

## **Briefing**

# Interim public health advice regarding Alert Level restrictions in Auckland as at 10 March 2021

Date due to MO:	10 March 2021	Action required by:	10 March 2021
Security level:	IN CONFIDENCE	Health Report number:	20210574
То:	Hon Chris Hipkins, Ministo	er COVID-19 Response	
Copy to:	Rt Hon Jacinda Ardern, Pr	ime Minister	
	Hon Andrew Little, Minist	er of Health	
	Hon Kris Faafoi, Minister o	of Justice	

### **Contact for telephone discussion**

Name	Position	Telephone
Dr Ashley Bloomfield	Director-General of Health	s 9(2)(a)
Maree Roberts	Deputy Director-General, System Strategy and Policy	s 9(2)(a)

### Minister's office to complete:

☐ Approved	☐ Decline	□ Noted
□ Needs change	☐ Seen	$\square$ Overtaken by events
$\square$ See Minister's Notes	☐ Withdrawn	
Comment:		

# Interim public health advice regarding Alert Level restrictions in Auckland as at 10 March 2021

Security level:	IN CONFIDENCE	Date:	10 March 2021	.0.
To:	Hon Chris Hipkins, Minister COVID-19 Response			

#### **Purpose of report**

- 1. This report provides my interim advice, as at 3pm on 10 March 2021, on whether and what kind of Alert Level restrictions are needed beyond 6am on 13 March 2021 to contain the current outbreak in South Auckland.
- 2. Detailed case investigation, contact tracing and testing information will be provided to you separately.

#### **Summary**

- 3. In response to a further case of COVID-19 identified in Auckland on 27 February 2021 with an unknown source of infection and concerns of potentially significant community transmission, Cabinet agreed to move the Auckland region to Alert Level 3 and move the rest of New Zealand to Alert Level 2 from 6 am on 1 March 2021, for a period of 7 days [CAB-21-MIN-0041].
- 4. Cabinet decided on 5 March 2021 to move Auckland to Alert Level 2, and the rest of New Zealand to Alert Level 1. This came into effect from 6am on Sunday 7 March 2021.
- 5. Cabinet is meeting on 11 March 2021 to consider the current situation and decide whether to maintain or change Alert Levels. As the decision depends on the most recent testing results, a small proportion of which are not yet available, I will provide my final advice in a further written briefing to you on 11 March, followed by an oral update to Cabinet, which will contain the most recent information.

#### Auckland February cluster

- 6. Prior to the Cabinet decision on 5 March, there were some test results outstanding from casual plus contacts who may have been exposed at the gym on 26 February 2021. I can confirm that all of those contacts who require testing have now been tested and returned negative tests. One person refused the test but is in self-isolation and is being supported with an individual care plan.
- 7. Day 12 tests are due for 15 close or close plus contacts over the next few days and are being followed up. All results are expected by Friday 12 March. The outstanding contacts relate to the Kmart exposure event and are all in contact and are being managed by the Ministry of

- Health and Auckland Regional Public Health Service (ARPHS). I do not consider that it is necessary for all close contacts to return their day 12 test result in order for Alert Level restrictions to be lifted, as these contacts are already self-isolating.
- 8. 99 percent of all contacts in the February cluster have now fully completed their testing and isolation requirements. The remaining contacts have been closed through a public health determination by the Director of Public Health.
- 9. Regular wastewater testing continues in Auckland. In the most recent testing reported on Friday 5 March the only site that showed positive results on 2, 3, 4 and 5 March were from the site near the Jetpark managed quarantine facility.

#### Air New Zealand case

- 10. An Air New Zealand crew member returned a positive test on 7 March 2021. The crew member regularly works on a route between Auckland and Japan. They followed all the COVID-19 related protocols required of air crew.
- 11. Officials consider that the case was most likely infected while in Japan as the genome sequencing shows no relation to the February community outbreak. As the case returned to Auckland while under Alert Level 3 restrictions, exposure opportunities, both for infection and for spreading the virus, were limited. Genomic sequencing shows that the case does not have one of the highly transmissible variants. Further investigations are underway to rule out the possibility that the case was infected in New Zealand.
- 12. All evidence is pointing to infection offshore and given that there is no evidence of transmission to close contacts, I consider this case to be low risk. I will update you with further information tomorrow.

#### Director-General's Advice on Alert Levels

- 13. I have continued to review the application of control measures within the current Alert Level framework in order to ensure that settings are proportionate to public health risk and continue to respond effectively to the current situation.
- 14. The purpose of moving Auckland to Alert Level 2 and the rest of the country to Alert Level 1 was to enable remaining test results from close and casual plus contacts to be processed and any possible, yet undetected, cases to be identified. Furthermore, remaining at Alert Level 2 reminds people of the need to remain vigilant, which also supports high levels of testing, and prevents large gatherings of people.
- 15. Since we moved into Alert Level 2 and 1, we have been able to conduct further testing, which has provided us a high level of confidence that no undetected transmission has occurred and wastewater testing across the country has provided additional assurance.
- 16. Based on the available evidence at 3pm 10 March 2021 my interim advice is that we should move Auckland to Alert Level 1 from 6am on Sunday 14 March and keep the rest of New Zealand at Alert Level 1. This will allow the remaining day 12 test results to be returned.
- 17. The current outbreak appears to be well contained given the data we have so far, especially the negative results for all close contacts, while noting there is a small number of outstanding day 12 tests from close contacts which will be available on Friday.

- 18. My interim advice in relation to the Vaccination Programme is that officials continue to progress implementation as there is currently no evidence of community transmission (Scenario 1).
- 19. I will review this advice and brief you on Thursday 11 March 2021.

#### Recommendations

I recommend you:

- a) Note my interim recommendation is that you move Auckland to Alert Level 1 Yes/No from 6am on Sunday 14 March.
- b) **Note** I will provide my final advice in a further briefing to you and an oral **Yes/No** update to Cabinet on 11 March 2021, which will be informed by the most up to date information.
- c) **Note** that the Ministry of Health will continue to review the situation and our **Yes/No** advice on the basis of ongoing case investigations and testing.
- d) **Note** that officials continue to progress implementation of the COVID-19 **Yes/No** Vaccination Programme as there is currently no evidence of community transmission and contingency planning is underway should the transmission situation change.
- e) Note that I will update this advice on Thursday 11 March Yes/No
- f) **Agree** to forward this advice to the Prime Minister, the Minister of Justice and **Yes/No** the Minister of Health.

Dr Ashley Bloomfield

**Director-General of Health** 

Date: 10/03/2021

Hon Chris Hipkins

Minister of Health

Date:

# Interim public health advice regarding Alert Level restrictions in Auckland and New Zealand as at 10 March 2021

#### **Background**

- 20. On 5 March Cabinet agreed to move Auckland to Alert Level 2 and the rest of the country to Alert Level 1. The aim of this was to enable remaining test results from close and casual plus contacts to be processed and any possible, yet undetected, cases to be identified. Furthermore, remaining at Alert Level 2 in Auckland reminded people of the need to remain vigilant, which also supports high levels of testing, and prevents large gatherings of people.
- 21. Since we moved into Alert Level 2 and 1, we have been able to conduct further testing, which has provided us a high level of confidence that no undetected transmission has occurred.
- 22. This report provides detail on the current situation and my interim advice on whether changes to Alert Levels are needed to contain the current outbreak and reduce the risk of further community transmission.
- 23. Cabinet is meeting on 11 March 2021 to consider the current situation and decide whether and when an Alert Level change is required.
- 24. I will provide you with my final advice in a written briefing prior to the Cabinet meeting tomorrow, and in an oral update to Cabinet, which will contain the most up to date information.

#### Factors to consider when making decisions about COVID-19 Alert Levels

- 25. Cabinet has previously agreed the principal matters that will be taken into consideration in determining national or local Alert Level changes [CAB-MIN-0199, CAB MIN 0387 refers]. These include my satisfaction, as Director-General of Health on the following four health matters:
  - a. the trends in the transmission of the virus, taking into account my confidence in the data, are consistent with the risk level outlined in paragraph 28 below;
  - b. the capacity and capability of New Zealand's testing and contact tracing systems;
  - c. the effectiveness of New Zealand's self-isolation, quarantine and border measures; and
  - d. the capacity in the health system more generally to move to the new Level, including the workforce and ICU capacity, plus the availability of PPE for those for who it is recommended.
- 26. Cabinet also agreed four other factors to be considered:
  - a. evidence of the effects of the measures on the economy and society more broadly;
  - b. evidence of the impacts of the measures for at risk populations in particular;
  - c. public attitudes towards the measures and the extent to which people and businesses understand, accept, and abide by them; and

- d. our ability to operationalise the restrictions, including satisfactory implementation planning. [CAB-20-MIN-0199; CAB-20-MIN-0387 refer].
- 27. The National Response Leadership Team advises Cabinet separately on these latter four factors.
- 28. The risk assessment framework to determine Alert Levels, agreed by Cabinet is contained in the following table:

Alert Level	Risk assessment	
	The Director-General of Health is satisfied that there is sufficient data from a range of sources to have reasonable certainty that there is/are:	
Level 4	<ul><li>Sustained and intensive community transmission</li><li>Widespread outbreaks</li></ul>	
Level 3	<ul> <li>Multiple cases of community transmission occurring</li> <li>Multiple active clusters in multiple regions</li> </ul>	
Level 2	<ul> <li>Limited evidence of community transmission occurring</li> <li>Active clusters in more than one region possible</li> </ul>	
Level 1	<ul> <li>COVID-19 is uncontrolled overseas</li> <li>Sporadic imported cases</li> <li>Isolated local transmission could be occurring in New Zealand.</li> </ul>	

29. There are a number of key factors relevant to the current outbreak which are discussed below.

#### Testing and contact tracing

- 30. Testing has continued to be at a high level in recent weeks. On 10 March 2021, 8,618 tests were processed, bringing the weekly total of tests processed last week to more than 58,000.
- 31. Regular wastewater testing continues in Auckland. In the most recent testing reported on Friday 5 March the only site that showed positive results on 2, 3, 4 and 5 March were from the site near the Jetpark managed quarantine facility.
- 32. Wastewater testing was also undertaken at sites in New Plymouth, Hamilton, Rotorua and Christchurch. Wastewater testing at these sites has not revealed any evidence of COVID-19 in these locations.
- 33. Contact tracing capacity is sufficient to manage 350 cases per day.
- 34. There are approximately 2.74 million registered NZ COVID Tracer app users, as of 10am on 10 March 2021. Just over 970,000 poster scans were notified since midday yesterday. Just over 1,268,000 devices had Bluetooth active.

#### Effectiveness of the self-isolation and quarantine measures

35. Auckland Regional Public Health have been managing all positive cases closely and is comfortable that requirements are being observed. Clear guidance has been provided to those who have been tested to remain in isolation until they receive a negative test result.

#### Health and disability system capacity

36. There is currently one person in hospital with COVID-19. While hospitals are currently operating a high capacity, DHBs have plans in place to manage a surge in demand associated with new outbreaks.

- 37. There are good stocks of personal protective equipment, swabs and other test consumables.
- 38. Counties Manukau DHB and ARPHS report that the current outbreak has placed a heavy demand on testing, contact tracing and case management services and that they have stretched capacity. They also note that this pressure is further compounded by the forthcoming additional requirements for testing MIQ workers and vaccine rollout.

#### Impact of the current COVID-19 cases on the COVID-19 Vaccination Programme

- 39. The Sequencing Framework has been developed to respond to three epidemiological scenarios: low/no community transmission, controlled outbreaks, and widespread transmission. Implementation is currently focused on a low or no community transmission scenario, with vaccination of border and MIQ workers underway.
- 40. Given there is no evidence of wider spread in the region and no cases in other regions, officials recommend the COVID-19 Vaccination Programme continues to be implemented on the basis that we are in the low/no community transmission epidemiological scenario (Scenario 1).
- 41. However, the COVID-19 Vaccination Programme have taken steps to accelerate the rollout the vaccinations to the household contacts of border and MIQ workers in South Auckland so that vaccination of this cohort can start a week earlier than planned. This means that some households in the community most affected by the cluster are being vaccinated from this week. Officials working on the COVID-19 Vaccination Programme continue to monitor the situation closely.

#### Latest case information - February South Auckland outbreak

- 42. In the past 24 hours there have been no new cases of community transmission linked to this outbreak.
- 43. There are a further 78 active cases in managed isolation and quarantine facilities associated with international travel. These are managed through well-established processes.

#### Extent of transmission in February South Auckland outbreak

- 44. There have been 15 cases across four Papatoetoe households in the current COVID-19 outbreak, all infected with the UK variant (B.1.1.7) which is known to be more transmissible. Two are considered active cases and 13 have recovered and have been released from quarantine.
- 45. The first cases were identified on 14 February 2021 and the most recent case (Case N) was identified on 1 March 2021.

#### Contact tracing

- 46. Information on contact tracing and testing is provided in the Auckland Cluster Situational Summary which is a companion piece to this briefing.
- 47. Day 12 tests are due for 15 close or close plus contacts over the next few days and are being followed up. Results are expected on Friday 12 March. The outstanding contacts relate to the Kmart exposure event and are all in contact and are being managed by the Ministry of Health and Auckland Regional Public Health Service (ARPHS). The table below provides a summary of testing results for all contacts.

48. The below table outlines the most up to date test results of the types of contacts of positive cases, including outstanding test results.

Table: Test results for all contacts by contact type (as at 8.30am Wednesday 10 March)

Contact Type	Initial Testing Result	Day 12 Testing Result
All Contacts		
Close + Contacts	88/88 (88 negative)	75/88 (75 negative, 11
		outstanding, 2 no further
		action required)
Close Contacts	179/183 (no outstanding, 11	160/170 (1 positive, 159
	positive, 168 negative, 2	negative, 4 outstanding, 6 no
	exempt, 2 no further action	further action required
	required (1 low risk exposure	(infants))
	and 1 missed day 5 testing but	
	tested positive at day 12))	
Casual + Contacts (treated as	1930/1967 (1930 negative, 22	1938/1945 (1938 negative, 7
close contacts *Kmart)	exempt, 15 no further action	no further action required)
	required)	
Casual + Contacts	3708/3776 (3 positive, 3705	N/A
	negative, 3 exempt, 1 refused,	
	64 no further action required)	

#### <u>Key</u>

- Exempt contacts are those people exempt from testing, including children.
- Contacts with no result from initial testing may include those where a test has been taken but not yet processed, no test has been taken yet, and a test has been refused. All contacts in this category are being actively followed up via welfare checks.
- Contacts with no result from Day 12 tests include those where day 12 has not yet been reached, noting that period for day 12 from exposure continues until 12 March.
- 49. I do not consider that it is absolutely necessary for all close contacts to return their day 12 test result in order for Alert Level restrictions to be lifted, as these contacts will already be self-isolating.
- 50. The National Investigation and Tracing Centre (NITC) continue to follow up daily with those contacts that remain in isolation at home awaiting their day 12 tests, that are asymptomatic, and the team have no concerns around whether they are following the guidelines set by MOH. These home visits are to coordinate support services for those self-isolating and have the added intrinsic benefit of providing reassurance that these people are complying with all isolation and testing requirements.

#### Source investigation

51. The original source of the February South Auckland outbreak remains under investigation.

#### Level of testing

- 52. In Auckland on 9 March there were 2517 tests at community testing centres and 3657 tests at primary care facilities, total of just over 6100.
- 53. There were 11 community testing centres open on 8 March with good coverage across south and east Auckland. Any further results will be reported in my final Alert Level advice to Cabinet.

54. Tests have continued to be processed at a high level in recent weeks. On 10 March 2021 8,618 tests were processed nationwide, bringing the weekly total of tests processed last week to more than 58,000.

#### Latest case information – air crew case

55.	As at 3pm on 10 March 2021, a positive COVID-19 case detected outside of Managed
	Isolation and Quarantine was an Air New Zealand crew member, who returned a positive test
	on 7 March 2021. s 9(2)(a)

- 56. The 14 other crew members on the same flights to/from Japan between 25 28 February are being asked to self-isolate and get tested immediately and again at Day 12. At this point, the only location of interest is Countdown Auckland Airport, on 3 March.
- 57. Officials consider that the case was most likely infected while in Japan as the genome sequencing shows no relation to the February South Auckland outbreak. As the case returned to Auckland while under Alert Level 3 restrictions, exposure opportunities, both for infection and for spreading the virus, were limited. Genomic sequencing shows that the case does not have one of the highly transmissible variants.

58.	s 9(2)(a)
гΛ	The new case of convention the ring array was in all such a related to the linear or all conventions
59.	The genome observed in the air crew case is closely related to the lineage observed in a
	natural and a New Zeeland who tested as ities while in MIO
	returnee to New Zealand who tested positive while in MIQ. s 9(2)(a)

- 60. Potential exposure within New Zealand such as at the vaccination clinic at Auckland airport where the case was vaccinated on 3 March, is also being considered. This is being investigated as part of contact tracing follow up but is considered less likely.
- 61. There is so far no evidence to indicate that there is any additional community spread as a result of this case. Those who would be most at risk of testing positive have so far tested negative and are self-isolating and there are currently no MIF cases identified, in New Zealand, who have been on flights that the case worked on. However, ensuring that there has been no additional spread will be contingent on the day 12 testing results, which will come no sooner than 19 March.
- 62. Contact tracing from the air crew case is being undertaken and so far there is no evidence of any further transmission.
- 63. Further investigations are underway to rule out the possibility that the case was infected in New Zealand, including:
  - a. checking that MIQ workers who may have come into contact with the returnee with the similar lineage of COVID-19 were tested according to the border testing schedule;

- b. ensuring that the correct IPC procedures were in place at Auckland airport when the case was present there; and
- c. contact tracing of those present at the Auckland Airport vaccination centre where the case was vaccinated on 3 March.

#### Process for making/amending/revoking a section 11 Order

- 64. Under the COVID-19 Public Health Response Act 2020 (the COVID-19 Act), an Order may be made if either:
  - a. a state of emergency has been declared (under the Civil Defence Emergency Management Act 2002) or
  - b. an epidemic notice is in force (under the Epidemic Preparedness Act 2006) or
  - c. it has been authorised by the Prime Minister.
- 65. There is currently an epidemic notice in place, which allows Orders to be made under section 11 of the COVID-19 Act.
- 66. Cabinet may agree to make Orders under section 11 of the COVID-19 Act.
- 67. To make an Order under section 11, Cabinet must:
  - a. have received advice from the Director-General about
    - i. the risks of the outbreak or spread of COVID-19; and
    - ii. the nature and extent of measures that are appropriate to address those risks; and
    - iii. have regard to any decision by the Government on how to respond to those risks and avoid, mitigate or remedy the effects of the outbreak or spread of COVID-19 (including taking into account any social, economic or other factors); and
- 68. have consulted the Prime Minister, the Minister of Justice and any other Minister that you as the Minister of Health think fit; and
- 69. be satisfied that this Order is appropriate to achieve the purpose of the COVID-19 Act.
- 70. My advice, as Director-General, about the risks of the outbreak and spread of COVID-19 and the nature and extent of measures that are appropriate to address those risks is set out below.

#### **Public health advice on Alert Level settings**

- 71. I have reviewed the current Alert Level settings to ensure these are proportionate to public health risk and appropriate to respond to the current situation.
- 72. Based on the available evidence at 3pm on 10 March 2021 my interim advice is that we should move Auckland to Alert Level 1 from 6 am on Sunday 14 March and keep the rest of New Zealand at Alert Level 1.
- 73. I recommend this Alert Level change is reviewed by Cabinet on 11 March.

#### Justification for moving Auckland from Alert Level 2 to Alert Level 1

74. Staying at Alert Level 2 for a further six days in Auckland is not justified on balance as the final testing results are expected to be available before any Alert Level change on Sunday 14

March, any remaining contacts are self-isolating, and no further evidence of community transmission has been identified. Further details on Alert Level 2 restrictions can be found in Appendix two.

#### Alert Level 1 measures

#### Alert Level 1

- 75. The purpose of Alert Level 1 recognises the decreased risk of community transmission while retaining standard public health measures to be ready in case COVID-19 reappears in our community.
- 76. The COVID-18 Pubic Health Response Alert Level Requirements Order (No 3) 2021 sets out Alert Level 1 requirements. Alert Level 1 requires:
  - a. Workplaces, businesses, services and public transport services display a QR code in a prominent place at or near the main entrance
  - b. Every person to wear a face covering while on public transport and domestic flights (with some exceptions)
- 77. These requirements are supported by public health guidance relating to physical distancing, hand hygiene, cough and sneeze etiquette, advising people to stay home if they are sick and the continuation of record keeping, including use of the NZ COVID Tracer App.

Rationale for Alert Level 1 for the rest of the country

78. Based on the available information I have to date which indicates there is no undetected community transmission outside of the Auckland geographic region, I am satisfied that Alert Level 1 requirements are a sufficient and proportionate measure to the current level of risk.

#### **New Zealand Bill of Rights Act 1990**

- 79. A matter for you to consider each time an Order is proposed under the COVID-19 Public Health Response Act 2020 is whether the exercise of such powers will be appropriate. The power to make an Order in section 11 of the Act must be exercised consistently with the New Zealand Bill of Rights Act 1990.
- 80. The Order will only be lawful if it limits those rights to the extent that can be demonstrably justified in a free and democratic society.
- 81. The Order limits rights and freedoms affirmed by the New Zealand Bill of Rights Act 1990, including the rights to manifest religion, and freedom of peaceful assembly, association and movement.
- 82. The Government's plan for responding to COVID-19 cases in the community provides for a precautionary approach. In particular, rapid and decisive action, while case investigation and contact tracing is undertaken, is seen as our best chance to avoid needing to further escalate up the Alert Level framework (with corresponding greater limitations on rights and freedoms) on a nationwide basis.
- 83. SARS-CoV-2 is a highly contagious virus, capable of being carried and transmitted by asymptomatic people and as potentially having serious health impacts on some who develop COVID-19. The February South Auckland outbreak involves the B.1.1.7 variant which is known to be more transmissible.

84. The public health advice is that the high number of tests across New Zealand has provided a level of reassurance that no community transmission has occurred outside the Auckland region, and as such a reduction in Alert Level restrictions is an appropriate and proportionate response to the current situation.

#### **Equity**

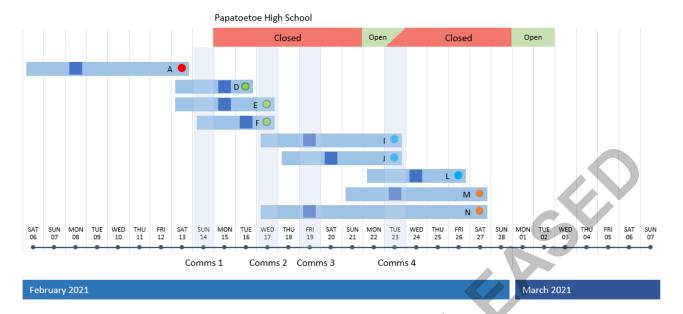
- 85. There are two factors to balance in considering equity implications:
  - a. we know from historical examples that Māori and Pacific peoples are likely to be disproportionately affected by a widespread epidemic;
  - b. we also know these communities are also likely to be disproportionately affected by the impact of any controls, for example, they are less likely to be able to work remotely.
- 86. The moves that have been taken to strongly and quickly control the outbreak are intended to prevent the spread of COVID-19 to all New Zealanders, including these vulnerable populations in particular. As such, the measures are intended to promote equity of health outcomes. We note that imposing restrictions to achieve better health outcomes could involve worse economic outcomes for vulnerable populations in the short term.
- 87. As the risk of community transmission abates, the relaxation of the temporary controls and restrictions on gathering sizes will reduce the impact of controls and therefore the impact on equity (e.g. in terms of any economic harms involved).

#### **Next steps**

- 88. I will provide my final advice tomorrow, which will be informed by the most up to date case and testing information.
- 89. Cabinet will meet at 2pm on Thursday 11 March to decide whether to maintain current settings or move Alert levels. Alert Level changes will be considered and agreed to at that point, with drafting instructions for an Alert Level Order issued to Parliamentary Counsel Office to draft. The next Alert Level change because it involves going down, not up, will come into effect on 6am on Sunday 14 March 2021.
- 90. Agencies will work to give effect to the approved Alert Level change. This will include the Ministry of Health continuing to work with other agencies and external stakeholders to ensure that the requirements are complied with.

#### ENDS.

#### Appendix 1: Infectious period and time in community



**Figure 1 Infectious period and time in community:** Symptom onset, infectious period and test result date for Cases A, D, E, F, I, J, L, M & N. The dot denotes the date of positive test result, household bubble is grouped by colour. Date of symptom onset is denoted by the dark blue square, the infectious period is then estimated to be 48 hours prior to symptom onset. Comms was sent out from ARPHS on 17, 19 & 23 February.



#### **Appendix 2: Alert Level 2 measures**

- 1. The current Alert Level 2 restrictions that currently apply to Auckland are set out in COVID-19 Public Health Response (Alert Level Requirements) Order (No4) 2021. These restrictions:
  - a) limit social gatherings to 100 people in a defined space at any one time;
  - b) require businesses, schools and public venues to have systems in palace to maintain compliance with public health guidance including physical distancing rules, displaying QR codes and record keeping;
  - c) require hospitality businesses to keep groups of customers separated, seated and served by a single person;
  - d) Require people to comply with physical distancing rules of 2 metres outside the home with people not in your bubble (where practicable on public transport, including planes) and 1 meter in workplaces, public transport and other specified services; and
  - e) require all customer-facing businesses to display the official government QR code for the NZ COVID Tracer App on their premises.
- 2. Additionally, under all Alert Levels the wearing of face coverings is required on public transport and domestic flights, as previously applied under other Alert Level Orders, and business, workplaces and public transport providers are required to display QR codes.
- 3. These measures are designed to reduce the risk of transmission of COVID-19 by:
  - a) limiting the amount of close contact between individuals in public spaces where contact tracing is difficult; and
  - b) enabling fast and effective contact tracing.