
Lakes	7	15	27	14	33	31	20	20	21	23	16	2	3	1	12	245
Hutt Valley	7	52	55	39	39	47	30	26	48	25	18	14	12	8	2	422
Southern	9	31	32	28	38	39	41	18	53	34	21	18	18	8	9	397
Nelson Marlborough	4	19	16	10	4	6	10	8	9	6	6		2	2	5	107
Canterbury	25	100	109	80	120	105	71	63	122	58	55	28	24	16	19	995
South Canterbury	4	13	5	12	10	11	7	3	12	5	4		2	2		90
Hawkes Bay	8	27	17	7	11	16	9	9	19	4	3	3	7	6	6	152
Capital and Coast	13	76	66	73	67	83	90	66	101	96	37	20	16	21	19	844
Taranaki	1	8	12	11	15	27	11	5	12	18	2	2	2	4	10	140
MidCentral	4	19	22	13	21	22	27	14	22	28	10	6	2	9	4	223
Tairāwhiti		1	2	1	4	35	9	6	3	8	6	2	1			78
Whanganui	1	3	2		4				2	2						14
West Coast		2		1							2					5
Wairarapa	1	7				1	3	1		2						15
Christchurch									10	8	1	1				20
Manukau									5	2		1				8
Wellington									3	3						6
North Shore									2	4	1	3	2			12
New Plymouth									5	1		2				8
Rodney										3				1		4
Waitakere										1	2	1				4
Hamilton										5						5
Tasman										1						1
Upper Hutt										1						1
Palmerston North									1	1						2
Rotorua									2	1						3
Dunedin									9	2						11
Kapiti Coast										2						2
South Wairarapa										1						1
Waimate										1						1
Taupo										3						3
Tauranga									1							1
Whangarei											1					1
Selwyn									1							1
Invercargill									1							1
Southland									1							1
Grand Total	261	1151	1272	970	1537	2686	5855	4729	1577	1089	732	462	461	446	402	23630

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on

health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.

- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on 25 March 2020.**

Prepared by: Li-Chia Yeh and Kirsten Forrest, NHCC Intelligence

Approved by: Bruce Mackay, NHCC Response Manager



SITREP 66
NOVEL CORONAVIRUS COVID-19
ISSUED: 1645 hrs 25 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 25 March 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

New Zealand

1. The Prime Minister has announced a new covid-19 specific alert system. We are on **Level 3: Restrict**. See more information about alerts here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. As at 0900 hours on 25 March 2020: 207 combined confirmed and probable cases. There are 52 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. As at 1000 hours on 25 March 2020 there are 22 confirmed recovered cases. This means there are 185 active cases.
4. Additional border measures came into effect at 1159hrs 19 March 2020. Only New Zealand residents and citizens (and their children and partners) will be permitted to enter New Zealand.

Global

5. An outbreak of novel coronavirus (COVID-19) originated in mainland China with the epicentre in Hubei Province. The Director-General of the World Health Organization (WHO) has stated that Europe has now become the epicentre of the pandemic. Overall, there have now been more cases reported outside of China. Over recent days reported case numbers have been increasing most rapidly in Italy, Spain, Iran, France and Germany.
6. As reported by the WHO on 24 March 2020, globally there have been 39,827 confirmed new cases (now 372,757 confirmed cases in total) and 1,722 new deaths reported (16,231 confirmed deaths in total).

7. Data from the first patients in the USA indicates that fatality was highest in patients aged 85 and over (10% to 27%), followed by 3% to 11% among patients aged 65 to 84 years, 1% to 3% for those aged 55 to 64 and <1% for those aged 20 to 54 years. No ICU admissions or fatalities were recorded among persons 19 years and under.

KEY MESSAGES

8. The Prime Minister announced a new covid-19 specific alert system. We are on "Level 3: Restrict." At this level, there is heightened risk that the disease is not contained. New Zealand will move to Level 4: Eliminate at 2359hrs on 25 March 2020.
9. The WHO has declared COVID-19 a pandemic. The announcement formalises New Zealand's current approach to COVID-19. All our planning has been on the basis that COVID-19 was in the early stages of a pandemic.
10. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
11. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
12. We continue to regularly review border restrictions and advice around any changes required.
13. New Zealand is continuing to actively track and monitor COVID-19 in New Zealand.
14. Close contacts of any cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
15. New Zealand continues to increase its capacity to test for COVID-19. Our current test capacity is 1,923 per day and we expect this will rise further over the next few days.
16. All of us have a role to play in stopping further spread. Fundamental to New Zealand's response is not putting yourself or others at risk. Everyone can help by ensuring good health etiquette - stay home if you're unwell, washing and drying your hands well, sneeze into your elbow, and not touching your face.
17. Healthline is experiencing high volumes of calls and continues to add resources and people to the team, to manage these.
18. A centralised contact tracing system has been stood up to assist Public Health Units to manage the increasing work at the regional level.

OUTBREAK SITUATION

New Zealand

19. As at 0900 hours on 25 March 2020: 207 combined confirmed and probable cases. There are 52 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
20. As at 0900 hours on 25 March 2020 there are 22 confirmed recovered cases.
21. As at 0900 hours of those 207 cases, 13 have been noted as needing hospital level care, 10 are either currently in hospital or were in hospital and are recovering at home, 3 of those hospitalised have since recovered.

Global

22. As reported by the WHO on 24 March 2020 (1110 hours NZT), globally there have been 16,231 confirmed deaths and 372,757 confirmed cases across 196 countries, areas or territories. Based on the number of reported cases globally, the case fatality rate is approximately 4.4%.
23. As reported by the WHO on 24 March 2020, 4 new countries/territories/areas from the South-East Asia Region [1], and Region of the Americas [3] have reported confirmed cases. See Figures 1 and 2 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 24 March 2020

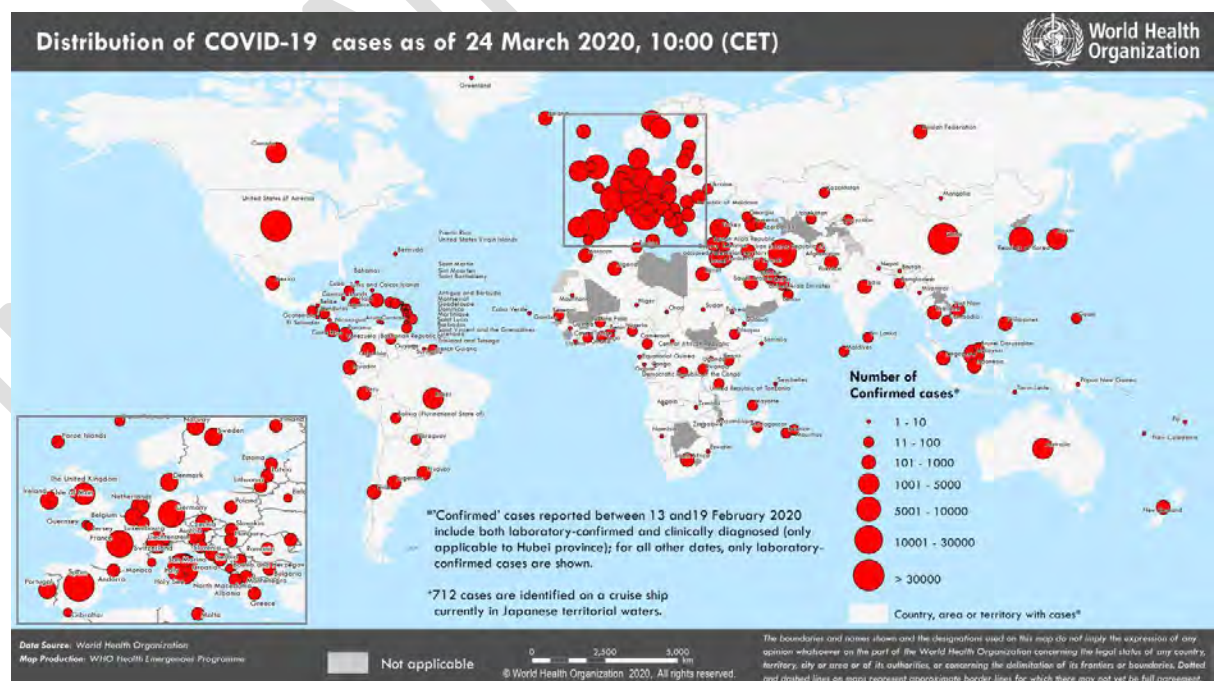
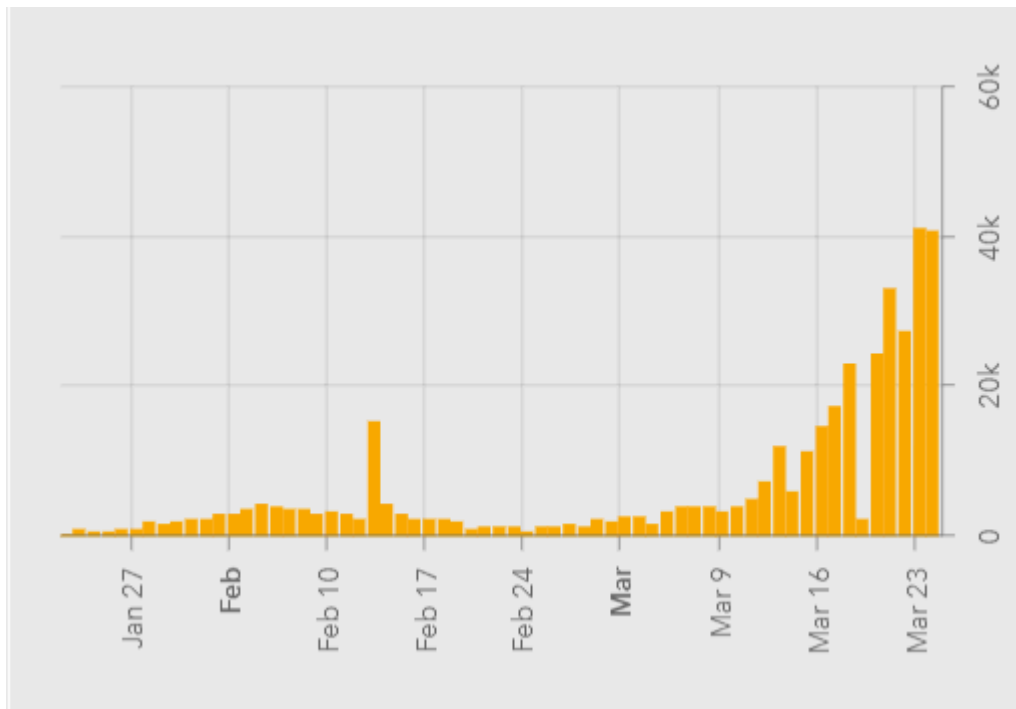


Figure 2: Global confirmed cases by date of report, as at 24 March 2020 (source WHO)



WHOLE OF GOVERNMENT RESPONSE

New Zealand border response

24. Additional border measures came into effect at 1159 hours 19 March 2020. Only New Zealand residents and citizens (and their children and partners) will be permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers, humanitarian reasons, and others. Everyone permitted to enter New Zealand is expected to self-isolate for 14 days from when they departed from the overseas country. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep sea freight routes open for imports and exports, including essential supplies. The measures will be reviewed by Monday 30 March 2020. There is a temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds.
25. Passengers from all international flights are being advised to self-isolate and were provided with advice to register with Healthline. Information was also provided to travellers with general health queries. The new passenger arrival card came into effect at 03.00 am on Friday 20 March 2020. It includes questions about COVID-19, requires passengers to provide self-isolation information (including their address), and provides for stronger compliance if required.
26. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight.

27. Ministers with Powers to Act approved two transit windows to assist repatriation of foreign nationals. Third country nationals flying to their home country were able to transit in Auckland International Airport from 1000hrs Monday 23 March to 1500hrs Tuesday 24 March (NZT). The second will allow certain categories of travellers to transit New Zealand for up to one week (i.e. up to and including Sunday 29 March).
28. The COVID-19 Interagency Self-Isolation and Quarantine Workstream is establishing a number of quarantine facilities within Auckland, Wellington and Christchurch. The facility in Auckland is closest to standing up and will be primarily in place to support the potential for unwell passengers that are transiting from the Pacific Islands through Auckland International Airport to another international destination. This facility will be in place to provide accommodation to any passengers that undergo exit health screening as they depart Auckland and are deemed too unwell to fly or are demonstrating symptoms of COVID-19. The criteria for entry into other facilities is still in the development phase.

New Zealand health sector response

29. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
30. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland, Waikato Hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. HealthScope in Auckland is likely to begin testing soon. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
31. See figures 3 and 4 below for further information on (a) the number and location of confirmed cases in New Zealand, (b) laboratory capacity and (c) the number of people tested.

Table 1: Confirmed and probable cases by DHB (Data source: EpiSurv as of 25 March 2020, 0830hrs.)

(This table was produced a few hours before this sitrep was finalised).

Confirmed and probable COVID-19 cases by DHB (Source: EpiSurv 25/03 8.30)

DHB	Confirmed		Probable		Total
	New	Total	New	Total	
Northland		0	2	0	2
Waitemata		9	24	0	25
Auckland		11	35	0	37
Counties					
Manukau		1	18	0	20
Waikato		4	15	0	17
Lakes		0	2	0	2
Bay of Plenty		1	2	0	2
Taranaki		0	4	1	5
Hawke's Bay		2	3	0	3
MidCentral		0	3	0	3
Hutt Valley		1	4	0	5
Capital and Coast		20	31	1	35
Wairarapa		2	5	0	5
Nelson					
Marlborough		1	11	1	12
Canterbury		4	12	0	13
Southern		7	18	0	19
Total		63	189	3	205

Figure 3: Daily capacity of labs to test for covid-19, as at 25 March 2020

On 25 March 2020 the capacity is 1923 tests per day.

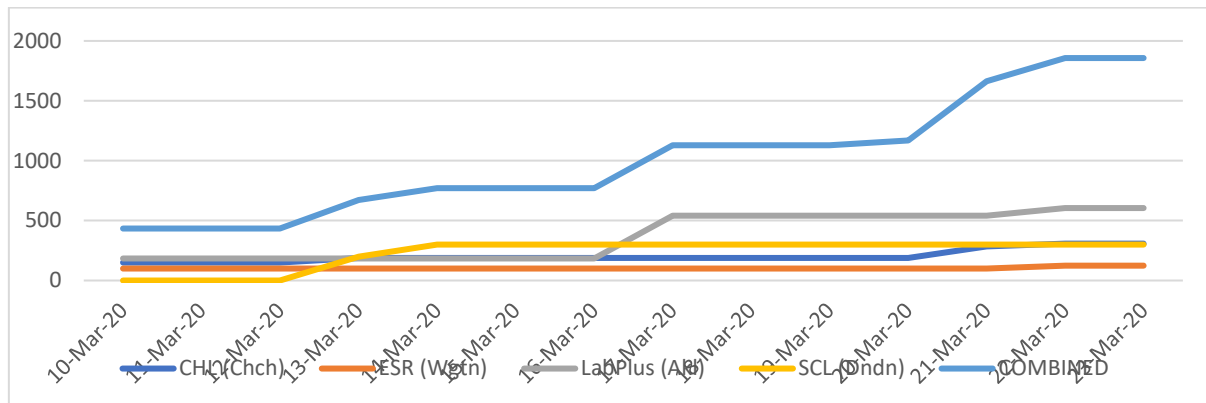
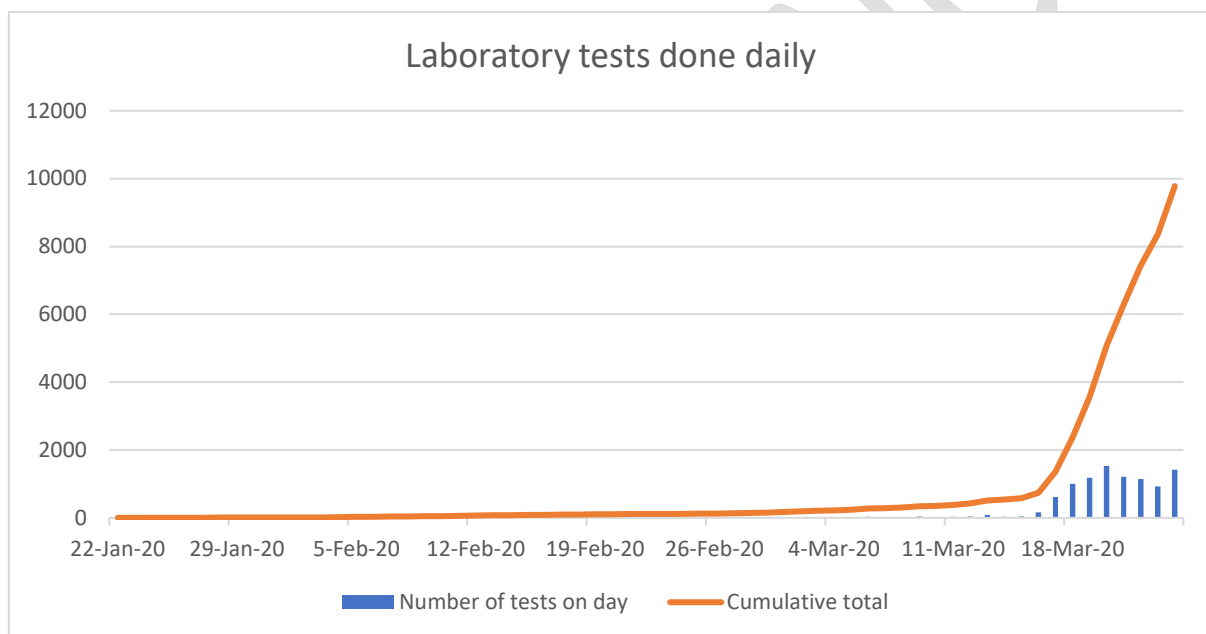


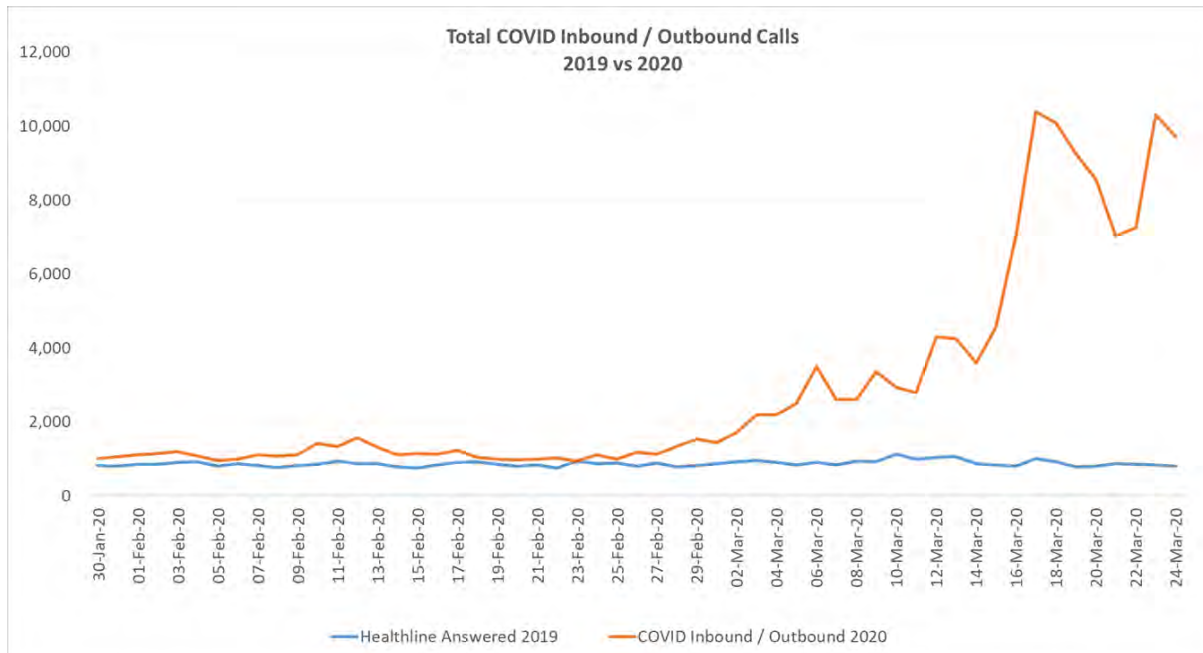
Figure 4: COVID-19 tests daily and cumulative totals, as at 24 March 2020

On 24 March 2020, 1421 tests were done.



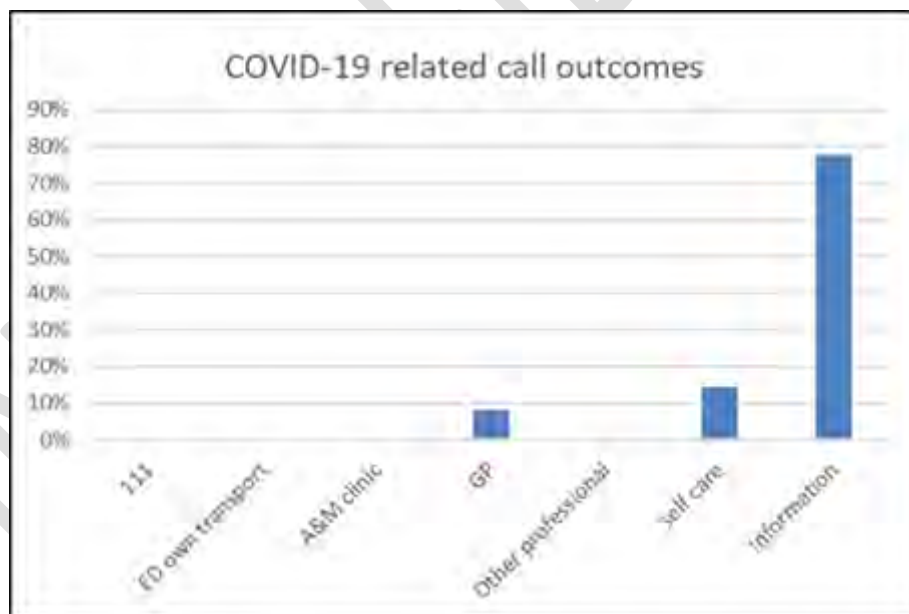
National Telehealth Service update

32. On 24 March 2020 in total circa 9,712 calls were answered / outbound calls made – the government helpline infrastructure handled 970 of these. In the last day the clinical call lengths have increased by 14 seconds, indicating increased complexity in the discussions – however, this is a change from 1 minute increase the day before. The graph below compares yesterday to the same day last year:



33. On **24 March 2020** the clinical trends we have seen mean that:

- **24%** of callers were experiencing cold or flu-like symptoms
- **18%** were regarding people who had been outside NZ in the previous 4 weeks
- **92%** received self-care advice or information



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on

health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.

- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on 26 March 2020.**

Prepared by: Kirsten Forrest and Martin Anderson, NHCC Intelligence

Approved by: Bruce Mackay, NHCC Response Manager



SITREP 67
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 26 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 26 March 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

New Zealand

1. New Zealand has a four-level covid-19 specific alert system. We are on **Level 4: Eliminate**. See more information about alerts here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. As at 0830 hours on 26 March 2020: 283 combined confirmed and probable cases. There are 78 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. As at 0830 hours on 26 March 2020 there are 27 confirmed recovered cases.
4. Additional border measures came into effect at 0200 26 March 2020. Only New Zealand residents and citizens (and their children and partners) are still permitted to enter New Zealand.

Global

5. As reported by the WHO on 25 March 2020, globally there have been 40,712 confirmed new cases (now 414,179 confirmed cases in total) and 2,202 new deaths reported (18,440 confirmed deaths in total).

KEY MESSAGES

6. The Prime Minister announced a new covid-19 specific alert system. As at 2359hrs on 25 March 2020 we are on "Level 4: Eliminate." At this level, it is likely that the disease is not contained. New Zealanders have been instructed to stay at home, educational facilities are closed, businesses are closed except for essential services and travel is limited.

7. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
8. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
9. We continue to regularly review border restrictions and advice around any changes required. **Border advice has been updated today**
<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>
10. New Zealand is continuing to actively track and monitor COVID-19 in New Zealand.
11. **As of this morning, there are 78 new confirmed and probable cases.**
12. **We have seven people in hospital with COVID-19 – all in a stable condition. There are three in Wellington, two in Nelson Marlborough and one each in Waikato and Northland. None are in ICU.**
13. Close contacts of any cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
14. **As of this morning, 35 community-based assessment centres have been set up around the country at a number of the DHBs/**
15. New Zealand continues to increase its capacity to test for COVID-19. Our current test capacity is **for 2225** per day and we expect that this will continue to rise.
16. All of us have a role to play in stopping further spread. Fundamental to New Zealand's response is not putting yourself or others at risk. Everyone can help by ensuring good health etiquette - stay home if you're unwell, washing and drying your hands well, sneeze into your elbow, and not touching your face.

OUTBREAK SITUATION

New Zealand

17. As at **0830** hours on **26 March 2020**: **283 combined confirmed and probable cases. There are 78 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website:**
<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
18. **As at 0830 hours on 26 March 2020 there are 27 confirmed recovered cases.**

Global

19. As reported by the WHO on 25 March 2020 (1110 hours NZT), globally there have been 18,440 confirmed deaths and 414,179 confirmed cases across 197 countries, areas or territories. Based on the number of reported cases globally, the case fatality rate is approximately 4.5%.
20. As reported by the WHO on 25 March 2020, 2 new countries/territories/areas from the Western Pacific Region [1], and Eastern Mediterranean Region [1] have reported confirmed cases. See Figures 1 and 2 below for further information from WHO. To see the numbers by international location, see:
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 25 March 2020

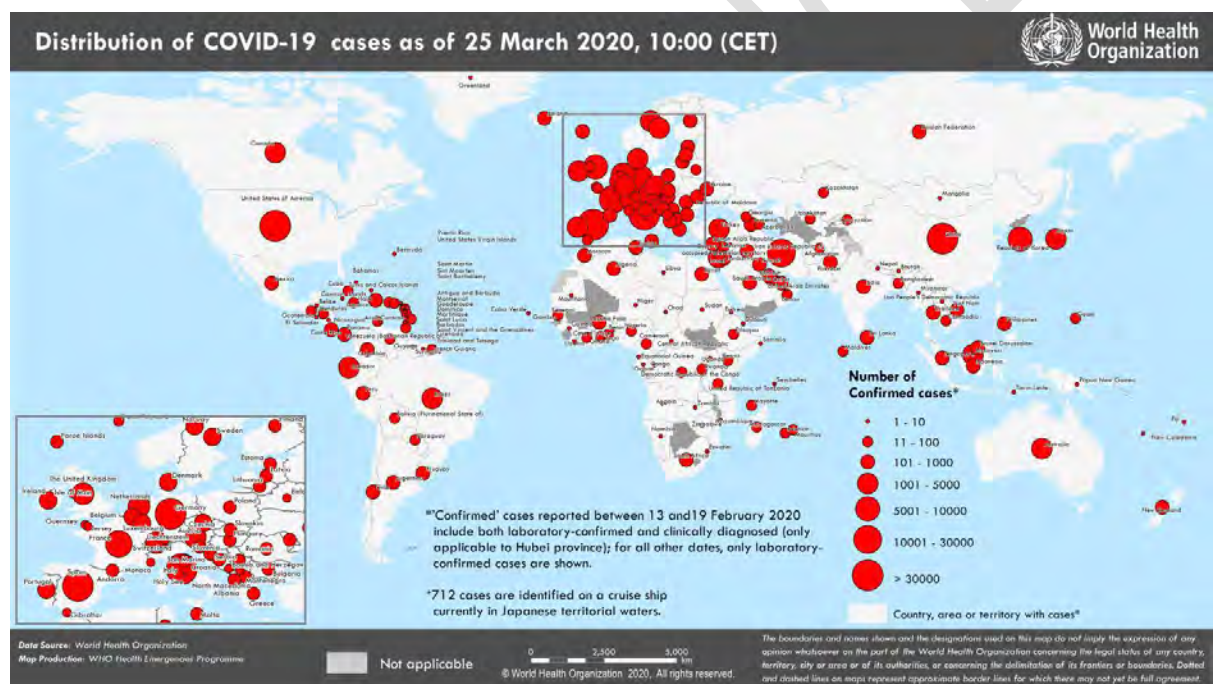
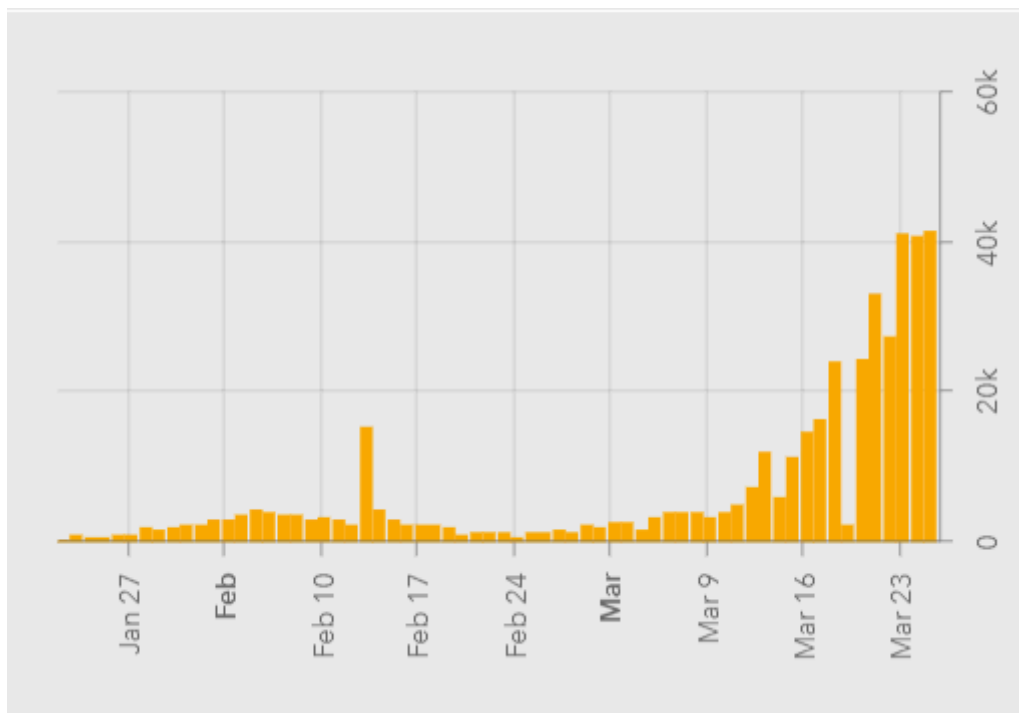


Figure 2: Global confirmed cases by date of report, as at 25 March 2020 (source WHO)



WHOLE OF GOVERNMENT RESPONSE

New Zealand border response

21. Additional border measures came into effect at 0200 26 March 2020. Only New Zealand residents and citizens (and their children and partners) **are still** permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers, humanitarian reasons, and others. Everyone permitted to enter New Zealand is expected to self-isolate for 14 days from when they departed from the overseas country. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep sea freight routes open for imports and exports, including essential supplies. The measures will be reviewed by Monday 30 March 2020. There is a temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds.
22. **Everyone permitted to enter New Zealand will now be screened on arrival.** Passengers will be disembarked in small groups from their aircraft and will met by Government officials at the gate. Officials will be available to discuss passengers' self-isolation and transport arrangements, to answer any questions, and provide assistance.
 - Passengers who have a domestic transit flight will not be allowed to connect to that flight.
 - Passengers who are **symptomatic on arrival**, will be tested and placed in an approved isolation facility for 14 days.

- Passengers who are not **symptomatic on arrival**, will be asked to explain their plans for self-isolation and transport arrangements to that place. If they have suitable self-isolation plan and transport arrangements, they will be escorted to their transport. They can expect to be checked on by Police within 72 hours to ensure they are in self-isolation.
 - Passengers who have a suitable plan for self-isolation, but do not have suitable transport arranged, will have transport arranged by officials if that is possible within the local area. If transport is not possible, the passengers will be placed in local accommodation, which has been approved for isolation for 14 days.
 - Passengers who do not have a suitable plan in place for self-isolation, will be placed in local accommodation, which has been approved for isolation for 14 days. They will be transported there directly from the airport.
 - Passengers who are placed in managed accommodation for the 14-day isolation period, will be given further information on what will happen after the 14 days, including if they had planned transport through domestic flights.
23. Health staff at Auckland International Airport last night reported the new measures appeared to work well. Prior to the new measures, there had been 88 passengers given health screens and 57 swabs taken. Once the new measures took effect, 11 passengers were swabbed and sent to quarantine at time of email. A number of passengers displaced on the Doha flight expecting to be able to transfer domestically. 18 passengers were expecting to on travel to Australia but were landed in NZ.
24. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight.
25. Ministers with Powers to Act approved two transit windows to assist repatriation of foreign nationals. Third country nationals flying to their home country were be able to transit in Auckland International Airport from 1000hrs Monday 23 March to 1500hrs Tuesday 24 March (NZT). The second will allow certain categories of travellers to transit New Zealand for up to one week (i.e. up to and including Sunday 29 March).

New Zealand health sector response

26. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
27. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland, Waikato Hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. HealthScope in Auckland is likely to begin testing soon. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
28. See figures 3 and 4 below for further information on (a) the number and location of confirmed cases in New Zealand, (b) laboratory capacity and (c) the number of people tested.

Table 1: Confirmed and probable cases by DHB (Data source: EpiSurv as of 26 March 2020, 0830hrs.)

(This table was produced a few hours before this sitrep was finalised).

Confirmed and probable COVID-19 cases by DHB (Source: Episurv 26/03, 0830)

DHB	Confirmed		Probable		Total		Died	
	New	Total	New	Total	New	Total	New	Total
Northland	1	3	0	0	1	3	0	0
Waitemata	5	29	0	1	5	30	0	0
Auckland	8	43	0	2	8	45	0	0
Counties Manukau	5	23	0	2	5	25	0	0
Waikato	16	31	1	3	17	34	0	0
Lakes	4	6	0	0	4	6	0	0
Bay of Plenty	1	3	0	0	1	3	0	0
Taranaki	1	5	0	1	1	6	0	0
Hawke's Bay	0	3	3	3	3	6	0	0
MidCentral	2	5	1	1	3	6	0	0
Hutt Valley	1	5	0	1	1	6	0	0
Capital and Coast	4	35	0	4	4	39	0	0
Wairarapa	0	5	0	0	0	5	0	0
Nelson Marlborough	5	16	0	1	5	17	0	0
West Coast	1	1	0	0	1	1	0	0
Canterbury	5	17	0	1	5	18	0	0
South Canterbury	2	2	0	0	2	2	0	0
Southern	12	30	0	1	12	31	0	0
Total	73	262	5	21	78	283	0	0

Figure 3: Daily capacity of labs to test for covid-19, as at 26 March 2020

On 26 March 2020 the capacity is 2,225 tests per day.

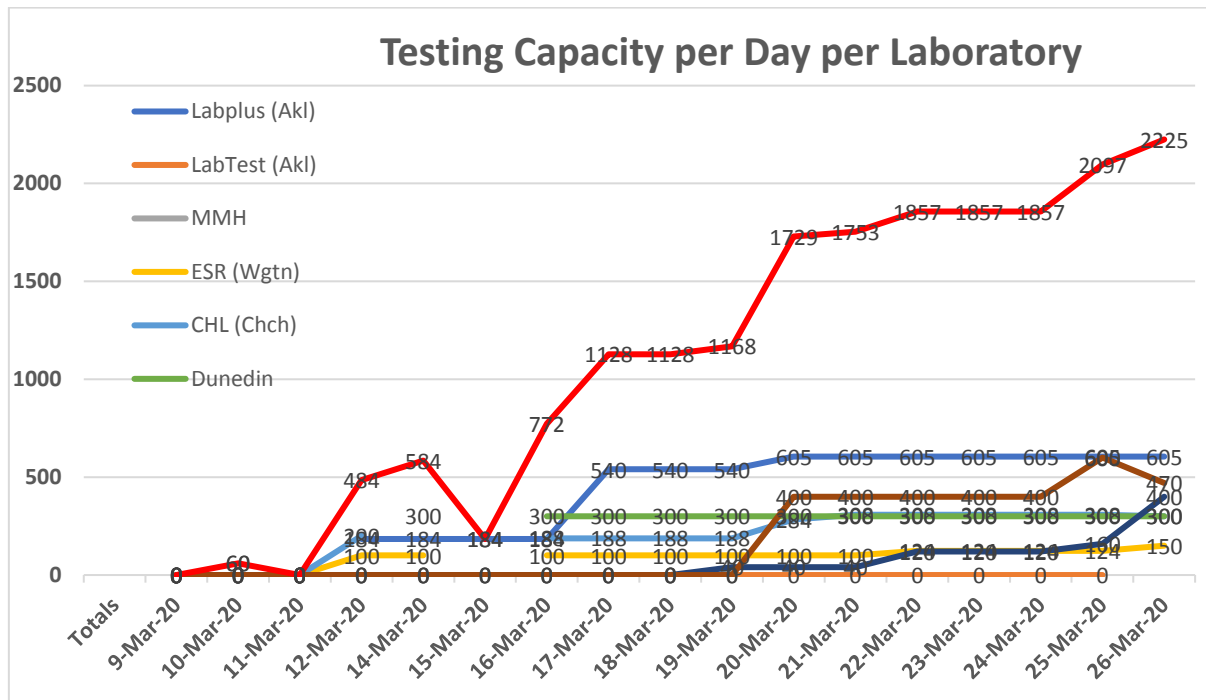
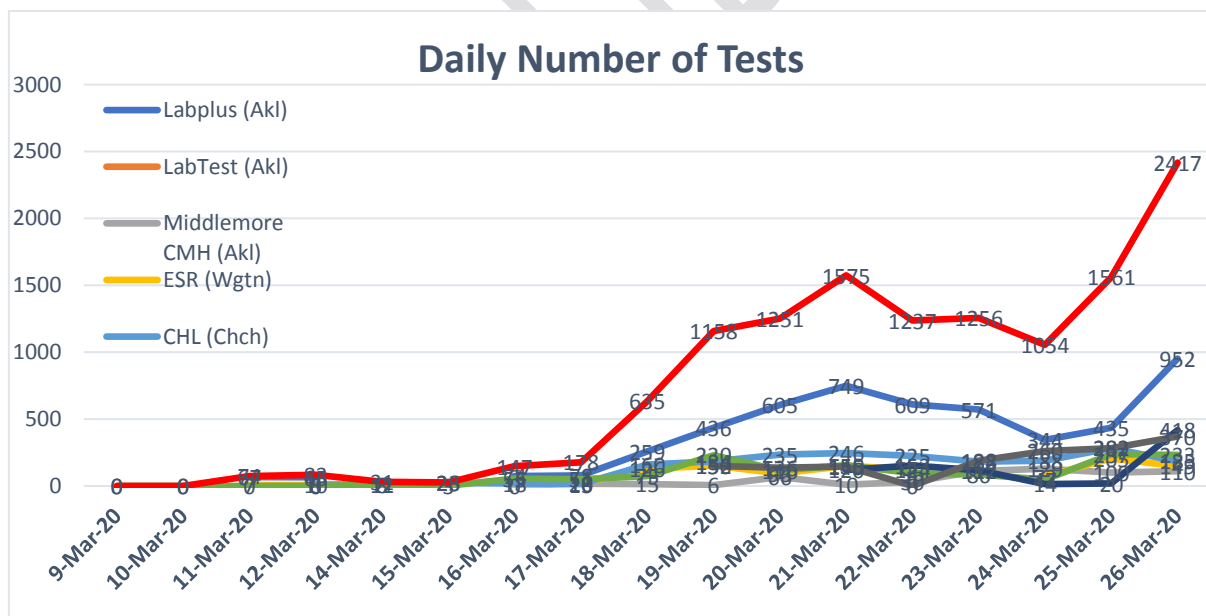


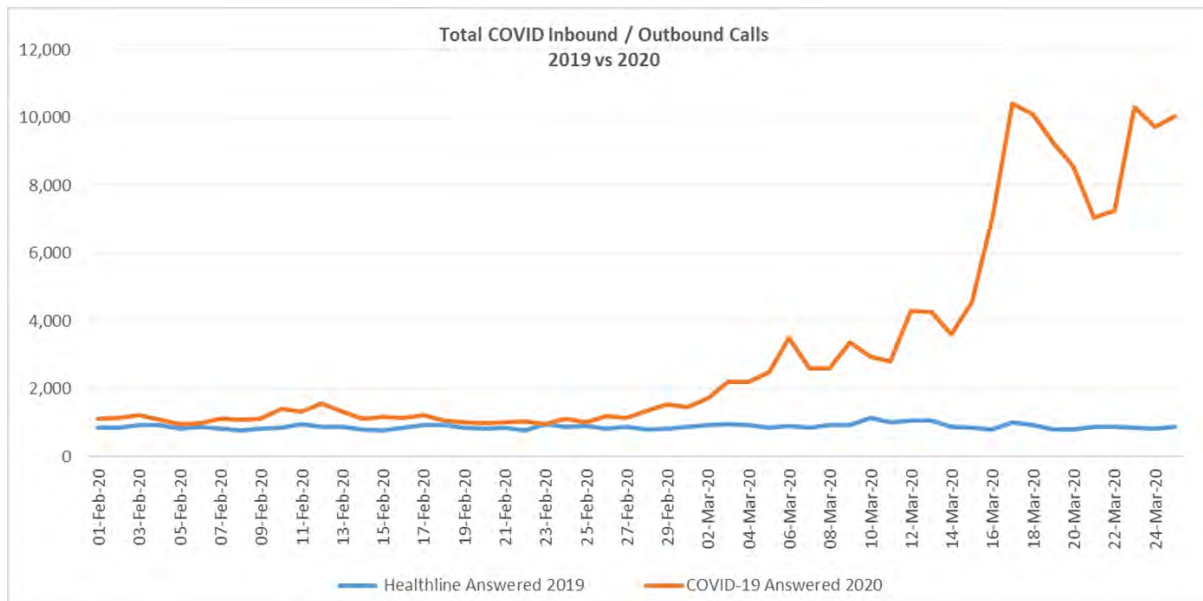
Figure 4: COVID-19 tests daily and cumulative totals, as at 25 March 2020

On 25 March 2020, 2,417 tests were done.

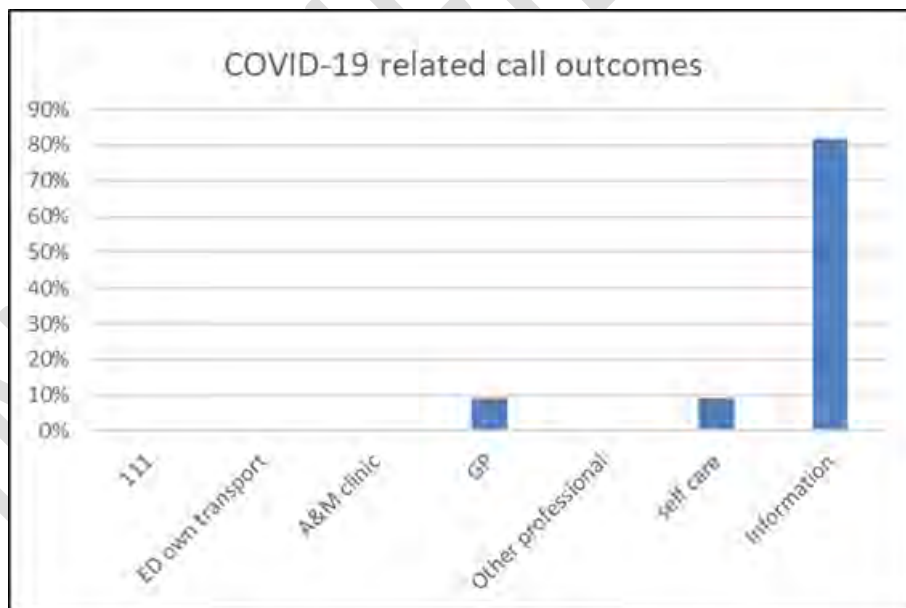


National Telehealth Service update

29. On 25 March 2020 in total circa 10,029 calls were answered / outbound calls made – the government helpline infrastructure handled 1,072 of these. In the last 24 hours the clinical call lengths have increased by 14 seconds, indicating increased complexity in the discussions – however, this is a change from 1 minute increase the day before. The graph below compares yesterday to the same day last year:



30. On **25 March 2020** the clinical trends we have seen mean that:
- **15%** of callers were experiencing cold or flu-like symptoms
 - **55%** were regarding people who had been outside NZ in the previous 4 weeks
 - **91%** received self-care advice or information



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on

health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.

- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

NHCC continues to operate 7 days per week.

Next Report

The next report will be a Sitrep at **1300 hrs on 27 March 2020.**

Prepared by: Kirsten Forrest, NHCC Intelligence

Approved by: Bruce Mackay, NHCC Response Manager



SITREP 68
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 27 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 27 March 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

New Zealand

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on **Level 4: Eliminate**. See more information about alert levels here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. As at 0900 hours on 27 March 2020 there are 368 combined confirmed and probable cases. There are 85 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. As at 0900 hours on 27 March 2020 there are 37 confirmed recovered cases.
4. Additional border measures came into effect at 0200hrs 26 March 2020. Only New Zealand residents and citizens (and their children and partners) **are still** permitted to enter New Zealand.

Global

5. As reported by the WHO on 26 March 2020, globally there have been 49,219 confirmed new cases (now 462,684 confirmed cases in total) and 2,401 new deaths reported (20,834 confirmed deaths in total).

KEY MESSAGES

6. The Prime Minister announced a new COVID-19 specific alert system. As at 2359hrs on 25 March 2020 we are on "Level 4: Eliminate." As part of the measures being taken to contain COVID-19, New Zealanders have been instructed to stay at home, educational facilities have been closed, businesses are

closed except for those deemed as essential services and domestic travel is limited.

7. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
8. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
9. We continue to regularly review border restrictions and advice around any changes required. Border advice has been updated today and is available on the Ministry of Health website. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>
10. The Ministry of Health is continuing to actively track and monitor COVID-19 cases in New Zealand.
11. As of this morning, there are 85 new confirmed and probable cases.
12. Close contacts of cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
13. New Zealand continues to increase its capacity to test for COVID-19. Our current test capacity is 2525 per day and we expect that this will continue to rise.

OUTBREAK SITUATION

New Zealand

14. As at 0900 hours on 27 March 2020 368 combined confirmed and probable cases. There are 85 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
15. As at 0900 hours on 27 March 2020 there are 37 confirmed recovered cases.

Global

16. As reported by WHO on 26 March 2020 (1110 hrs NZT), globally there have been 20,834 confirmed deaths and 462,684 confirmed cases across 197 countries, areas or territories. Based on the number of reported cases globally, the case fatality rate is approximately 4.5 percent.
17. As reported by WHO on 26 March 2020, three new countries, territories or areas from the Region of the Americas [1], and African Region [2] have reported confirmed cases. See Figures 1 and 2 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 1. Countries, territories or areas with reported confirmed cases of COVID-19, 26 March 2020 (this is a new graph provided by the WHO showing current disease trends)

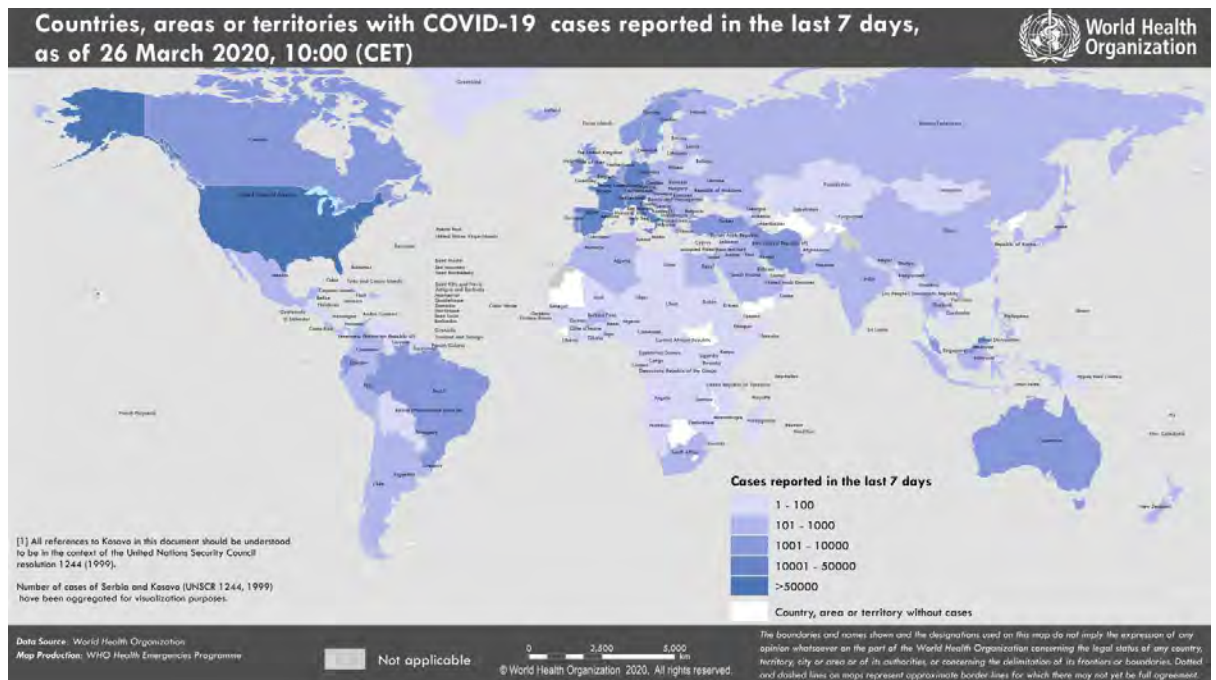
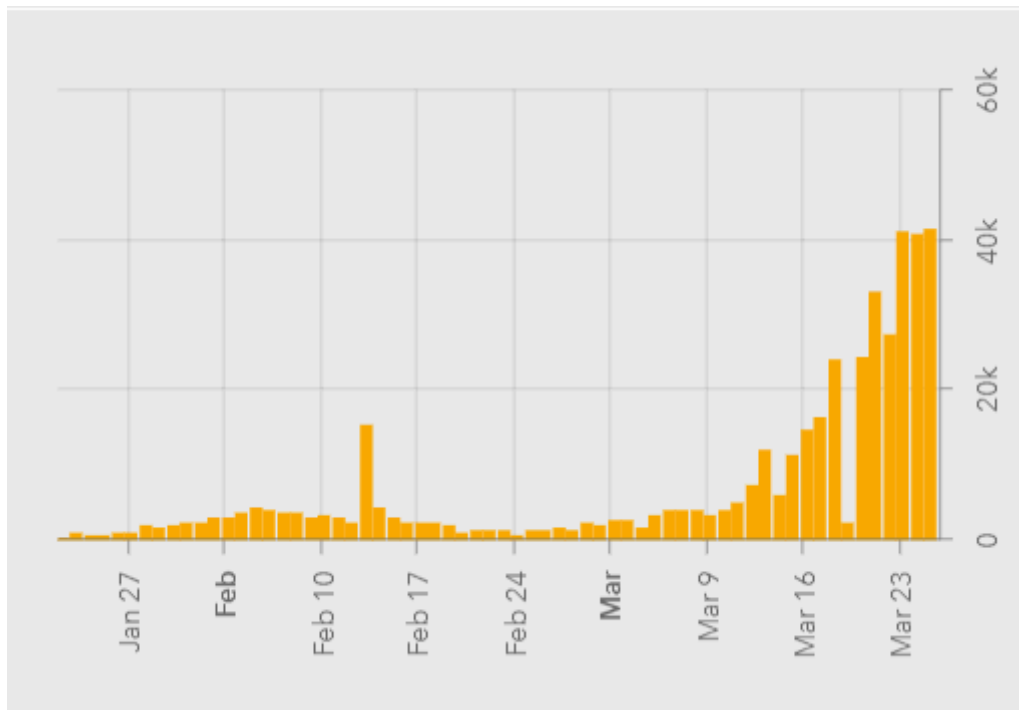


Figure 2: Global confirmed cases by date of report, as at 25 March 2020 (source WHO) (update not accessible today)



WHOLE OF GOVERNMENT RESPONSE

New Zealand border response

18. Additional border measures came into effect at 0200 26 March 2020. Only New Zealand residents and citizens (and their children and partners) are still permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers, humanitarian reasons, and others. Everyone permitted to enter New Zealand is expected to self-isolate for 14 days from when they departed from the overseas country. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep sea freight routes open for imports and exports, including essential supplies. The measures will be reviewed by Monday 30 March 2020. There is a temporary ban on the entry of cruise ships to New Zealand's territorial waters on public health grounds.
19. Everyone permitted to enter New Zealand will now be screened on arrival. Passengers will be disembarked in small groups from their aircraft and will met by Government officials at the gate. Officials will be available to discuss passengers' self-isolation and transport arrangements, to answer any questions, and provide assistance.
20. The Ministry of Health website has been updated to include further advice

<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>

Advice includes:

- If passengers have a domestic transit flight, they will not be allowed to connect to that flight.
 - If a passenger is symptomatic on arrival, they will be tested and placed in an approved isolation facility for 14 days.
 - If a passenger is not symptomatic on arrival, they will be asked to explain their plan for self-isolation and transport arrangements to that place.
 - If passengers have no suitable plan in place for self-isolation, they will be placed in local low-level quarantine accommodation, which has been approved for isolation for 14 days. They will be transported there directly from the airport.
 - If passengers have a suitable self-isolation plan and transport arrangements, they will be escorted to their transport. They will also be checked on by Police within 72 hours to ensure they are in self-isolation. A suitable plan must meet **all** nine criteria, including that the self-isolation location (private residence) must be within five (5) hours' drive from the airport and the passenger must reach the self-isolation location (private residence) within twelve (12) hours of arriving to New Zealand.
 - Passengers cannot use rental cars, lease cars or public transport (taxis, Uber, buses, trains, ferries, domestic flights etc) to travel to their self-isolation location but must use a private car, either a self-driven private car already parked at the airport or a private car driven by someone living at the intended self-isolation location.
21. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. These are for persons with no suitable transport or accommodation for self-isolation identified. In Auckland one quarantine facility and five self-isolation facilities have been stood up. In Wellington one quarantine facility and one self-isolation facility have been stood up. In Christchurch one facility is being established. There are 12 flights arriving today into Auckland. No flights are arriving into Wellington or Christchurch.
22. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight.
23. Ministers with Powers to Act approved two transit windows to assist repatriation of foreign nationals. Third country nationals flying to their home country were able to transit in Auckland International Airport from 1000hrs Monday 23 March to 1500hrs Tuesday 24 March (NZT). The second will allow certain categories of travellers to transit New Zealand for up to one week (i.e. up to and including Sunday 29 March).

New Zealand health sector response

24. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
25. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland, Waikato Hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. HealthScope in Auckland is likely to begin testing soon. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.

26. See figures 3 and 4 below for further information on (a) the number and location of confirmed cases in New Zealand, (b) laboratory capacity and (c) the number of people tested.

Table 1: Confirmed and probable cases by DHB (Data source: EpiSurv as of 27 March 2020, 0830hrs.)

DHB	Confirmed		Probable		Total		Died	
	New	Total	New	Total	New	Total	New	Total
Northland	1	4	0		1	4	0	0
Waitemata	11	40	6	7	17	47	0	0
Auckland	10	53	3	5	13	58	0	0
Counties Manukau	3	26	0	2	3	28	0	0
Waikato	11	42	0	3	11	45	0	0
Lakes	2	8	0		2	8	0	0
Bay of Plenty	1	4	2	2	3	6	0	0
Taranaki	0	5	0	1	0	6	0	0
Tairāwhiti	1	1	0	0	1	1	0	0
Hawke's Bay	7	10	-3	0	4	10	0	0
MidCentral	1	6	0	1	1	7	0	0
Hutt Valley	5	10	0	1	5	11	0	0
Capital and Coast	2	37	1	5	3	42	0	0
Wairarapa	0	5	0		0	5	0	0
Nelson Marlborough	1	17	0	1	1	18	0	0
West Coast	0	1	0		0	1	0	0
Canterbury	12	29	0	1	12	30	0	0
South Canterbury	0	2	0		0	2	0	0
Southern	8	38	0	1	8	39	0	0
Total	76	337	9	30	85	368	0	0

Figure 3: Daily capacity of labs to test for covid-19, as at 26 March 2020

On 26 March 2020 the capacity is 2,525 tests per day.

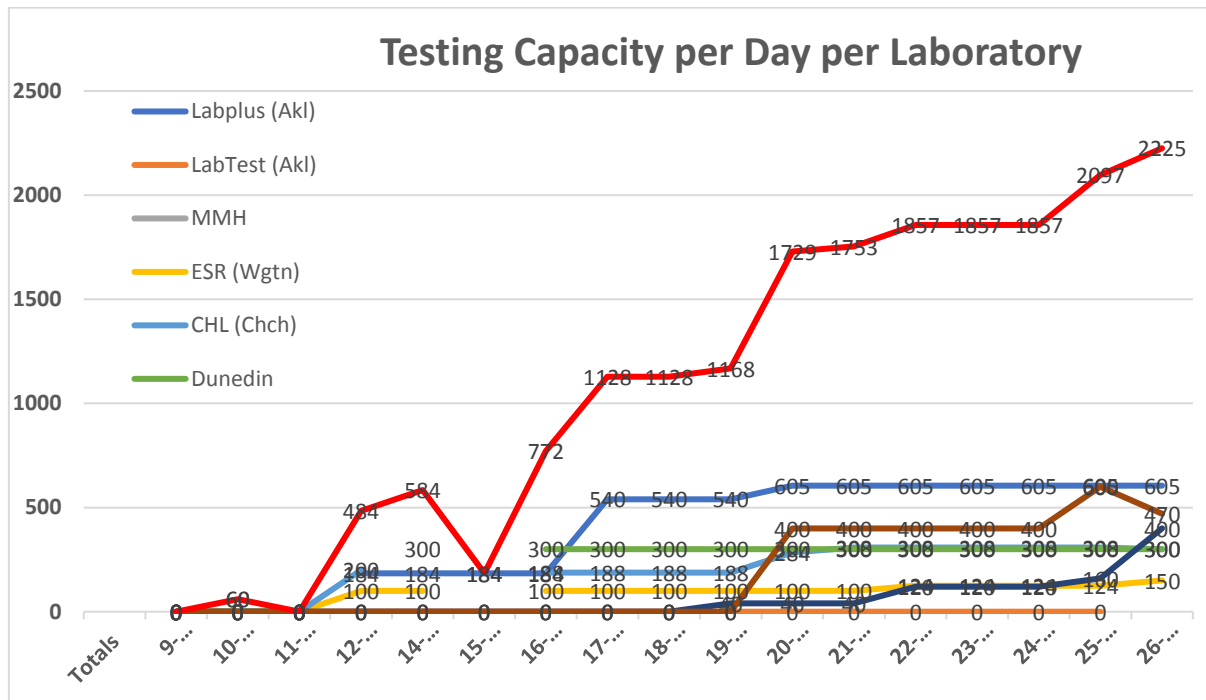
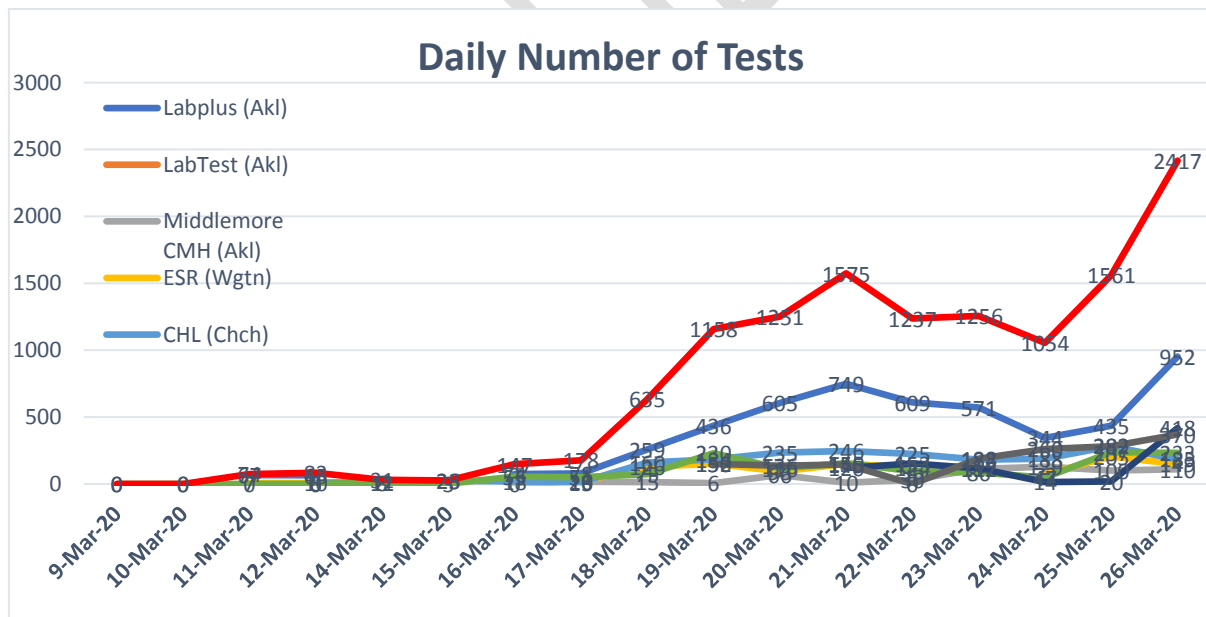


Figure 4: COVID-19 tests daily and cumulative totals, as at 26 March 2020

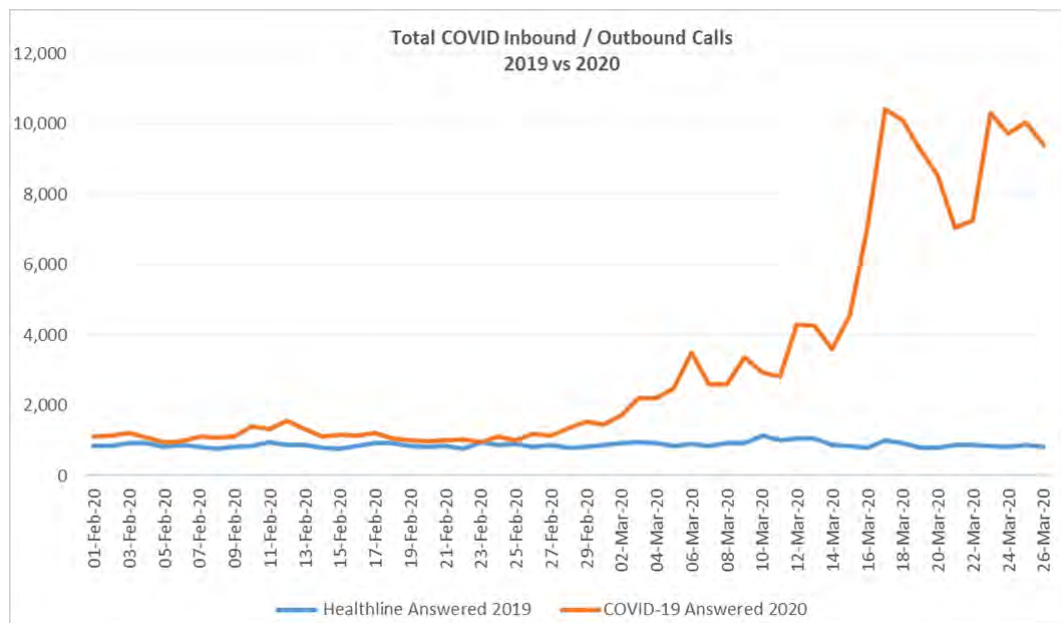
On 26 March 2020, 2,417 tests were done.



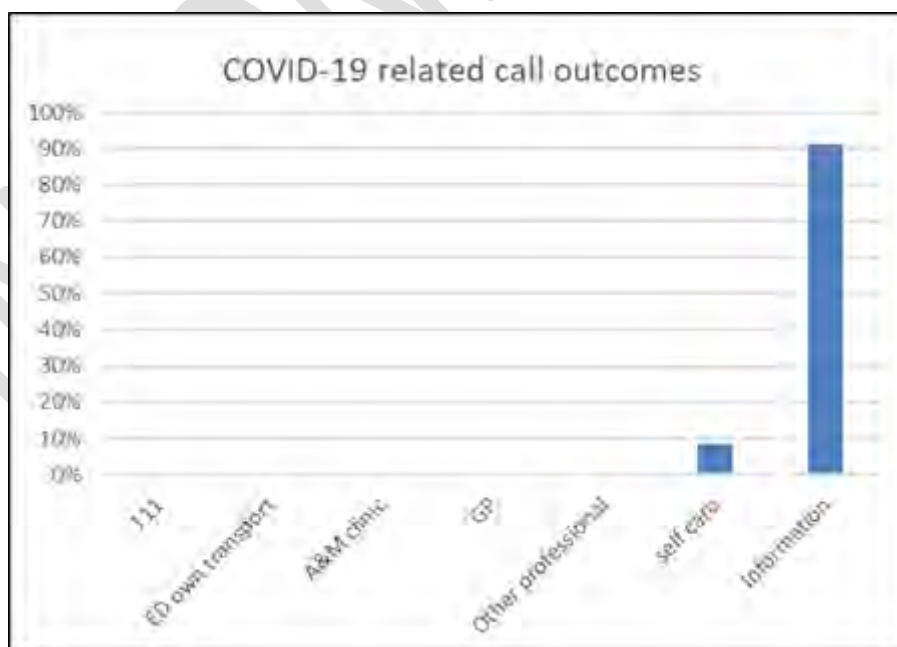
National Telehealth Service update

27. On 26 March 2020 in total 9,391 calls were answered/outbound calls made (compared to 809 on the same day last year). No calls were diverted to the All-of Government infrastructure.

28. In the past 24 hours clinical call lengths have stabilised. Wait times have reduced as more than 120 additional staff have been activated in the past 48 hours. The graph below compares call volumes today to the same day last year:



29. On 26 March 2020 the clinical trends seen include::
- 13% of callers were experiencing cold or flu-like symptoms
 - 22% were regarding people who had been outside NZ in the previous 4 weeks
 - 99% received self-care advice or information



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.

- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1300 hrs on 28 March 2020.**

Prepared by: Kirsten Forrest, NHCC Intelligence

Approved by: Tara Swadi, Advisor to the Health Systems Director

Emma Prestige, NHCC Response Manager

IN CONFIDENCE



SITREP 69
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 28 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 28 March 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. As at 0900 hours on 28 March 2020 there are 451 combined confirmed and probable cases. There are 83 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. As at 0900 hours on 28 March 2020 there are 50 confirmed recovered cases.
4. Additional border measures came into effect at 0200hrs 26 March 2020. Only New Zealand residents and citizens (and their children and partners) are still permitted to enter New Zealand.

KEY MESSAGES

5. The Prime Minister announced a new COVID-19 specific alert system. As at 2359hrs on 25 March 2020 we are on “Level 4: Eliminate.” As part of the measures being taken to contain COVID-19, New Zealanders have been instructed to stay at home, educational facilities have been closed, businesses are closed except for those deemed as essential services and domestic travel is limited.
6. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
7. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.

8. We continue to regularly review border restrictions and advice around any changes required. Border advice has been updated and is available on the Ministry of Health website. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>
9. The Ministry of Health is continuing to actively track and monitor COVID-19 cases in New Zealand.
10. Close contacts of cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.

OUTBREAK SITUATION

11. As at 0900 hours on 28 March 2020 451 combined confirmed and probable cases. There are 83 combined new confirmed and probable cases reported in the last 24 hours. See Figure 1 for the epidemic curve and Figure 2 for DHB breakdown.
12. As at 0900 hours on 28 March 2020 there are 50 confirmed recovered cases.

Figure 1 COVID-19 Epidemic Curve

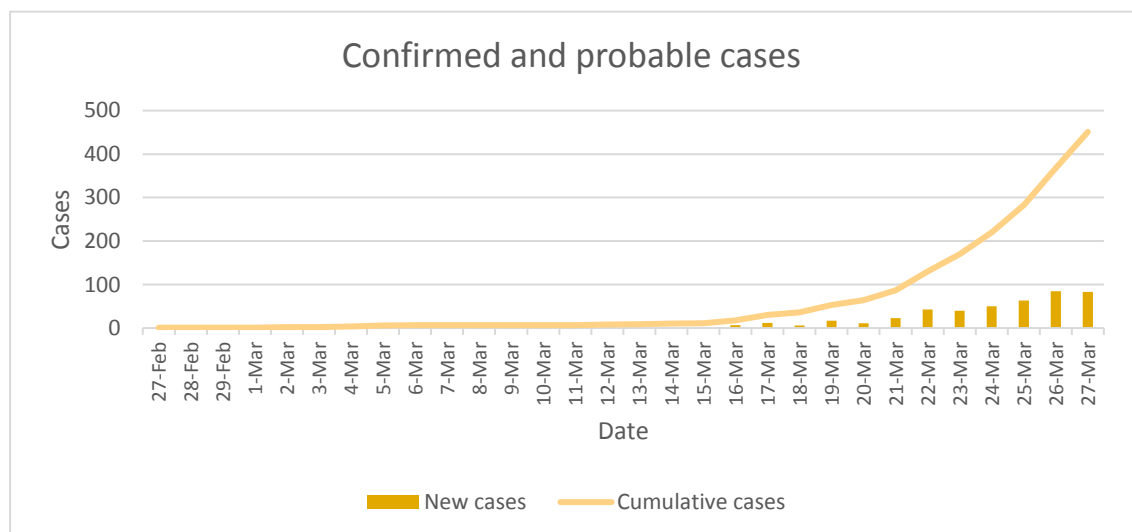
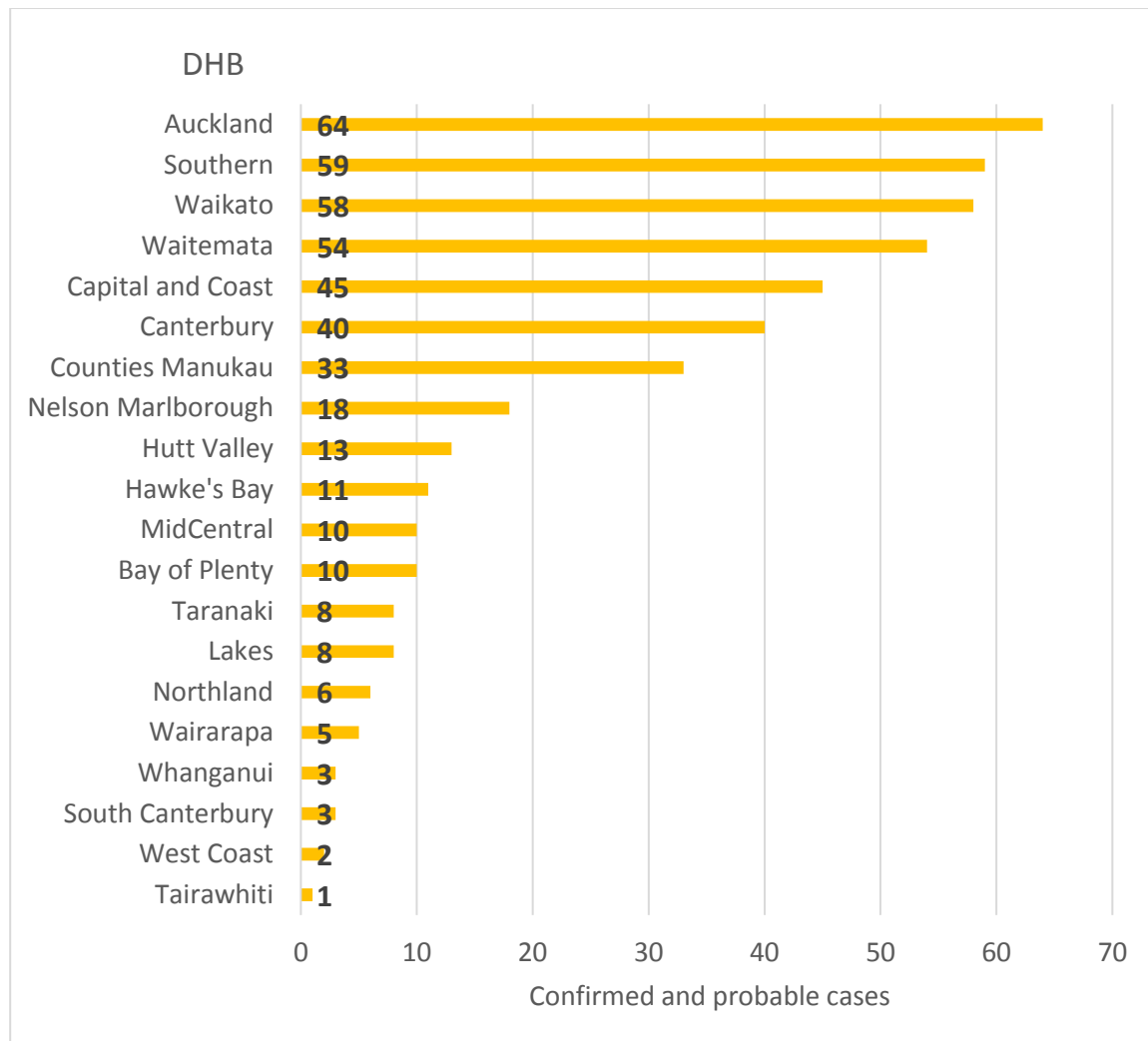


Figure 2 COVID-19 confirmed and probable cases by DHB



New Zealand health sector response

13. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
14. ESR, Canterbury Health Laboratories (CHL), LabPLUS in Auckland, Waikato Hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
15. See Figures 3 and 4 below for further information on laboratory capacity and the number of people tested.

Figure 3: Daily capacity of labs to test for covid-19, as at 27 March 2020

On 27 March 2020 the capacity is 3,589 tests per day.

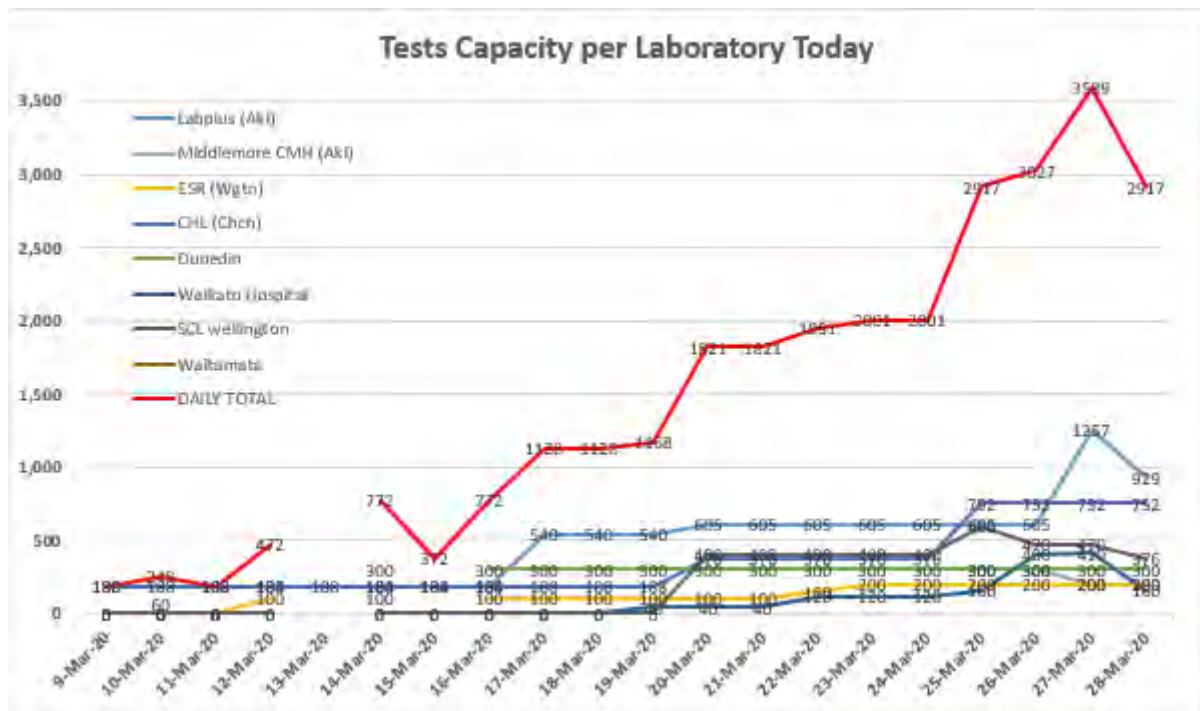
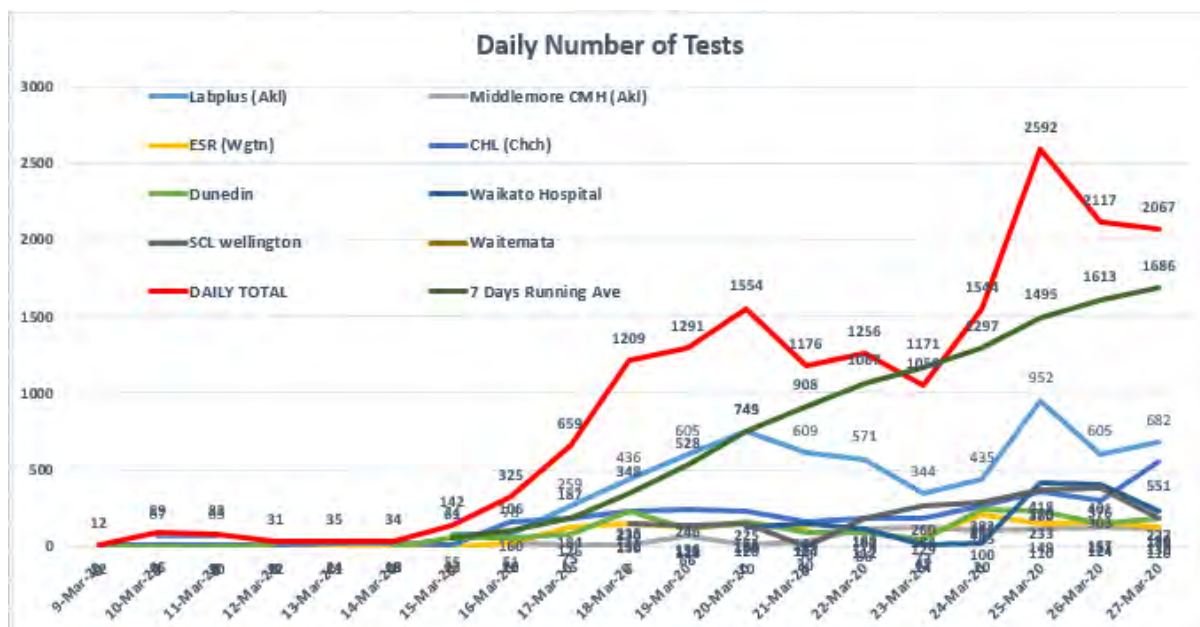


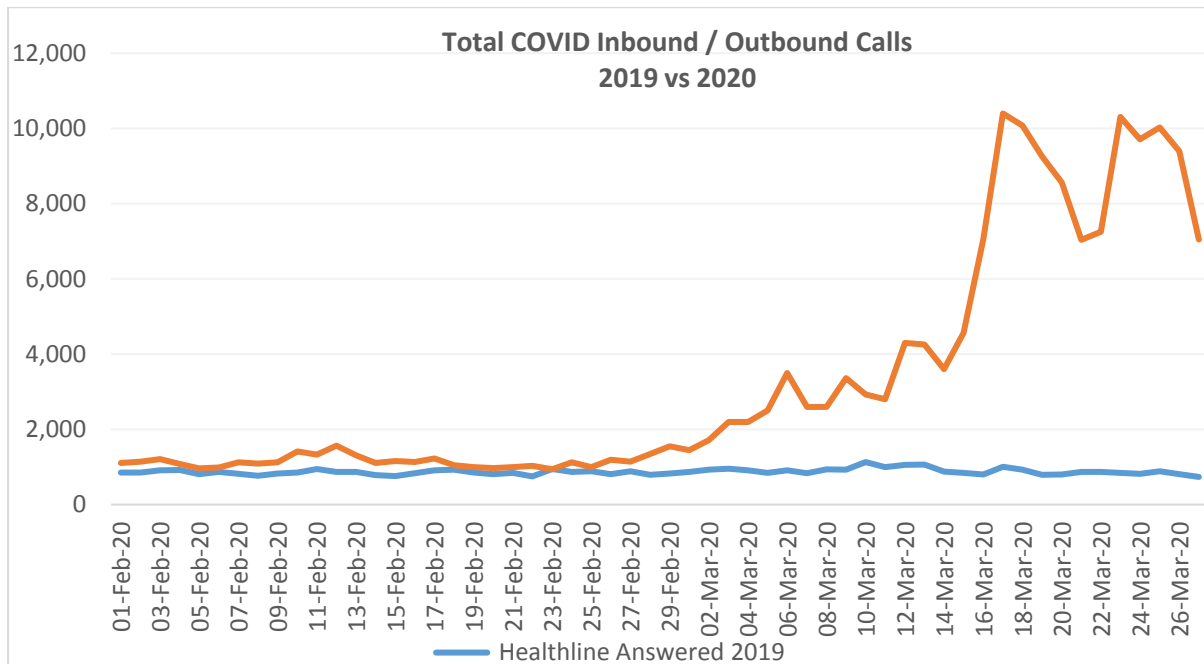
Figure 4: COVID-19 tests daily and cumulative totals, as at 27 March 2020

On 27 March 2020, 2067 tests were done.

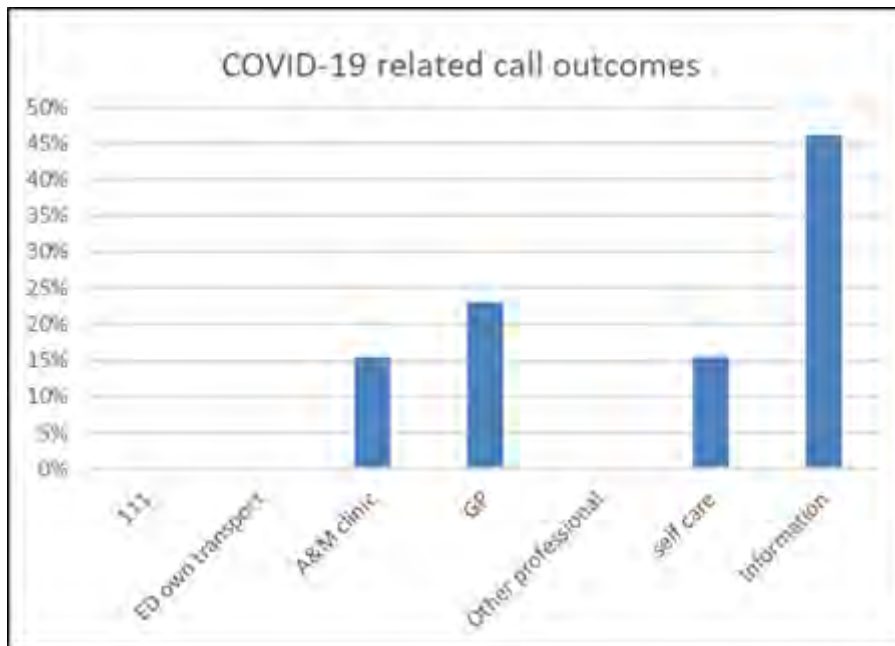


National Telehealth Service update

16. On 27 March 2020 in total 7,049 calls were answered/outbound calls made (compared to circa 800 on the same day last year).
17. In the past 24 hours clinical call lengths have stabilised. Wait times continue to trend down. On 27 March 2020 there were significant spikes in demand in short periods and the call arrival patterns did not follow our expected resourcing profile. The graph below compares call volumes today to the same day last year:



18. On 27 March 2020 the clinical trends seen include:
- 40% of callers were experiencing cold or flu-like symptoms
 - 31% were regarding people who had been outside NZ in the previous 4 weeks
 - 62% received self-care advice or information



Community Based Assessment Centres (CBAC)

19. As at 0900 hours on 28 March there are 40 CBACs active and 52 designated practices/testing stations.

Contact Tracing – National Close Contact Service

20. Since 24 March 2020, the cumulative total for contacts called and closed is 1,491.

New Zealand border response

21. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. The measures will be reviewed by 30 March 2020.
22. Everyone permitted to enter New Zealand will now be screened on arrival. Passengers will be disembarked in small groups from their aircraft and will met by Government officials at the gate. Officials will be available to discuss passengers' self-isolation and transport arrangements, to answer any questions, and provide assistance.
 - If passengers have a domestic transit flight, they will not be allowed to connect to that flight.
 - If a passenger is symptomatic on arrival, they will be tested and placed in an approved isolation facility for 14 days.
 - If a passenger is not symptomatic on arrival, they will be asked to explain their plan for self-isolation and transport arrangements to that place.

- If passengers have no suitable plan in place for self-isolation, they will be placed in local low-level quarantine accommodation, which has been approved for isolation for 14 days. They will be transported there directly from the airport.
 - If passengers have a suitable self-isolation plan and transport arrangements, they will be escorted to their transport. They will also be checked on by Police within 72 hours to ensure they are in self-isolation. A suitable plan must meet **all** nine criteria, including that the self-isolation location (private residence) must be within five (5) hours' drive from the airport and the passenger must reach the self-isolation location (private residence) within twelve (12) hours of arriving to New Zealand.
 - Passengers cannot use rental cars, lease cars or public transport (taxis, Uber, buses, trains, ferries, domestic flights etc) to travel to their self-isolation location but must use a private car, either a self-driven private car already parked at the airport or a private car driven by someone living at the intended self-isolation location.
 - The Ministry of Health website includes this advice at <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>
23. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. These are for persons with no suitable transport or accommodation for self-isolation identified. **Over 3300 rooms and 1400 campervans are available. In Auckland one isolation facility and seven quarantine facilities have been stood up and a further eleven are available. In Hamilton, one quarantine facility is available but not being used. In Wellington one isolation facility and one quarantine facility have been stood up and a further seven are available. In Christchurch one isolation facility and two quarantine facilities have been stood up and a further four are available. In Queenstown work is underway to establish facilities. Flights from Auckland to other New Zealand cities are being considered, to transport groups of travellers directly from their international flight to points where they can travel home to go into self-isolation.**
24. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight.
25. **Four students from Marist College, Auckland, were prevented from boarding the Air New Zealand flight to Narita because they were school contacts of confirmed cases of COVID-19.**
26. Ministers with Powers to Act approved two transit windows to assist repatriation of foreign nationals. Third country nationals flying to their home country were able to transit in Auckland International Airport from 1000hrs 23 March 2020 to 1500hrs 24 March 2020 (NZT). The second will allow certain categories of travellers to transit New Zealand for up to one week (i.e. up to and including 29 March 2020).

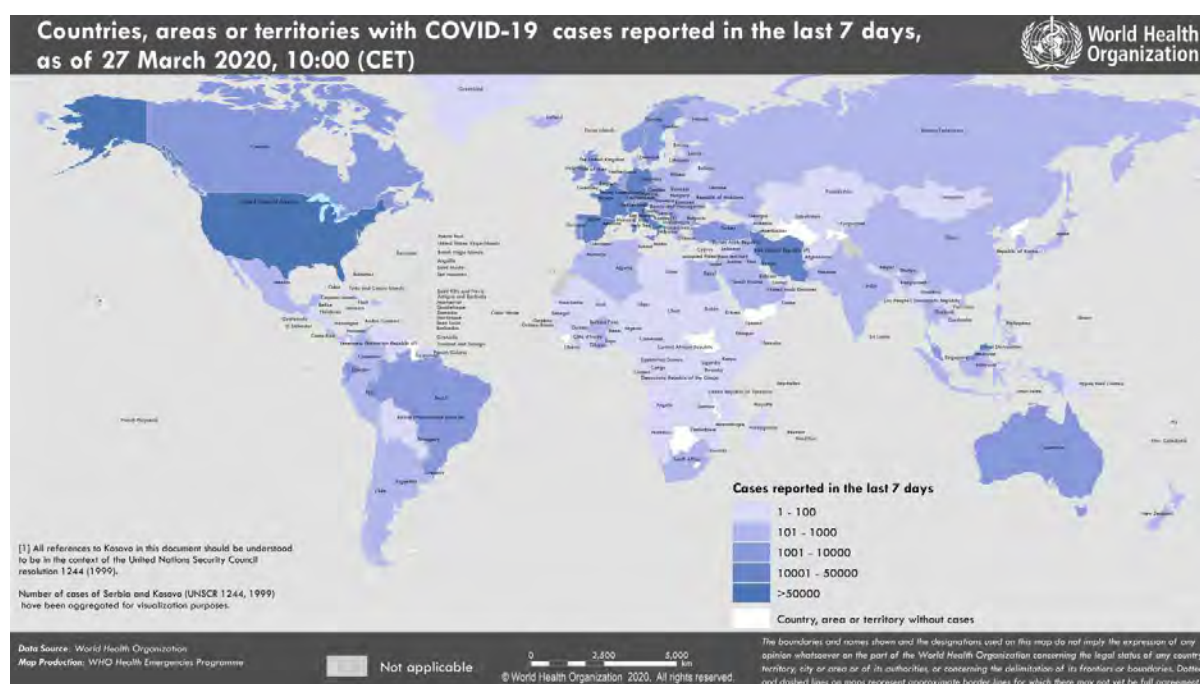
Global

27. As reported by the **WHO on 27 March 2020, globally there have been 46,484 confirmed new cases (now 509,164 confirmed cases in total) and 2,501 new**

deaths reported (23,335 confirmed deaths in total). Based on the number of reported cases globally, the case fatality rate is approximately 4.6 percent.

28. As reported by WHO on 27 March 2020, two new countries, territories or areas from the Region of the Americas, have reported confirmed cases. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 5. Countries, territories or areas with reported confirmed cases of COVID-19, 27 March 2020 (this is a new graph provided by the WHO showing current disease trends)



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on

health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.

- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1300 hrs on 29 March 2020.**

Prepared by: Kirsten Forrest and Li-Chia Yeh, NHCC Intelligence

Approved by: Emma Prestige, NHCC Response Manager



SITREP 70
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hrs 29 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 28 March 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. As at 0900 hours on 29 March 2020 there are 514 combined confirmed and probable cases. There are 63 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. New Zealand recorded its first death linked to COVID-19 early this morning.
4. As at 0900 hours on 29 March 2020 there are 56 recovered cases.
5. Additional border measures came into effect at 0200hrs 26 March 2020. Only New Zealand residents and citizens (and their children and partners) are still permitted to enter New Zealand.

KEY MESSAGES

6. The Prime Minister announced a new COVID-19 specific alert system. As at 2359hrs on 25 March 2020 we are on “Level 4: Eliminate.” As part of the measures being taken to contain COVID-19, New Zealanders have been instructed to stay at home, educational facilities have been closed, businesses are closed except for those deemed as essential services and domestic travel is limited.
7. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

8. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
9. We continue to regularly review border restrictions and advice around any changes required. Border advice has been updated and is available on the Ministry of Health website. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>
10. The Ministry of Health is continuing to actively track and monitor COVID-19 cases in New Zealand.
11. Close contacts of cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.

OUTBREAK SITUATION

12. As at 0900 hours on **29 March** 2020 there are **514** combined confirmed and probable cases. There are **63** combined new confirmed and probable cases reported in the last 24 hours. See Figure 1 for the epidemic curve and Figure 2 for DHB breakdown.
13. As at 0900 hours on 29 March 2020 there are **56** recovered cases.

Figure 1: COVID-19 Epidemic Curve

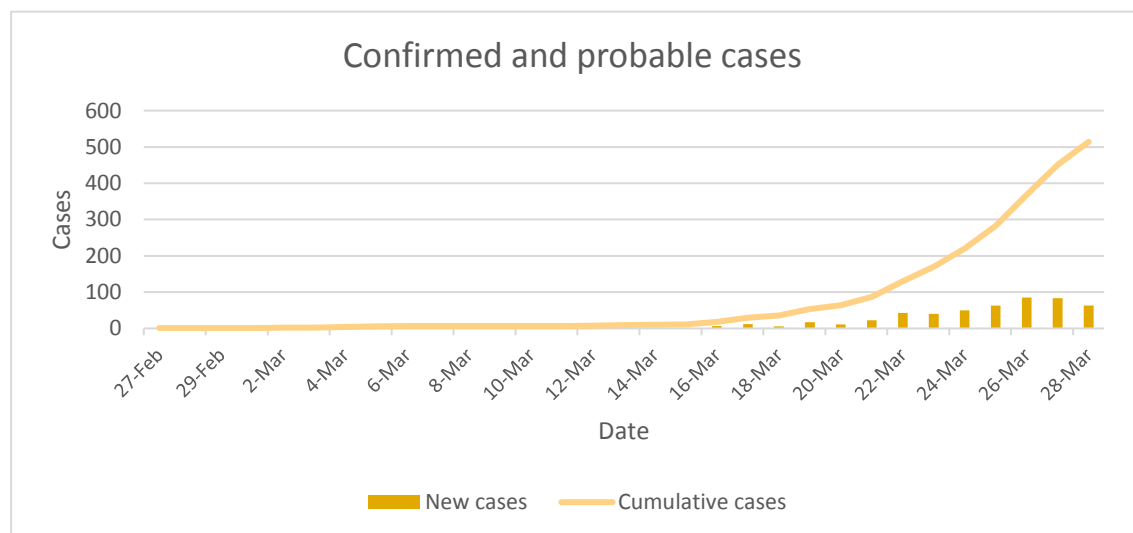
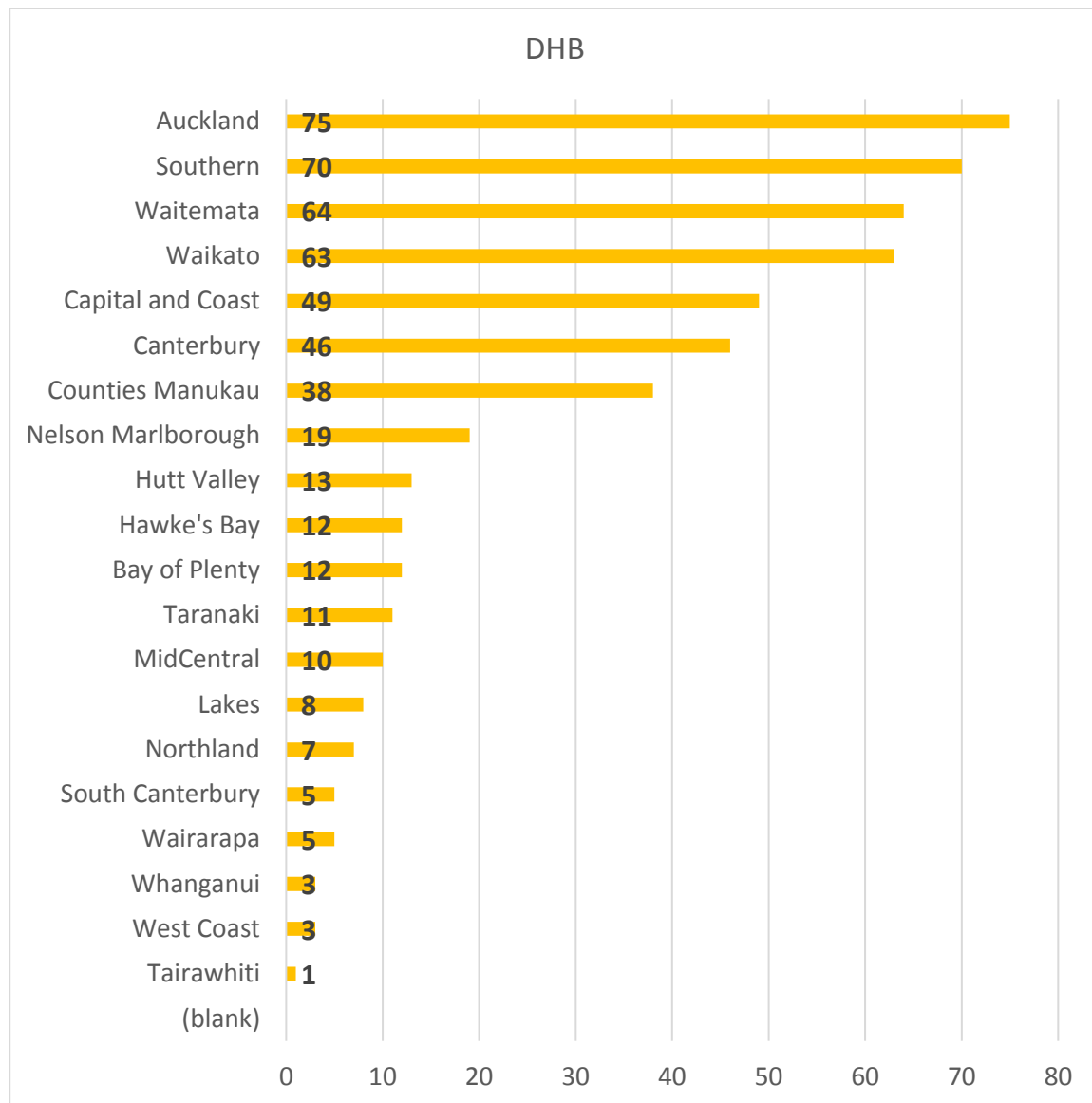


Figure 2: COVID-19 confirmed and probable cases by DHB



New Zealand health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
15. ESR, Canterbury Health Laboratories (CHL), LabPLUS and **Middlemore hospital** in Auckland, Waikato hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
16. See Figures 3 and 4 below for further information on laboratory capacity and the number of people tested.

Figure 3: Daily capacity of labs to test for covid-19, as at 29 March 2020

On 29 March 2020, the capacity is 3,180 tests per day.

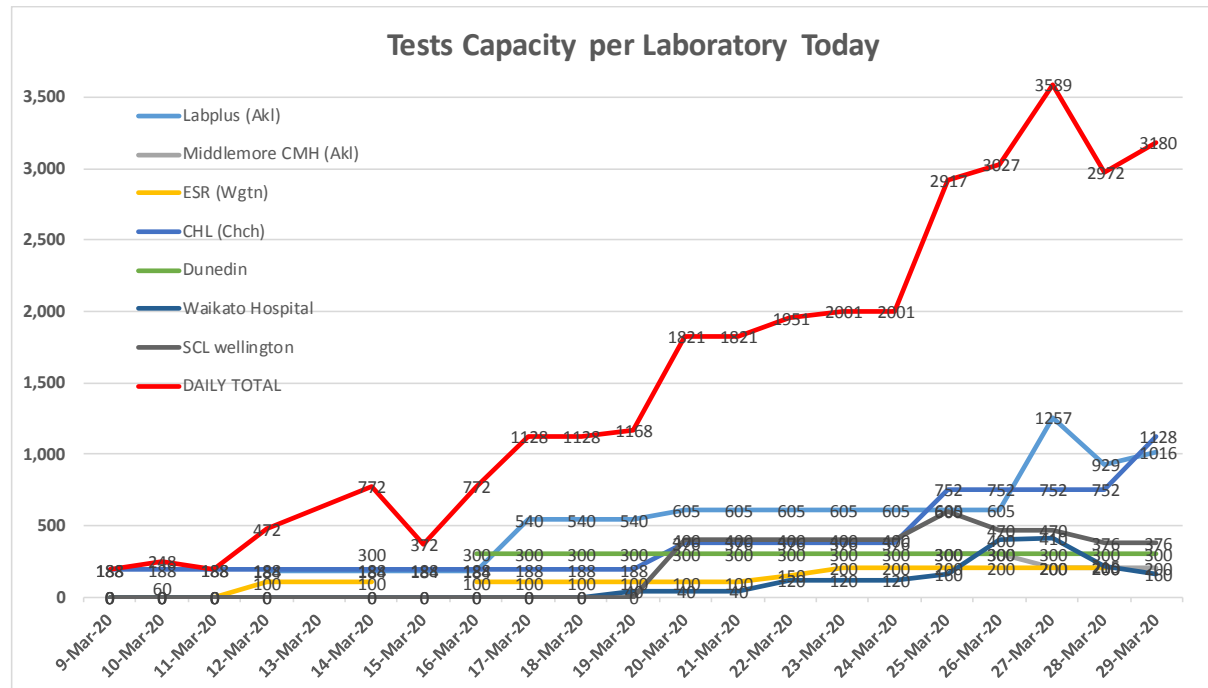
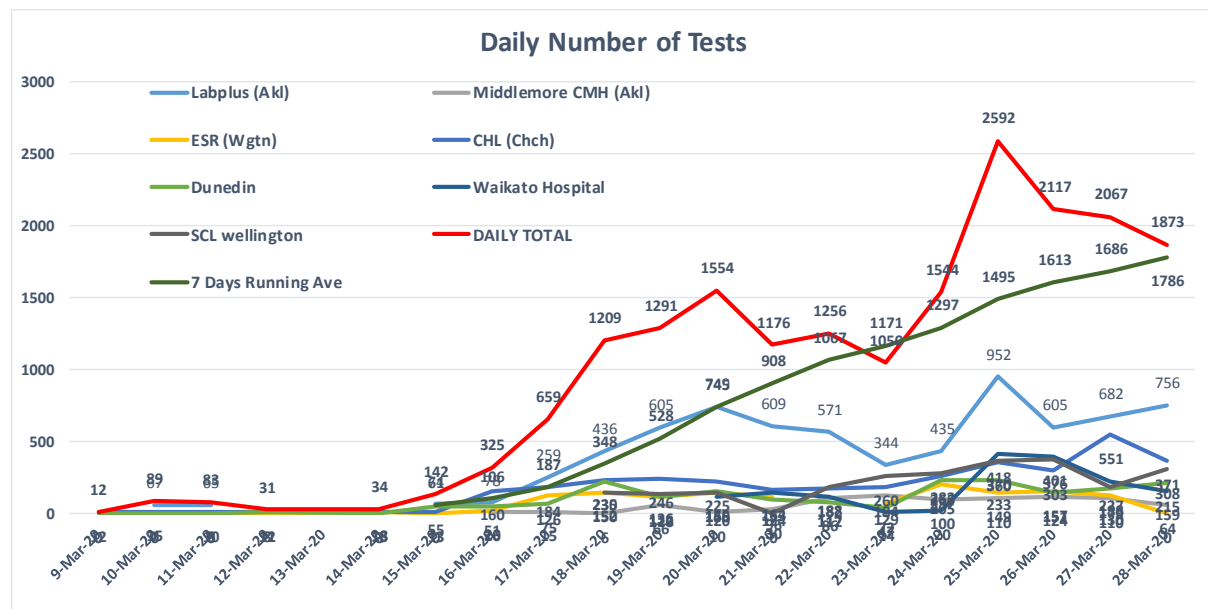


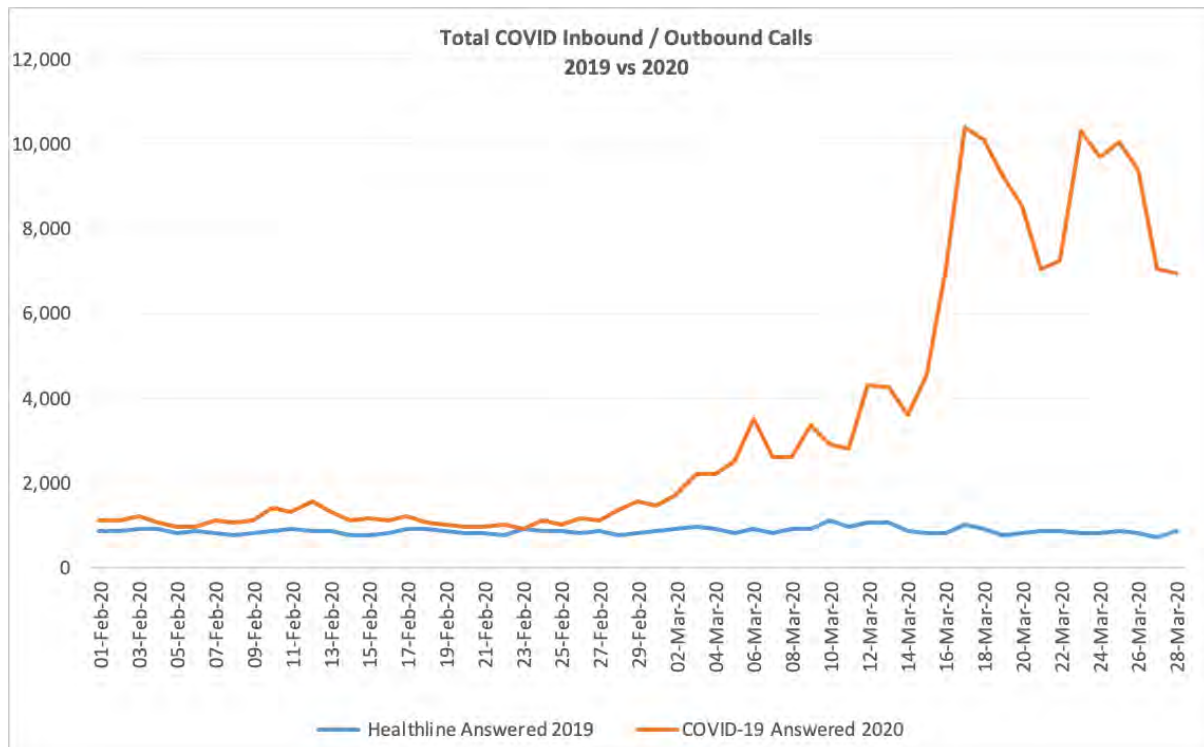
Figure 4: COVID-19 tests daily and cumulative totals, as at 28 March 2020

On 28 March 2020, 1,873 tests were done.

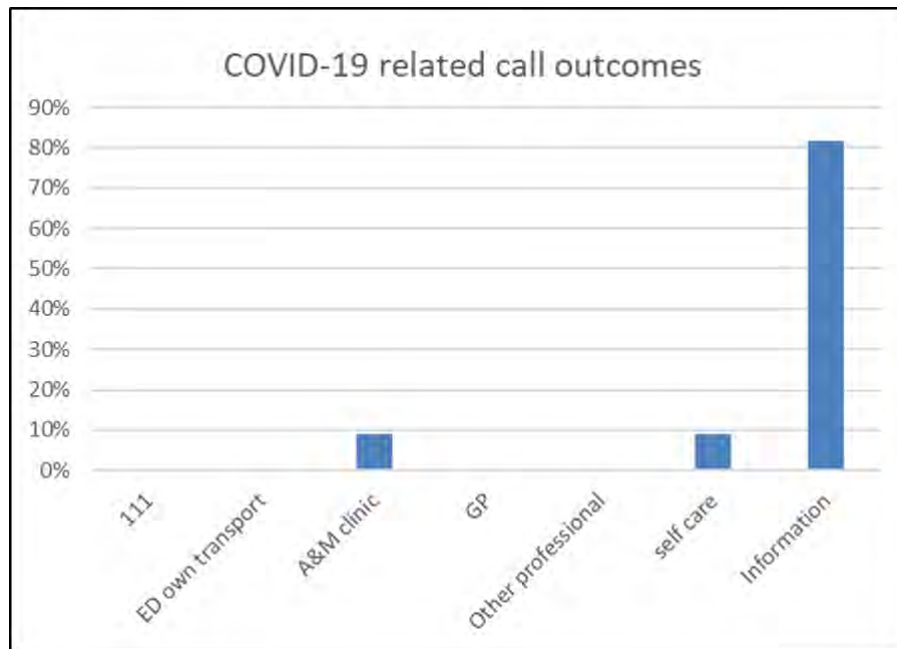


National Telehealth Service update

17. On **28 March** 2020 in total **6,978** calls were answered/outbound calls made (compared to circa 800 on the same day last year).
18. In the past 24 hours clinical call lengths have stabilised. Wait times continue to trend down. On **28 March** 2020 there were significant spikes in demand in short periods and the call arrival patterns did not follow our expected resourcing profile. The graph below compares call volumes today to the same day last year.



19. On **28 March** 2020 the clinical trends seen include:
 - **18%** of callers were experiencing cold or flu-like symptoms
 - **18%** were regarding people who had been outside NZ in the previous 4 weeks
 - **91%** received self-care advice or information



Community Based Assessment Centres (CBAC)

20. As at 0900 hours on **29 March** 2020 there are **43** CBACs active and **51** designated practices/testing stations.

Contact Tracing – National Close Contact Service (NCCS)

21. Since 24 March 2020, the number of contacts traced (i.e. resolved) is **1,927**.

New Zealand border response

22. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. The measures will be reviewed by 30 March 2020.

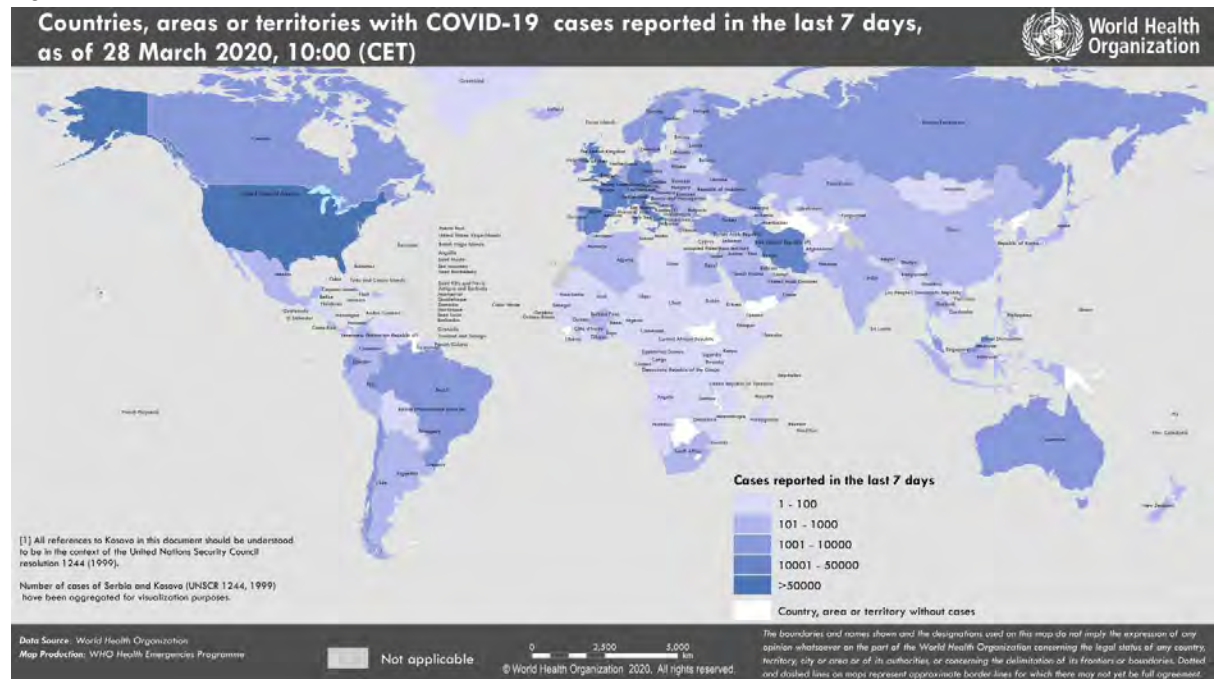
23. **The Board of Airline Representatives of New Zealand provides daily estimates of passenger numbers arriving and leaving New Zealand. As at 0800 on Sunday 29 March 2020, 32 flights are due to arrive at Auckland airport. The eighteen flights for which BARNZ have passenger numbers will be carrying 450 passengers. No flights are due at other international airports.** Everyone permitted to enter New Zealand is screened on arrival. Passengers are disembarked in small groups from their aircraft and met by Government officials at the gate. Officials discuss passengers' self-isolation and transport arrangements, answer questions, and provide assistance. The Ministry of Health website includes the requirements for travel and isolation at <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel->

24. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. These are for persons with no suitable transport or accommodation for self-isolation identified. Over 3300 rooms and 1400 campervans are available. In Auckland one isolation facility and **eight** quarantine facilities have been stood up and a further **ten** are available. In Hamilton, one quarantine facility is available but not being used. In Wellington one isolation facility and one quarantine facility have been stood up and a further seven are available. In Christchurch one isolation facility and two quarantine facilities have been stood up and a further four are available. In Queenstown work is underway to establish facilities. Flights from Auckland to other New Zealand cities are being considered, to transport groups of travellers directly from their international flight to points where they can travel home to go into self-isolation.
25. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. **Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.**
26. Ministers with Powers to Act approved two transit windows to assist repatriation of foreign nationals. Third country nationals flying to their home country were able to transit in Auckland International Airport from 1000hrs 23 March 2020 to 1500hrs 24 March 2020 (NZT). The second will allow certain categories of travellers to transit New Zealand for up to one week (i.e. up to and including 29 March 2020).

Global

27. As reported by the WHO on **28 March** 2020, globally there have been **62,514** confirmed new cases (now **571,678** confirmed cases in total) and **3,159** new deaths reported (**26,494** confirmed deaths in total). Based on the number of reported cases globally, the case fatality rate is approximately 4.6 percent.
28. As reported by WHO on **28 March** 2020, **no new** countries, territories or areas have reported confirmed cases. See Figure 5 below for further information from WHO. To see the numbers by international location, see:
<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 5: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.
 - The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on

health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.

- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1300 hrs on 30 March 2020.**

Prepared by: Maria Turley and Li-Chia Yeh, NHCC Intelligence

Approved by: Emma Prestige, NHCC Response Manager



SITREP 71
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hours 30 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours 30 March 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. As at 0900 hours on 30 March 2020 there are 589 combined confirmed and probable cases. There are 76 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. New Zealand recorded its first death linked to COVID-19 on 29 March 2020.
4. As at 0900 hours on 30 March 2020 there are 63 recovered cases.
5. Additional border measures came into effect at 0200 hours 26 March 2020. Only New Zealand residents and citizens (and their children and partners) are still permitted to enter New Zealand.

KEY MESSAGES

6. New Zealand has an alert system specifically for COVID-19. As at 2359 hours on 25 March 2020 we are on “Level 4: Eliminate.” As part of the measures being taken to contain COVID-19, New Zealanders have been instructed to stay at home, educational facilities have been closed, businesses are closed except for those deemed as essential services and domestic travel is limited.
7. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

8. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
9. We continue to regularly review border restrictions and advice around any changes required. Border advice has been updated and is available on the Ministry of Health website. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>
10. The Ministry of Health is continuing to actively track and monitor COVID-19 cases in New Zealand.
11. Close contacts of cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.

OUTBREAK SITUATION

12. As at 0900 hours on **30 March** 2020 there are **589** combined confirmed and probable cases. There are **76** combined new confirmed and probable cases reported in the last 24 hours. See Figure 1 for the epidemic curve and Figure 2 for DHB breakdown.
13. As at 0900 hours on **30 March** 2020 there are **63** recovered cases.

Figure 1: COVID-19 Epidemic Curve

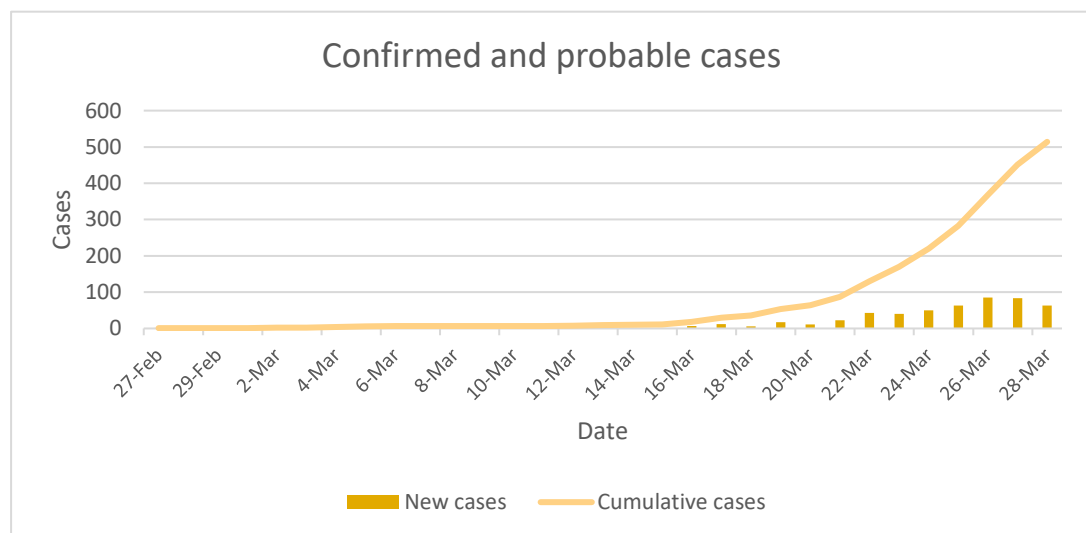
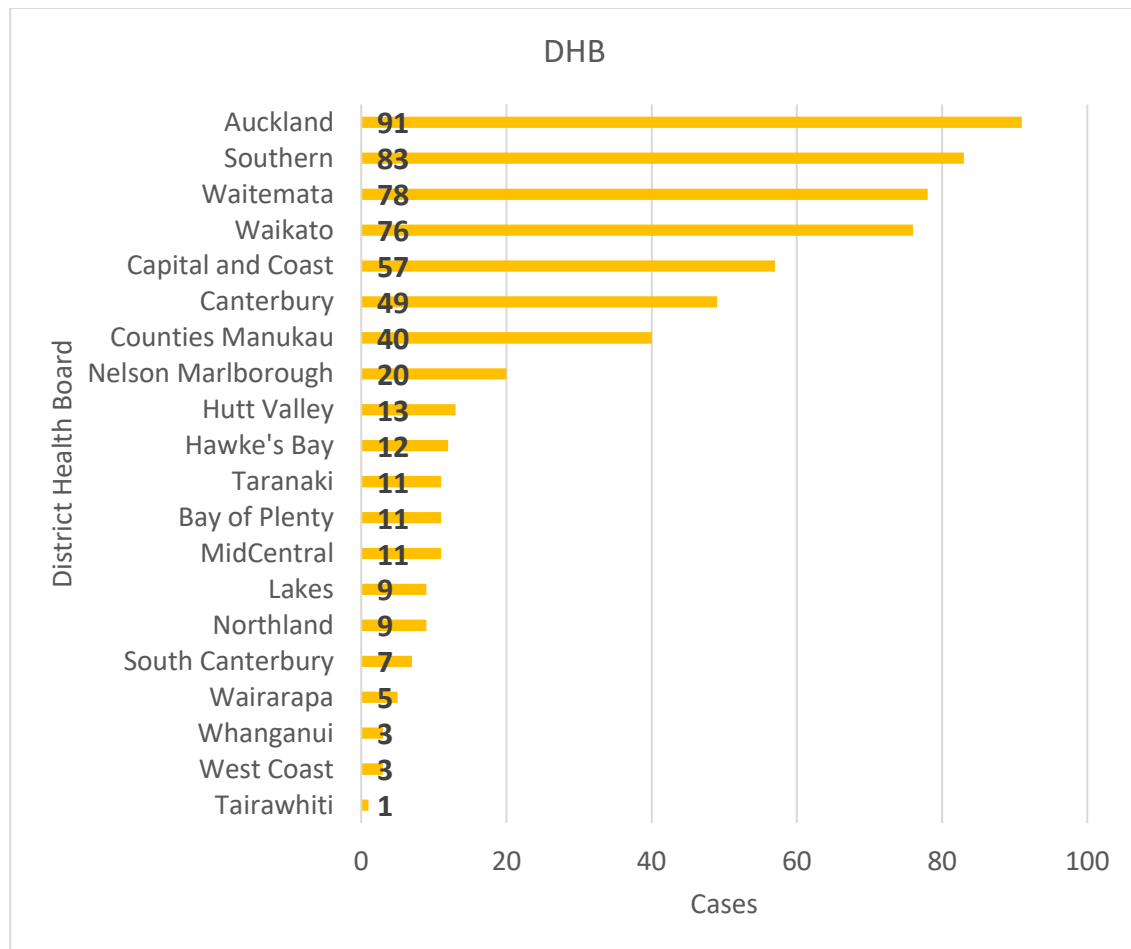


Figure 2: COVID-19 confirmed and probable cases by DHB



New Zealand health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
15. ESR, Canterbury Health Laboratories (CHL), LabPLUS and Middlemore hospital in Auckland, Waikato hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
16. See Figures 3 and 4 below for further information on laboratory capacity and the number of people tested.

Figure 3: Daily capacity of labs to test for COVID-19, as at 29 March 2020

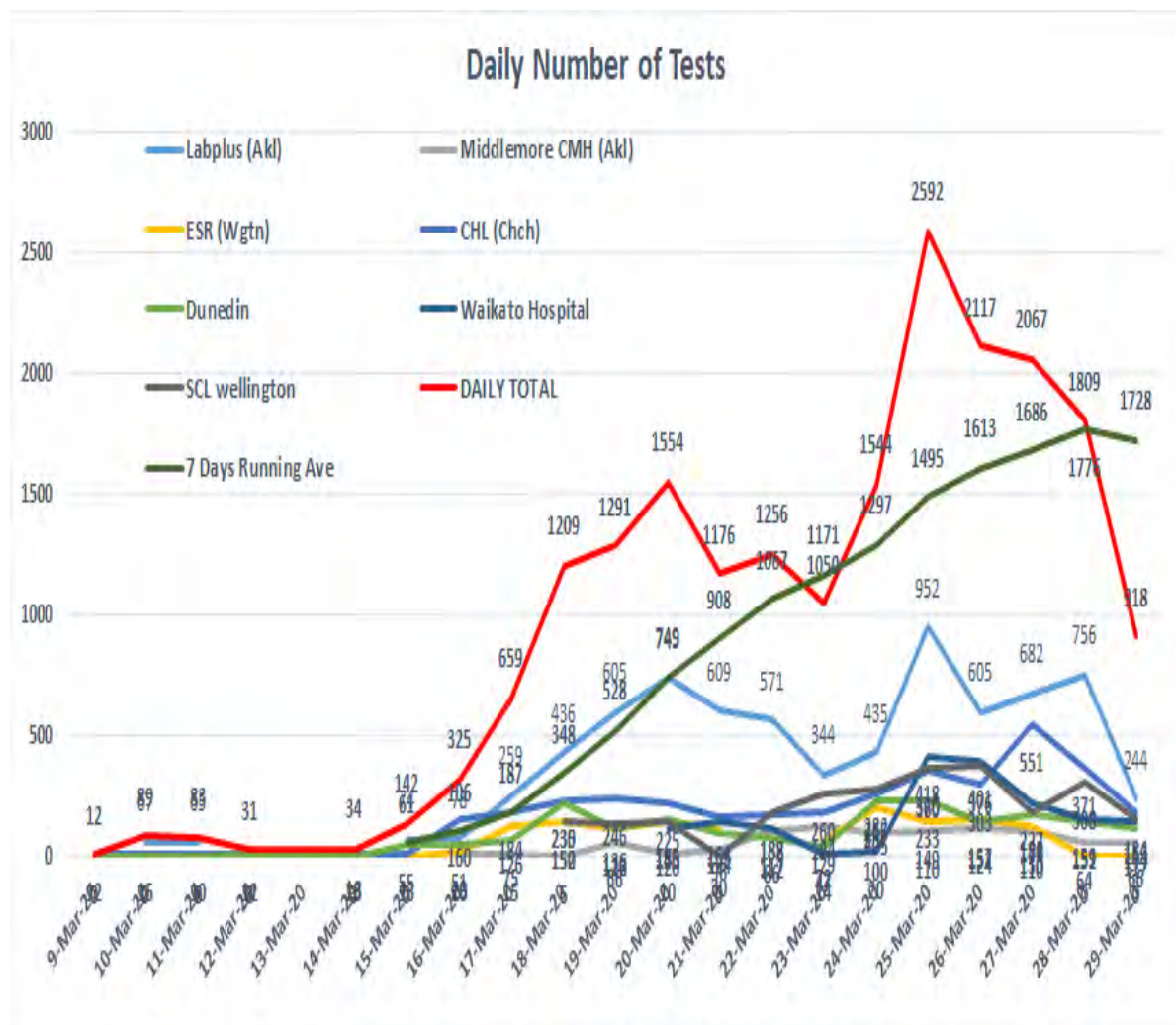
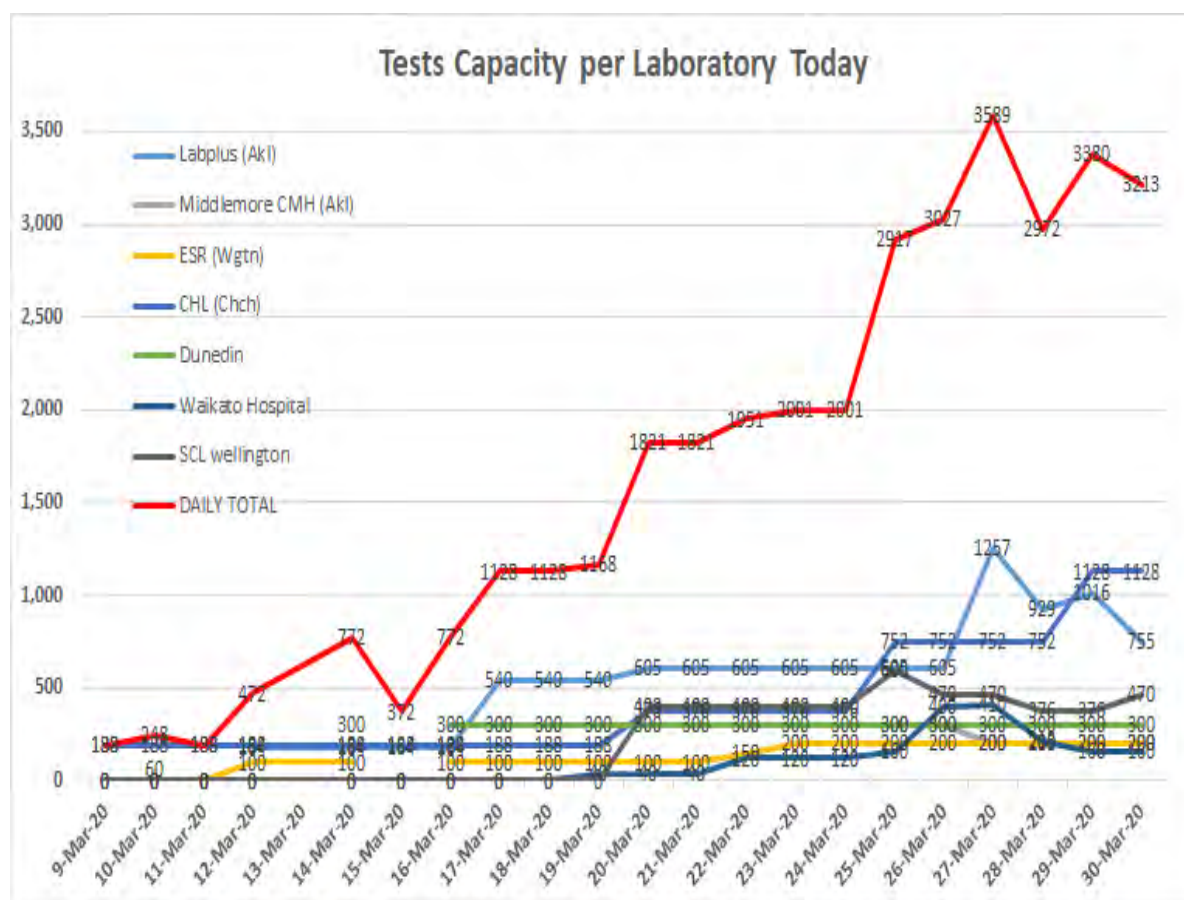
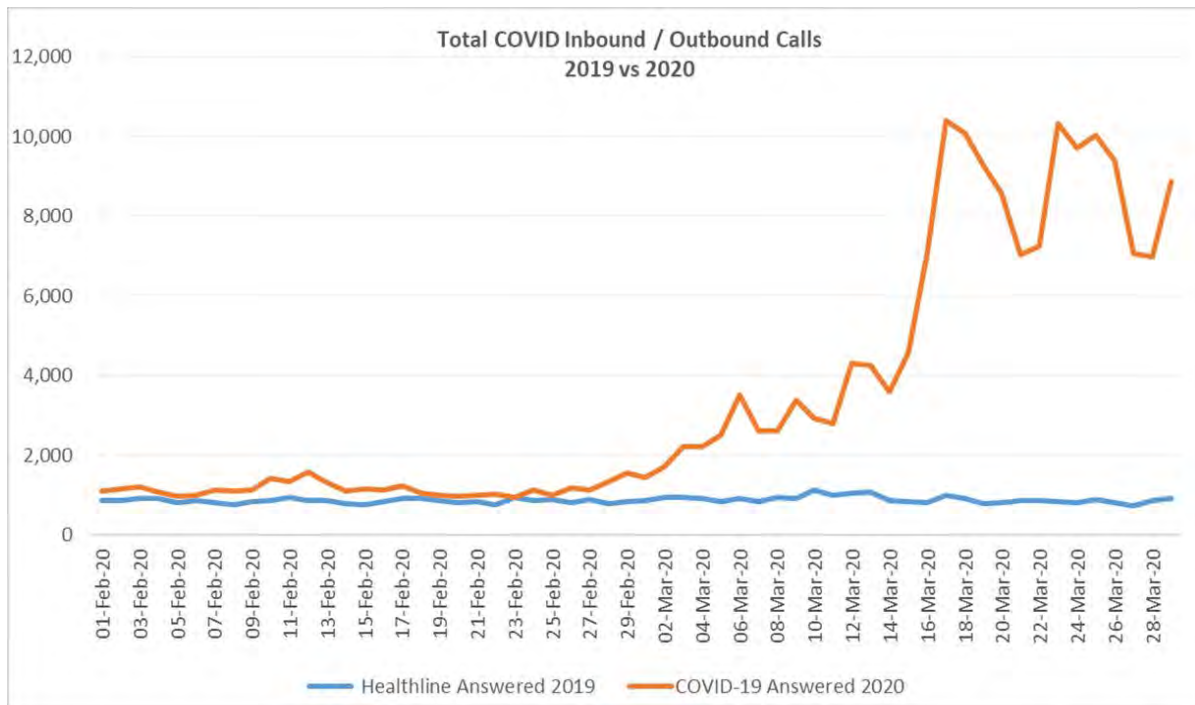


Figure 4: COVID-19 tests daily and cumulative totals, as at 29 March 2020



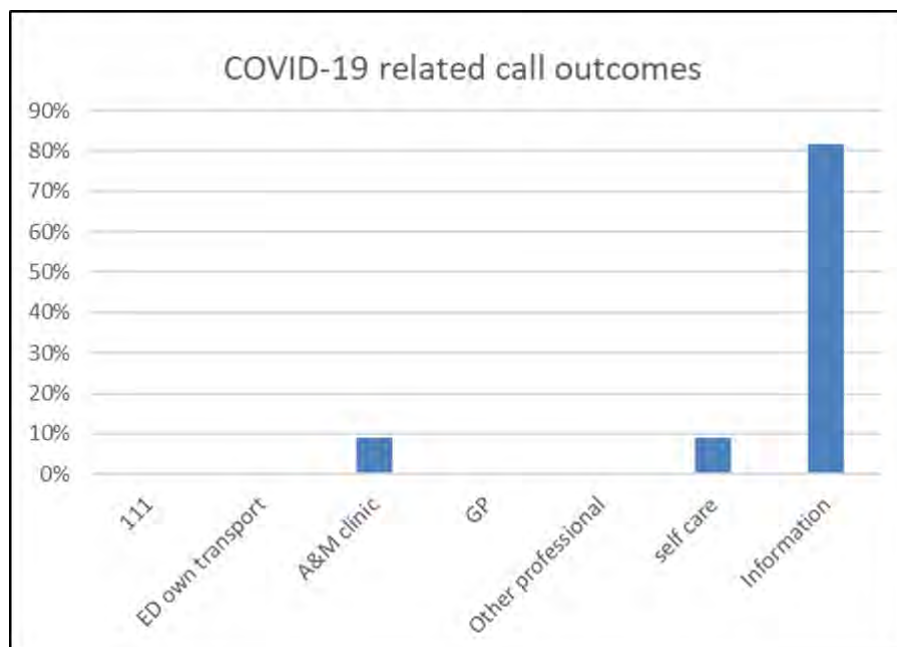
National Telehealth Service update

17. On 29 March 2020 in total 8,870 calls were answered/outbound calls made (compared to circa 911 on the same day last year).
18. In the past 24 hours clinical call lengths have stabilised. Wait times continue to trend down. On 29 March 2020 there were significant spikes in demand in short periods and the call arrival patterns did not follow our expected resourcing profile. The graph below compares call volumes today to the same day last year.



19. On 29 March 2020 the clinical trends seen include:

- 12.5% of callers were experiencing cold or flu-like symptoms
- 25% were regarding people who had been outside NZ in the previous 4 weeks
- 63% received self-care advice or information.



Community Based Assessment Centres (CBAC)

20. As at 0900 hours on **30 March** 2020 there are **45** CBACs active and **52** designated practices/testing stations.

Contact Tracing — National Close Contact Service (NCCS)

21. Since 24 March 2020, the number of contacts traced (i.e. resolved) is **2,449**.

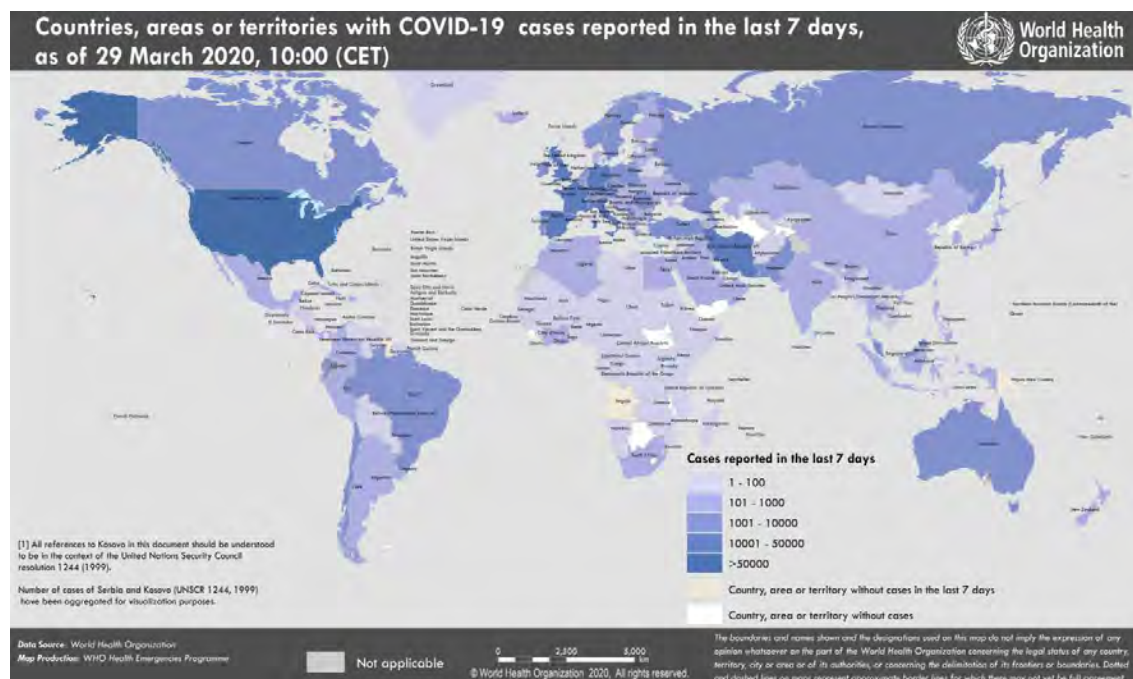
New Zealand border response

22. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. The measures will be reviewed by 30 March 2020.
23. **New Zealand Customs data showed 386 travellers entered New Zealand on 29 March 2020.** Everyone permitted to enter New Zealand is screened on arrival. Passengers are disembarked in small groups from their aircraft and met by Government officials at the gate. Officials discuss passengers' self-isolation and transport arrangements, answer questions, and provide assistance. The Ministry of Health website includes the requirements for travel and isolation at <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>
24. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. These are for persons with no suitable transport or accommodation for self-isolation identified. Over 3300 rooms and 1400 campervans are available. Flights from Auckland to other New Zealand cities are being considered, to transport groups of travellers directly from their international flight to points where they can travel home to go into self-isolation.
25. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.

Global

26. As reported by the WHO on **29 March** 2020, globally there have been **63,159** confirmed new cases (now **634,835** confirmed cases in total) and **3,464** new deaths reported (**29,957** confirmed deaths in total). Based on the number of reported cases globally, the case fatality rate is approximately **4.7** percent.
27. As reported by WHO on **29 March** 2020, **one** new country, territory or area (**Northern Marianas**) reported confirmed cases. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 5: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.

- The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.
- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator – Jane Kelley	NHCC_NationalCoordinator@health.govt.nz
Response Manager	NHCC_ResponseManager@health.govt.nz
Operations (Border) 04 816 3431	NHCC_OpsBorder@health.govt.nz
Operations 04 816 3484	NHCC_Operations@health.govt.nz
Logistics 04 816 2378	NHCC_InternalLog@health.govt.nz
PIM 04 816 3993	NHCC_PIM@health.govt.nz
Intelligence 04 816 3909	NHCC_Intelligence@health.govt.nz
Planning 04 816 3915	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1300 hours on 31 March 2020.**

Prepared by: Martin Kennedy, NHCC Intelligence

Approved by: Bruce Mackay, NHCC Response Manager



SITREP 72
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hours 31 March 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours on 31 March 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here:
<https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 31 March 2020 there are 647 combined confirmed and probable cases. There are 58 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website:
<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. New Zealand recorded its first death linked to COVID-19 on 29 March 2020.
4. As at 0900 hours on 31 March 2020 there are 74 recovered cases (up from 63 on 30 March 2020).
5. Additional border measures came into effect at 0200 hours 26 March 2020. Only New Zealand residents and citizens (and their children and partners) are still permitted to enter New Zealand.

KEY MESSAGES

6. New Zealand has an alert system specifically for COVID-19. As at 2359 hours on 25 March 2020 we are on “Level 4: Eliminate.” As part of the measures being taken to contain COVID-19, New Zealanders have been instructed to stay at home, educational facilities have been closed, businesses are closed except for those deemed as essential services and domestic travel is limited.
7. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

8. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
9. We continue to regularly review border restrictions and advice around any changes required. Border advice has been updated and is available on the Ministry of Health website. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>
10. The Ministry of Health is continuing to actively track and monitor COVID-19 cases in New Zealand.
11. Close contacts of cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.

OUTBREAK SITUATION

12. As at 0900 hours on **31 March** 2020 there are **647** combined confirmed and probable cases. There are **58** combined new confirmed and probable cases reported in the last 24 hours. See Figure 1 for the epidemic curve and Figure 2 for DHB breakdown.
13. As at 0900 hours on **31 March** 2020 there are **74** recovered cases.

Figure 1: COVID-19 Epidemic Curve

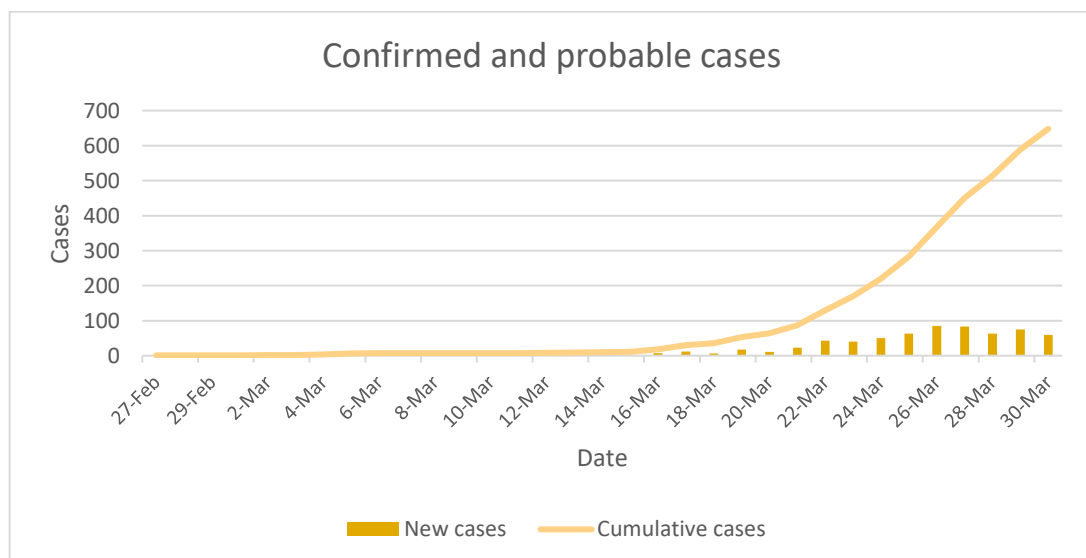
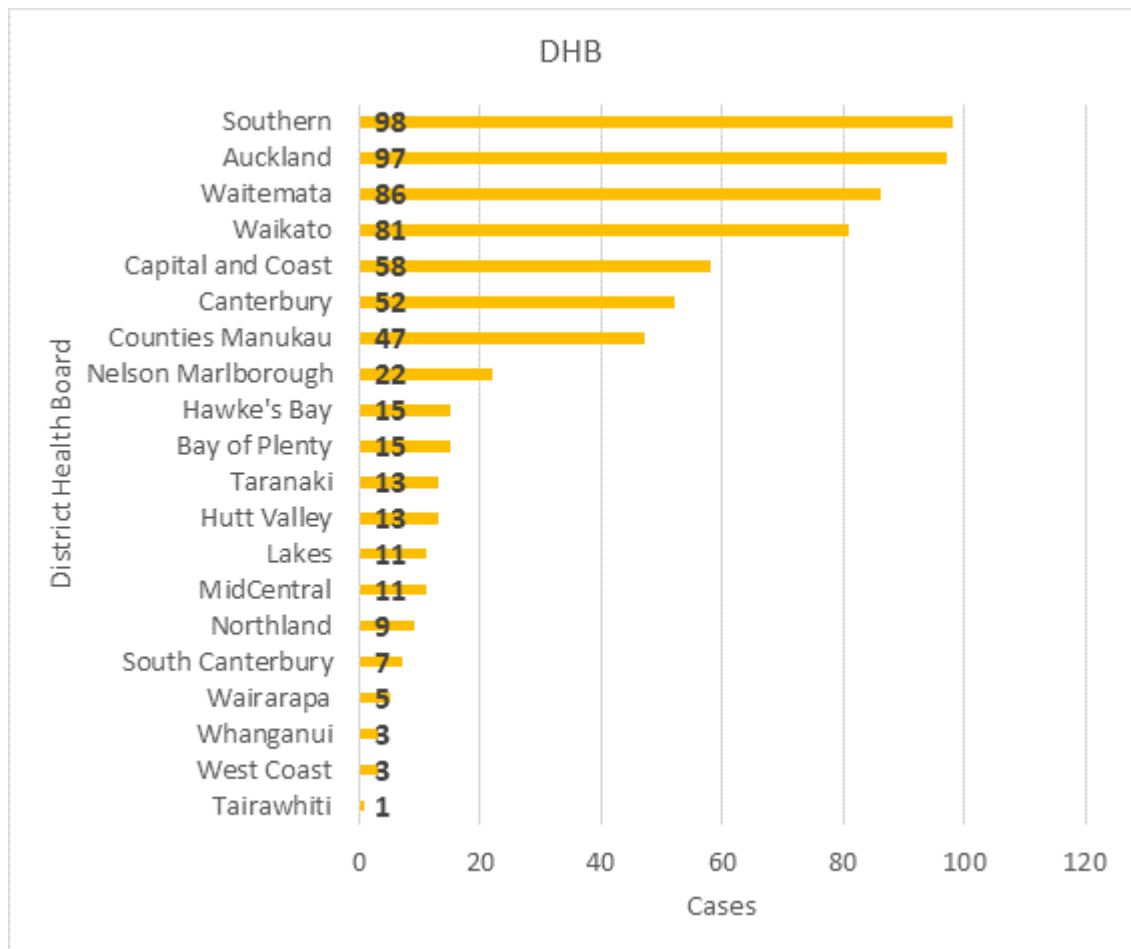


Figure 2: COVID-19 confirmed and probable cases by DHB



New Zealand health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
15. ESR, Canterbury Health Laboratories (CHL), LabPLUS and Middlemore hospital in Auckland, Waikato hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
16. See Figures 3 and 4 below for further information on laboratory capacity and the number of people tested.

Figure 3: COVID-19 tests done each day, and seven day running average, as at 30 March 2020

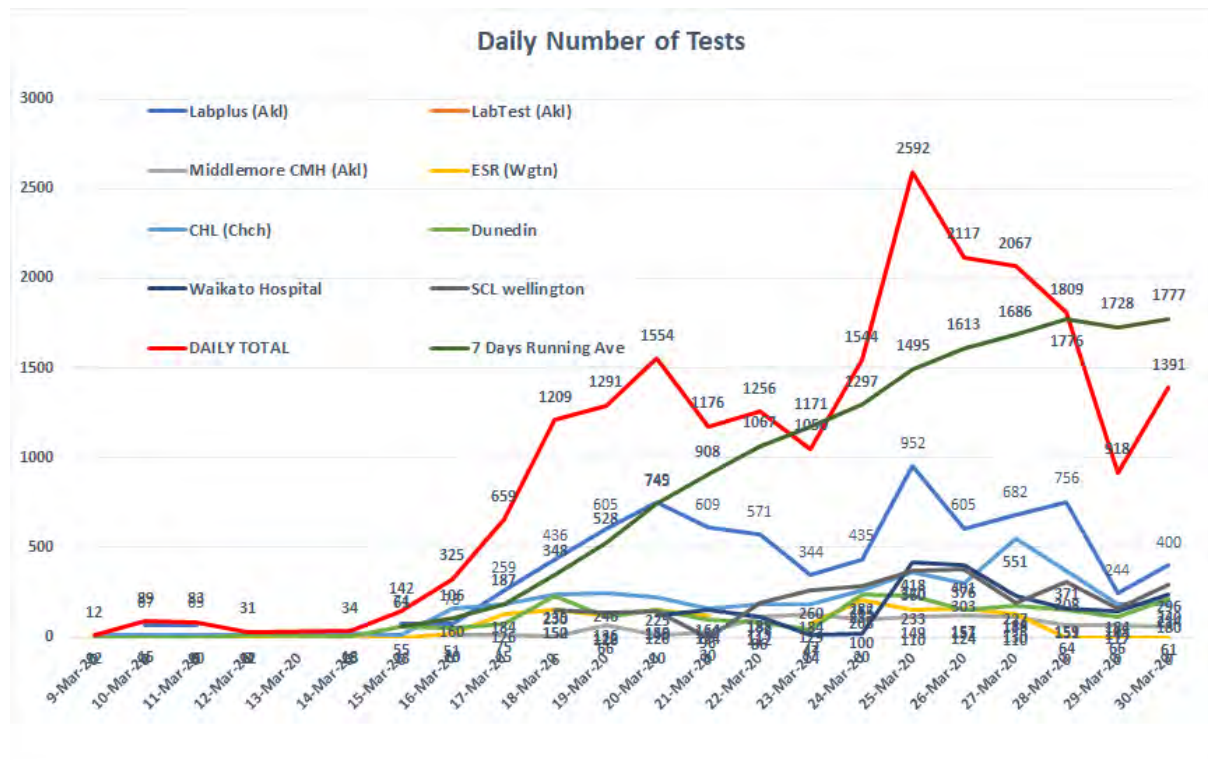
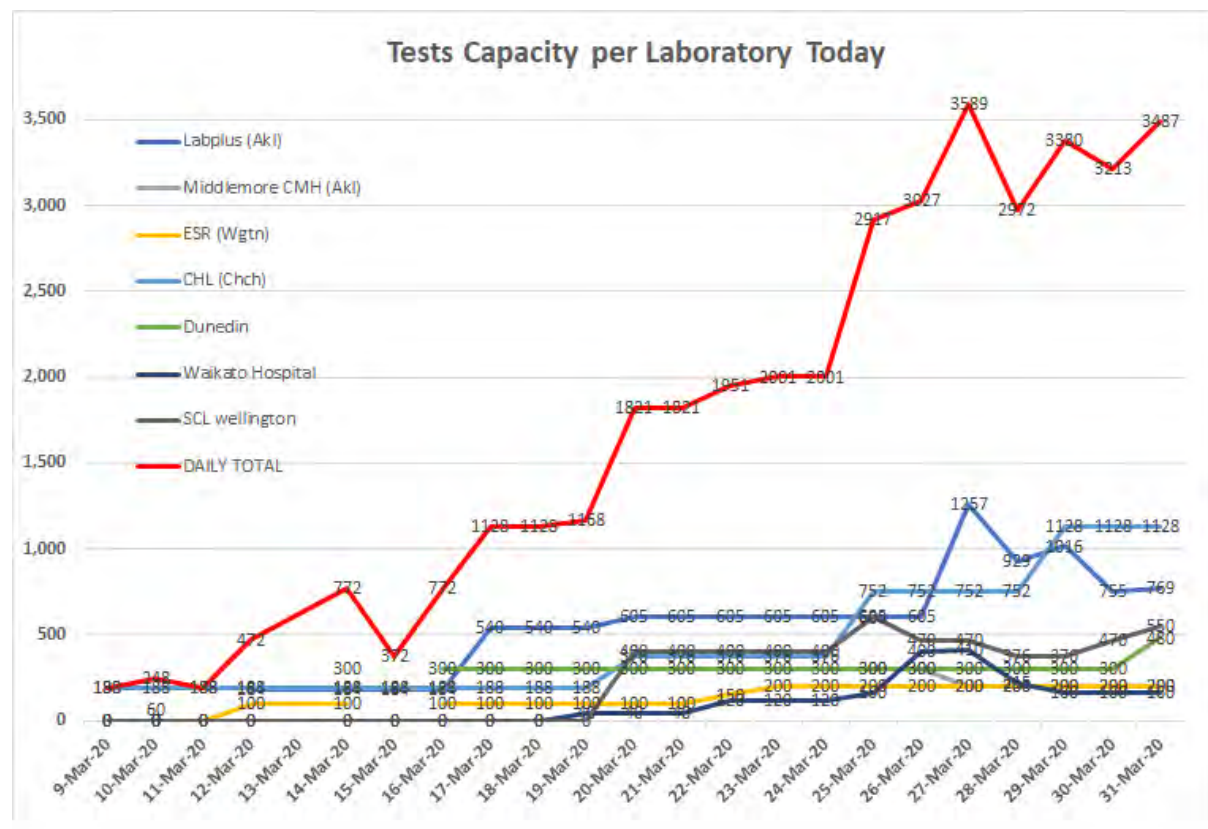
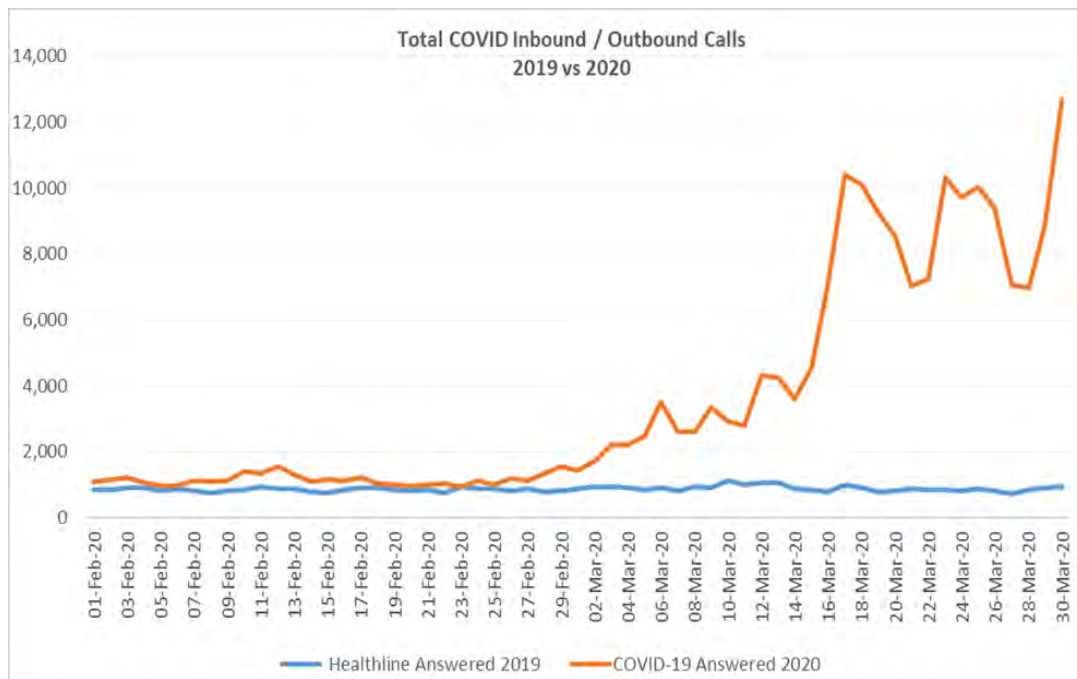


Figure 4: Daily capacity of labs to test for COVID-19, as at 31 March 2020

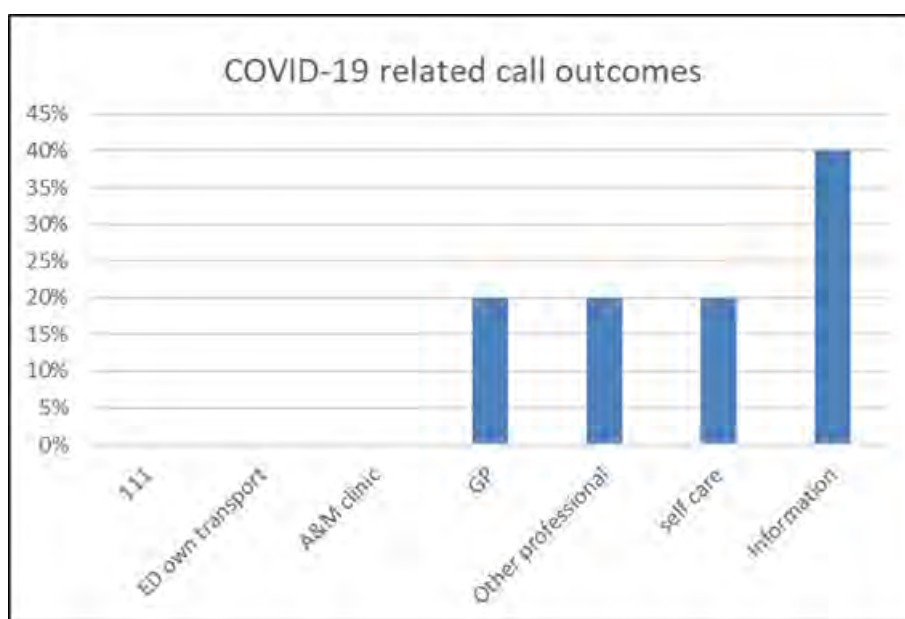


National Telehealth Service update

17. On **30 March** 2020 in total **12,687** calls were answered/outbound calls made (compared to circa 938 on the same day last year).
18. Note the underlying in-bound calls are similar to the day before and the increase of about 2,500 contacts is due to increased out-bound calls to check on self isolation. The graph below compares call volumes today to the same day last year.



19. On **30 March** 2020 the clinical trends seen include:
 - **40%** of callers were experiencing cold or flu-like symptoms
 - **20%** were regarding people who had been outside NZ in the previous 4 weeks
 - **60%** received self-care advice or information.



Community Based Assessment Centres (CBAC)

20. As at 0900 hours on 31 March 2020 there are 49 CBACs active and 50 designated practices/testing stations.

Contact Tracing — National Close Contact Service (NCCS)

21. Since 24 March 2020, the number of contacts traced (i.e. resolved) is 2,964.

New Zealand border response

22. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
23. New Zealand Customs data showed 378 travellers entered New Zealand on 30 March 2020. Everyone permitted to enter New Zealand is screened on arrival. Passengers are disembarked in small groups from their aircraft and met by Government officials at the gate. Officials discuss passengers' self-isolation and transport arrangements, answer questions, and provide assistance. The Ministry of Health website includes the requirements for travel and isolation at <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>.
24. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. These are for persons with no suitable transport or accommodation for self-isolation identified. Over 3300 rooms and 1400 campervans are available. Flights from Auckland to other New Zealand cities are commencing today for safely relocating travellers to points where they can travel home to go into self-isolation.
25. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.

Global

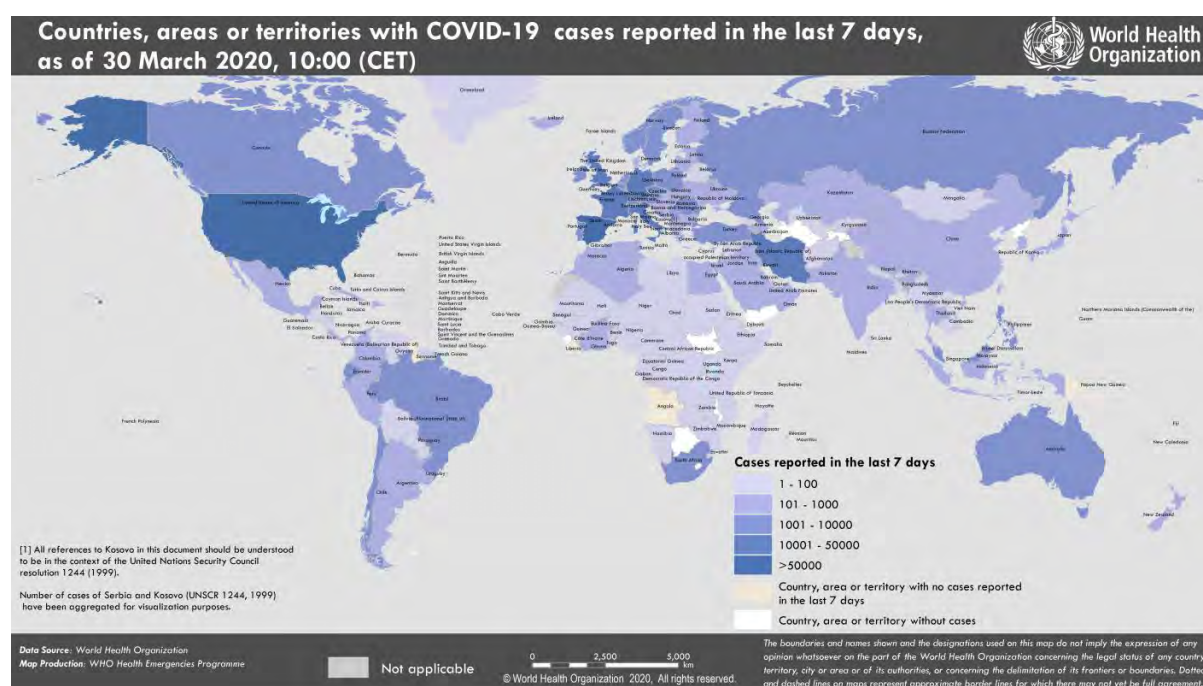
22. As reported by the WHO on 30 March 2020, globally there have been 58,411 confirmed new cases (now 693,224 confirmed cases in total) and 3,215 new

deaths reported (33,106 confirmed deaths in total). Based on the number of reported cases globally, the case fatality rate is approximately 4.7 percent.

23. As reported by WHO on 30 March 2020, no new country, territory or area reported confirmed cases. See Figure 5 below for further information from WHO. To see the numbers by international location, see:

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 5: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.

- The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.
- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
PIM	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1300 hours on 1 April 2020.**

Prepared by: Martin Kennedy, NHCC Intelligence

Approved by: Bruce Mackay, NHCC Response Manager