



Cabinet

Minute of Decision

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February 2021 Update on the COVID-19 Immunisation Strategy and Programme

Portfolio COVID-19 Response

On 2 February 2021, Cabinet:

- 1 **noted** that in December 2020, Cabinet agreed that the purpose of the COVID-19 Immunisation Strategy is to support the “best use” of COVID-19 vaccines, while upholding and honouring Te Tiriti o Waitangi obligations and promoting equity [CAB-20-MIN-0509];
- 2 **authorised** a group of Ministers comprising the Prime Minister, Minister of Finance, Minister for COVID-19 Response, Minister of Health, Associate Minister of Health (Hon Dr Ayesha Verrall), Minister of Research, Science and Innovation, and the Minister of Foreign Affairs (Joint Ministers) to have power to act in order to ensure timely decision making on the COVID-19 Immunisation Programme, where urgent decisions are required outside of the usual Cabinet meeting cycles;

Vaccine purchasing

- 3 **noted** that New Zealand has entered into four Advance Purchase Arrangements with vaccine manufactures, totalling 14.91 million courses;
- 4 **noted** that Medsafe is prioritising the evaluation of COVID-19 vaccines to obtain an approved vaccine more quickly without compromising the integrity of the process or on the safety, quality, and efficacy of the vaccines;

COVID-19 Immunisation Programme

- 5 **noted** that the Ministry of Health is on track to begin immunisation in late February 2021, should a vaccine be available and approved for use;
- 6 **noted** that immunisation activity is expected to ramp up over the course of 2021 as system capacity and vaccine volumes increase;

Decision to Use Framework

- 7 **noted** that officials have developed a proposed Decision to Use Framework to provide a robust process for decisions on how to use COVID-19 vaccines, who to use them for, and when to use them;

- 8 **endorsed** the proposed Decision to Use Framework set out in Appendix 6 of the submission attached to CAB-21-SUB-0011, that is intended to clarify in what context and when a decision needs to be made, informed by current science and clinical information and an understanding of the risks and benefits;
- 9 **agreed** that officials seek Cabinet or Joint Ministers' Decision to Use, depending on timing, once the first vaccine gains regulatory approval so a decision on vaccine use can be made;
- 10 **noted** that officials will continue to refine the Decision to Use Framework and process, including consulting with key stakeholders;

Sequencing Framework

- 11 **noted** that in December 2020, Cabinet agreed in principle to the Sequencing Framework, noting that officials would continue to review it based on emerging evidence [CAB-20-MIN-0509];
- 12 **noted** that the objectives of the Sequencing Framework have been updated to reflect uncertainty around the ability of the vaccine to prevent transmission compared to protecting individuals against the disease;
- 13 **agreed in principle** to the updated Sequencing Framework as outlined in Appendix One of the submission attached to CAB-21-SUB-0011, noting that this is based on the latest available evidence and analysis of the risks from COVID-19 to New Zealand;
- 14 **agreed** that oversight and any policy decision-making on the Sequencing Framework be delegated to Joint Ministers, where necessary for timing reasons;
- 15 **noted** that the Ministry of Health is preparing for implementation on the basis of a low/no transmission scenario, which is New Zealand's current situation;
- 16 **noted** that the Director-General of Health has the discretion to approve operational guidance on who is included within the scope of the current proposed tiers of the Sequencing Framework;

Eligibility for publicly funded COVID-19 immunisation

- 17 **noted** that most people on temporary visas, Australians in New Zealand for less than two years, and people who are in New Zealand unlawfully, are not generally eligible for publicly funded health and disability services such as immunisation;
- 18 **noted** that enabling everyone in New Zealand access to publicly funded COVID-19 immunisation, regardless of residency status, supports the elimination strategy and New Zealand's goal of achieving population immunity over time;
- 19 **agreed in principle** to expand eligibility to publicly funded COVID-19 immunisation to everyone in New Zealand regardless of immigration status, **subject to** consultation with District Health Boards;
- 20 **noted** that to enable this, the Minister of Health will establish a Ministerial Direction under section 32 of the New Zealand Public Health and Disability Act 2000, but that this is subject to consultation with District Health Boards;
- 21 **noted** that the Minister of Health will make the final decision on the Ministerial Direction, but will consult with Cabinet if any significant changes to the policy are required;

- 22 **noted** that it is expected that the cost of expanding eligibility can be absorbed within existing funding while border settings remain unchanged;

Financial implications

- 23 **noted** that the financial implications arising directly from the proposals in the paper under CAB-21-SUB-0011 will be met within the existing appropriation of Implementing the COVID-19 Vaccine Strategy Multi Category Appropriation until December 2021;

Communications strategy

- 24 **noted** that the overarching purpose of the public communications strategy is to build trust and confidence in the COVID-19 vaccines and the Immunisation Programme to encourage uptake;
- 25 **noted** that this will be achieved through a range of mechanisms including phased communications that build a narrative over time and using a range of communications providers that can tailor messaging to certain population cohorts to ensure the messages resonate.

Michael Webster
Secretary of the Cabinet