

25 March 2021


Ref: H202100194 & H202100195


Response to your request for official information

Thank you for your request under the Official Information Act 1982 (the Act) on 18 January 2021 for information relating to the COVID-19 vaccine.

You specifically requested:

"All advice, briefings, reports, memos, and emails regarding the Covid-19 vaccine, including timeline and forecast arrival/delivery/roll-out dates in New Zealand, between 10 December 2020 and 18 January 2021."

On the same date, you requested from the Minister for COVID-19 Response, Hon Chris Hipkins, the following information:

"All advice, briefings, reports, memos, and emails Covid-19 Response Minister Chris Hipkins has received regarding the Covid-19 vaccine, including timeline and forecast arrival/delivery/roll-out dates in New Zealand, between 10 December 2020 and 18 January 2021."

On 12 February 2021, under section 14 of the Act, the Minister transferred the request to his office to the Ministry as being more closely related to the Ministry's functions.

Part of your request would be a difficult request to collate as it would require the Ministry to review all documentation including emails to find any mention of "vaccine" or "COVID-19 vaccine". Whenever requests are made for "all information" it often leads to responses of substantial size that are likely to be extended for significant periods of time or refused in full or part as they lack due particularity.

While the Ministry has considered your request for emails, it has been determined that providing a response would require substantial collation. Therefore, this request is refused under section 18(f) of the Act.

However, the Ministry has identified and is releasing to you the briefings and a weekly report that we hope is helpful to you. Please see attached Appendix 1 containing the documents being

released to you. The Ministry has made a reasonable endeavour to search for records we hold to identify information within the scope of your request.

Please note that the draft Cabinet paper referred to in HR 20210037 has not been provided as it was superseded by the Cabinet paper titled '*Cabinet paper for lodgement: February 2021 Update on the COVID-19 Immunisation Strategy and Programme*' listed as report number four below.

I trust this information fulfils your request. Under section 28(3) of the Act you have the right to ask the Ombudsman to review any decisions made under this request. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Please note that this response, with your personal details removed, may be published on the Ministry website at: www.health.govt.nz/about-ministry/information-releases/responses-official-information-act-requests.

Yours sincerely



Maree Roberts
Deputy Director-General
System Strategy and Policy

#	Report Number	Title	Decision on release
1	HR20202260 <i>H20210262 Compiled Documents</i>	Briefing: Pfizer vaccine arrival timeline	Released with some information withheld under the following sections of the Act: <ul style="list-style-type: none"> • Section 9(2)(a) to protect the privacy of natural persons. • Section 9(2)(b)(ii) where its release would likely unreasonably prejudice the commercial position of the person who supplied the information.
2	HR20210037 <i>H20210262 Compiled Documents</i>	Briefing: COVID-19 Vaccine and Immunisation Update for Joint Ministers	Released with some information withheld under the following section of the Act: <ul style="list-style-type: none"> • Section 9(2)(a) to protect the privacy of natural persons.
3	HR20202266 <i>H20210262 Compiled Documents</i>	Briefing: Auckland COVID-19 Vaccine Event	Released with some information withheld under the following section of the Act: <ul style="list-style-type: none"> • Section 9(2)(a) to protect the privacy of natural persons.
4	HR20210087	Cabinet paper for lodgement: February 2021 Update on the COVID-19 Immunisation Strategy and Programme	Withheld in full under section 18(d) of the Act as the information will soon be made publicly available at: www.health.govt.nz/about-ministry/information-releases/release-ministerial-decision-making-documents
5	N/A	Weekly Report Extracts between 10/12/20 and 18/01/21	Released with some information withheld under the following sections of the Act: <ul style="list-style-type: none"> • Section 9(2)(a) to protect the privacy of natural persons. • Section 9(2)(f)(iv) to maintain the constitutional conventions that protect the confidentiality of advice tendered by Ministers and officials.

Briefing

Pfizer vaccine arrival timeline

Date due to MO:	10 December 2020	Action required by:	N/A
Security level:	Commercially Sensitive	Health Report number:	20202260
To:	Office of the Minister of Health		

Contact for telephone discussion

Name	Position	Telephone
Sue Gordon	Deputy Chief Executive, COVID-19 Health System Response	s 9(2)(a)
Mathew Parr	Programme Director, COVID-19 Vaccine & Immunisation Programme	s 9(2)(a)

Minister's office to complete:

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| <input type="checkbox"/> See Minister's Notes | <input type="checkbox"/> Withdrawn | |

Comment:

Released under the Official Information Act 1982

Pfizer vaccine arrival timeline

Security level: Commercially Sensitive **Date:** 10 December 2020

To: Office of the Minister of Health

Purpose of report

1. This briefing provides information on the arrival timelines and key milestones that must be achieved before the COVID-19 Immunisation Programme can begin administering the Pfizer vaccine.

Pfizer vaccine is expected to arrive March 2021 at the earliest

2. Joint Ministers agreed to purchase 750,000 courses of Pfizer Inc's vaccine candidate (1.5 million doses), with an earliest delivery date of March 2021.
3. Appendix One sets out the key milestones that must be achieved before the COVID-19 Immunisation Programme can begin administering the Pfizer Vaccine.
4. We have illustrated the key constraints and trade-offs within the series of milestones required, and have provided an estimated range of timeframes from the earliest possible, most likely, and latest possible.
5. We also provide an overview of the key dependencies, risks, and the controls and choices that we have to manage the process.

A decision to use is still required

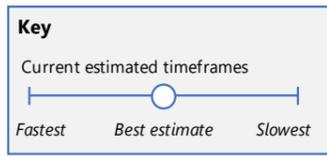
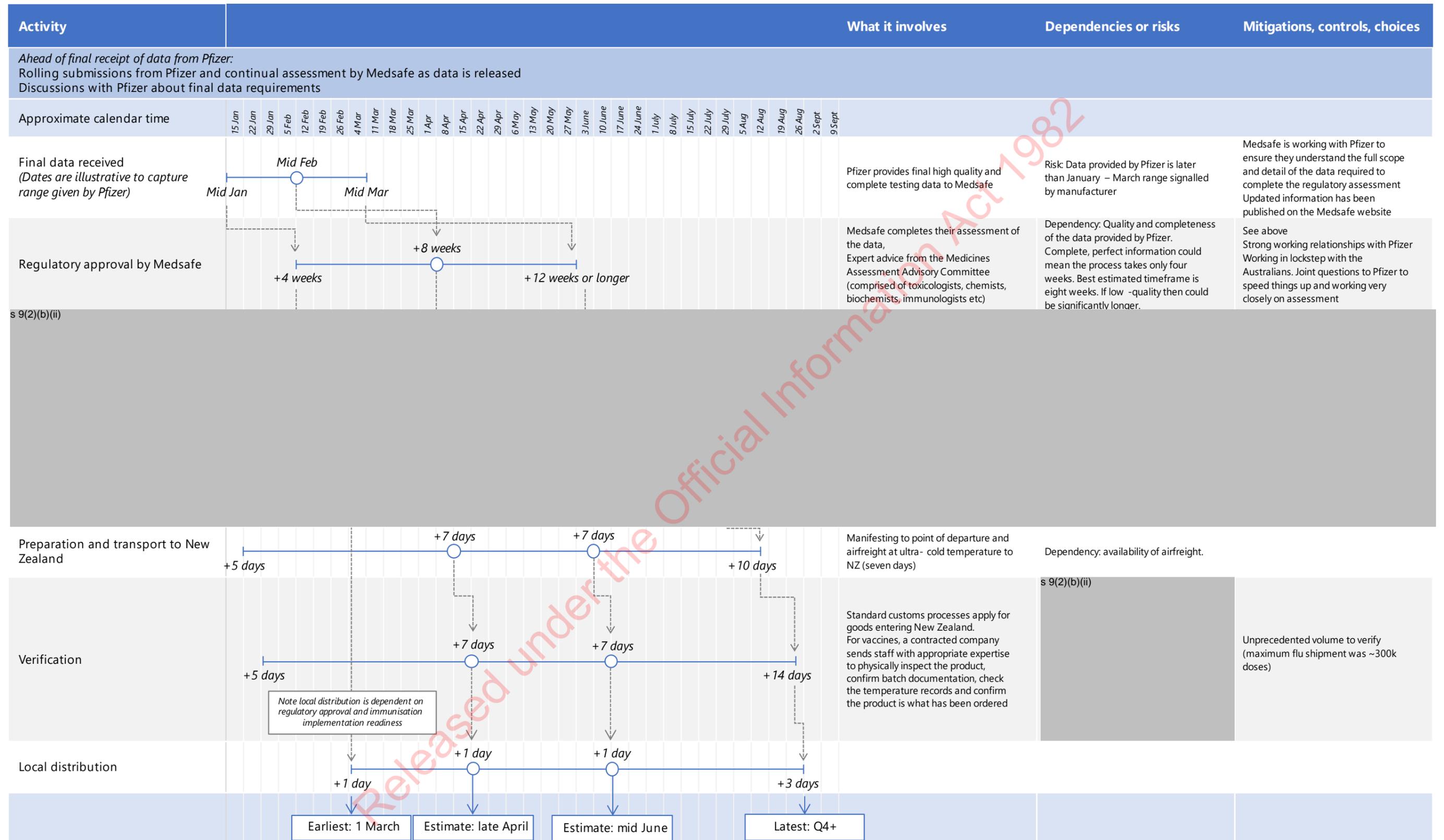
6. Appendix One has been developed to support the Immunisation Programme to plan for the administration of the vaccine. A decision to use the Pfizer vaccine will still be required. The decision to use will need to take account of:
 - a. the rest of the vaccine portfolio likely to be available in the near future – for example, it may be better not to use a vaccine if it is likely that another, more effective vaccine will be available soon;
 - b. the impacts on the Pacific;
 - c. the impact on the implementation of the Sequencing Framework; and
 - d. the costs, benefits and risks associated with the use of a vaccine, such as evidence about its effectiveness.

Next steps

7. The Ministry of Health is developing a decision framework to support Ministers with the report back to Cabinet in January 2021. The decision framework would then be applied following Medsafe approval of COVID-19 vaccines, with Pfizer likely to be the first vaccine to be considered.

ENDS.

Appendix One: Pfizer arrival timelines: Draft for Discussion



Briefing

COVID-19 Vaccine and immunisation update for joint Ministers

Date due to MO:	15 January 2021	Action required by:	N/A
Security level:	SENSITIVE	Health Report number:	20210037
To:	Rt Hon Jacinda Ardern, Prime Minister Hon Andrew Little, Minister of Health Hon Chris Hipkins, Minister of COVID-19 Response		
Copy to:	Hon Dr Megan Woods, Minister for Research, Science and Innovation; Hon Nanaia Mahuta, Minister of Foreign Affairs; Hon Dr Ayesha Verrall, Associate Minister of Health; Hon Peeni Henare, Associate Minister of Health; and Hon Aupito William Sio, Associate Minister of Health.		

Contact for telephone discussion

Name	Position	Telephone
Ashley Bloomfield	Director-General of Health	s 9(2)(a)
Caroline Flora	Acting Deputy Director-General, System Strategy and Policy	s 9(2)(a)

Minister's office to complete:

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| <input type="checkbox"/> See Minister's Notes | <input type="checkbox"/> Withdrawn | |

Comment:

COVID-19 Vaccine and immunisation update for joint Ministers

Security level: SENSITIVE **Date:** 15 January 2021

To: Rt Hon Jacinda Ardern, Prime Minister
Hon Andrew Little, Minister of Health
Hon Chris Hipkins, Minister of COVID-19 Response

Purpose of report

1. To support your discussion at the Ministerial meeting on 18 January 2021, this briefing provides you with:
 - a. a draft Cabinet paper that responds to Cabinet's invitation for a report back on several issues related to the COVID-19 Immunisation Strategy and Programme;
 - b. an update on the Medsafe regulatory process and timelines expected for the COVID-19 Pfizer Vaccine; and
 - c. outlines the roles and responsibilities relating to the ongoing management of COVID-19 vaccine agreements between the Crown and vaccine suppliers.

Recommendations

We recommend you:

- a) **Note** the attached draft Cabinet paper *February 2021 update on the COVID-19 Immunisation Strategy*
- b) **Discuss** the draft Cabinet paper *February 2021 update on the COVID-19 Immunisation Strategy*
- c) **Discuss** the process and timelines for regulatory approval of the COVID-19 Pfizer vaccine.



Dr Ashley Bloomfield
Director-General of Health

Date: 14 January 2021

COVID-19 Vaccine and immunisation update for joint Ministers

Context

2. There is a Joint Ministers meeting on Monday 18 January to discuss:
 - a. the draft Cabinet paper: February 2021 update on the COVID-19 Immunisation Strategy (attached)
 - b. update on the Medsafe regulatory process and timelines for the Pfizer vaccine
 - c. contract management of the COVID-19 vaccine portfolio.
3. The following sections provide an overview to support the discussion on the items above.

We have attached the draft Cabinet Paper for your feedback

4. On 7 December 2020, Cabinet considered advice on the COVID-19 Immunisation Strategy and Programme. Cabinet agreed that the purpose is to support best use of COVID-19 vaccines, through upholding and honouring Te Tiriti o Waitangi obligations and promoting equity [CAB-20-MIN-0509 refers].
5. The Prime Minister's office has requested that Health Ministers report back to Cabinet on the COVID-19 Immunisation Strategy and Programme on 2 February 2021.
6. Attached is an early draft of the Cabinet paper *February 2021 update on the COVID-19 Immunisation Strategy and Programme* for your feedback. The paper includes:
 - a. initial advice on the Decision to Use Framework, which would help guide the best use of vaccines by providing a robust process for deciding to use a vaccine candidate
 - b. recommended refinements to the Sequencing Framework based on the latest evidence, including more detail on who is included in the tiers and updating the groups considered most at risk of severe illness
 - c. the proposal to expand eligibility for COVID-19 immunisation to everyone in New Zealand would promote equity and help us to maximise uptake of the vaccine
 - d. updates on vaccine purchasing and implementation preparedness placeholder text that will be updated to reflect the current state on -
 - i. the progress of Medsafe assessment of vaccines
 - ii. arrangements for the transfer of vaccine portfolio management responsibilities from the Ministry of Business Innovation and Employment to the Ministry of Health.
7. The attached version of the draft Cabinet paper is also currently out for interagency consultation. Ministerial consultation is expected to be completed 22 January 2021.

Regulatory process for the COVID-19 Pfizer vaccine

8. Medsafe has provided an update on the possible timelines and process for assessment of the COVID-19 Pfizer vaccine. If all the necessary information and steps are met a regulatory decision could be possible by Wednesday 3 February 2021.
9. Medsafe has completed its assessment of the first tranche of data provided by Pfizer and has started assessing the next tranche of data received week beginning 11 January. Medsafe has sent a number of questions to Pfizer, as is common practice in a medicine assessment and has required responses within one week. The usual timeframe for responses from companies is four months.
10. Medsafe has sent questions to its experts for advice and requested turnaround with 48 – 72 hours. A toxicology review is expected to be completed next week.
11. Medsafe has also commissioned advice on the risks associated with the new variants identified around the world and the impact on the benefit risk assessment for a vaccine in New Zealand.
12. Once the responses, expert advice and toxicology assessment are received, Medsafe will complete its benefit risk assessment and provide this and associated technical data to the Ministerial expert advisory committee (the Medicines Assessment Advisory Committee).¹
13. This Committee session has been confirmed for Tuesday 2 February. The Committee requires time to be able to assess the information Medsafe provides and then provide advice and a recommendation. The timeframe we are giving members is extremely truncated. Medsafe could then make a regulatory decision on 3 February.
14. The process and timelines provided above describe the minimum requirements to ensure a robust assessment, however there are a number of dependencies that could change the estimated timelines:
 - a. Pfizer will need to prioritise questions for New Zealand and respond within a week; the Ministry of Health and Medsafe are working closely with Pfizer to manage these expediated timelines.
 - b. Pfizer will need to supply the same batches of vaccine to New Zealand as those being provided to Australia.
 - c. If the Medicines Assessment Advisory Committee does not support approval or provisional approval with conditions or requires additional data before making a recommendation.
 - d. The Ministry of Health is rapidly preparing a risk assessment of the COVID-19 variant to enable Medsafe to undertake a benefit risk assessment of the vaccine.
15. It is important to ensure that our assessment is robust and comprehensive, that will provide assurance to the public and withstand rigorous review. This requires we follow a standard proven process. However, Medsafe recognise that there is urgency in this matter and have ensured that administrative processes have been streamlined and that

¹ The Medicines Assessment Advisory Committee is established under the Medicines Act 1981 to provide advice on the decision to approve or not approve a medicine.

sufficient and effective technical resources have been applied to the process to ensure a decision at the earliest possible time.

Management of COVID-19 Vaccine Agreements

16. The Ministry of Business, Innovation and Employment (MBIE) was tasked with leading the cross-agency negotiation process to secure a portfolio of vaccines with potential vaccine candidate suppliers. We currently have four advance purchase agreements (APAs) in our portfolio. The Ministry of Health, the Treasury, the Ministry of Foreign Affairs and Trade (MFAT), and PHARMAC were involved in the negotiation process.
17. All APAs have been signed by the Director-General of Health on behalf of the Crown. Ownership of these agreements sits within the Ministry of Health, as the agency responsible for implementing the COVID-19 Vaccine Immunisation Programme.
18. Now that a portfolio of vaccine candidates has been established, there is a shift in focus from purchasing decisions to portfolio management, including the logistics and delivery of the vaccines.

PHARMAC will provide support and advice to ongoing portfolio and contract management

19. PHARMAC has significant experience and capability managing pharmaceutical supply agreements as part of its role as the national funding agency. However, PHARMAC will not hold this function for COVID-19 vaccines as the resource, funding and ownership of these agreements sits within the Ministry of Health. PHARMAC has provided support and advice throughout the negotiation process and will continue to do so with regard to ongoing portfolio and contract management.
20. It is expected that the contract management function will transition to PHARMAC post-pandemic, should the COVID-19 vaccines become part of the business as usual Immunisation Schedule.

Management of the vaccine portfolio will sit within the wider COVID-19 Immunisation team within the Ministry of Health

21. A cross-agency plan (the Transition Plan) to guide the transition of functions, roles and responsibilities across agencies over time is being formalised.
22. To allow for close alignment with the COVID-19 Immunisation programme, the ongoing vaccine portfolio management function will sit within the Ministry of Health; the management of COVID-19 vaccine agreements already sits predominantly in the COVID-19 Immunisation team within the COVID-19 Response Directorate. The COVID-19 Response Directorate is responsible for the implementation of the COVID-19 Vaccine and Immunisation Programme so it is essential to keep them joined up with any contract management function.
23. It is beneficial to have contract discussions within the COVID-19 immunisation team as it provides direct line of sight for logistical details of the vaccines, for example shipping arrangements, which needles to use, or training material etc. It is critical to be part of the conversations for a successful programme.
24. Within the COVID-19 Immunisation team, there is significant experience and capability in pharmaceutical logistics, international contract management and the management of immunisation programmes. We will use this expertise to ensure suppliers are held to

stringent requirements to ensure a successful and timely rollout of the COVID-19 vaccine in New Zealand.

25. While most day to day operational matters will be managed within the contract management capability of the COVID-19 Immunisation team, escalation pathways will be available if required for dispute resolution. We intend to use the existing COVID-19 Vaccine Immunisation Programme governance structures to provide guidance and support with the management of the contracts.
26. The COVID-19 Immunisation team will also be supported by the Ministry's System Strategy and Policy Directorate, Health Legal and Bell Gully, who were heavily involved in the APA negotiation process and who have extensive experience working with pharmaceutical supply agreements.

Next steps

27. We recommend that you discuss the draft cabinet paper and seek clarification on the Medsafe process and timelines, if required at the joint Ministers meeting on Monday 18 January 2021.
28. The Ministry of Health is already carrying out the function of COVID-19 vaccine contract management and there is a transition process underway for all other aspects of portfolio management to transfer to the Ministry of Health from MBIE. It is expected that this transition will have been completed by 22 February 2021.

ENDS.

Aide-Mémoire

Auckland COVID-19 Vaccine Event

Date due to MO: 11 December 2020 **Action required by:** N/A

Security level: IN CONFIDENCE **Health Report number:** 20202266

To: Hon Chris Hipkins, Minister for COVID-19 Response

Contact for telephone discussion

Name	Position	Telephone
Dr Ashley Bloomfield	Director-General of Health	s 9(2)(a)
Carl Billington	Communications lead, COVID-19 Health System Response	s 9(2)(a)

Minister's office to complete:

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| <input type="checkbox"/> See Minister's Notes | <input type="checkbox"/> Withdrawn | |

Comment:

Released under the Official Information Act 1982

Aide-Mémoire

Auckland COVID-19 Vaccine Event

Date: 11 December 2020

To: Hon Chris Hipkins, Minister for COVID-19 Response

Security level: IN CONFIDENCE **Health Report number:** 20202266

Details of Event

Thursday 17 December 2020, 8.30am, Auckland University

Purpose of Event

This event is an opportunity for the Prime Minister and Ministers to provide the public with an update on progress with securing COVID-19 vaccines and planning for implementation.

Talking Points

Reactive questions and answers

Is the Ministry prepared to distribute such as large amount of vaccines?

- Preparation is well underway to manage the distribution of the portfolio of COVID-19 vaccines.
- Unlike the influenza immunisation campaigns, for COVID-19 we are centralising the distribution within the Ministry of Health.
- As part of the new National Immunisation Solution, the Ministry will have an inventory management system for COVID-19 vaccines, providing accurate information about where they are located and the temperature in central storage facilities.
- This will enable us to track and trace COVID-19 vaccines and consumables, including their expiry dates, to mitigate wastage.
- A similar system has been developed to support the management and distribution of personal protective equipment (PPE) supplies and is working well.
- The Ministry has purchased nine large negative 80 degree Celsius freezers that can store more than 1.5 million doses of the Pfizer-BioNTech vaccine.
- These freezers are due to arrive by the end of the year.

- In addition, the new National Immunisation Solution will enable us to centrally record who has been immunised and when.

Do we have enough vaccinators?

- We already have around 12,000 health professionals capable of immunising people in New Zealand, who can help with the delivery of the COVID-19 vaccine.
- However, we will be supplementing this with a core workforce focused on COVID-19 immunisations, so that immunisation is timely and we do not crowd out the delivery of other health services.
- We want to make sure that this is a diverse workforce that can support different models of delivery and equitable access across New Zealand.
- The Ministry of Health has begun to engage this “surge” workforce, including looking at training other health professionals such as Kaiāwhina.
- We are expecting to have enough “surge” vaccinators in place by the time COVID-19 vaccine supplies arrive, and the workforce will continue to scale up through 2021 in line with the expected vaccine delivery schedules.

What will the start of COVID-19 immunisation mean for our borders?

- The start of COVID-19 immunisation will not mean any changes to our borders initially.
- Our border remains our first line of defence against COVID-19 from imported cases.
- To make any decisions around this we need to be confident that the New Zealand population is sufficiently protected.
- This means we will need information on whether the COVID-19 vaccines are effective at providing individuals with protection from contracting the virus and stopping transmission.
- This includes analysing how the effectiveness of the vaccine and how long its protection lasts.
- We will not have all of this information when we first begin immunisation.

What determines who will get the vaccine first?

- Eventually, everyone in the country will have access to a vaccine if they want one – free of charge.

- Who gets the vaccine first will depend on whether transmission is occurring in our community and the best available evidence about who is most at risk of infection, transmission, and severe health outcomes from COVID-19.
- Currently, given we have **no community transmission**, the first group who would be immunised is likely to be people most likely to be exposed to COVID-19.
- This includes the border and MIQ workforce, healthcare workers responding to COVID-19 cases, and their household contacts.
- The aim of this approach is to create a layer of protection around our country to prevent any spread of COVID-19 into our communities.
- However, officials are continuing to review the evidence, in particular around the vaccine characteristics, so we will continue to provide updates on the approach to sequencing as we get more information.

Who should I contact about when I/my industry will be immunised?

- We will continue to provide updates on sequencing as we know more, and make contact as needed to kickstart this process with different groups.

Which healthcare workers will get the vaccine early on?

- Healthcare workers that we expect to get access early on include those involved with testing, providing hospital transport, diagnosis and treatment for COVID-19 patients, COVID-19 vaccinators, and public health units.

Why are older people not receiving the vaccine first?

- Vaccinating our border and frontline health workforce first will ensure we protect all New Zealanders, including our older adult population.
- Our older adult population will still be among the first to be vaccinated because we know that increasing age is associated with increasing risk from infection.

How old is an “older person”?

- Details on the appropriate age threshold for vaccination of the older adult population are being considered by officials.
- This age threshold could vary, depending on other risk factors that are being considered, such as whether someone has a health condition that might make them

more vulnerable or living in aged residential care settings.

When will disabled people and people with health conditions get access to the vaccines?

- Officials are considering what health conditions may make groups more at risk of severe health outcome if they contract COVID-19.
- It is likely those with the relevant underlying health conditions will be considered for vaccination early on to protect our most vulnerable.
- Disabled New Zealanders, people who are immune-compromised and pregnant women are also being considered too by officials.

What changes to who is immunised first if there is COVID-19 transmission?

- If there is a **controlled outbreak**, our first step is to reduce transmission and immunise people closely connected to the outbreak.
- In a worst-case scenario where we see **widespread transmission**, our priority is to protect those most vulnerable to serious health outcomes such as older people.

How will you ensure that Māori can get immunised?

- Enabling equitable uptake of the vaccine, particular for Māori, is fundamental both to the success of the Immunisation Programme and to us upholding our Te Tiriti obligations.
- The sequencing framework has been designed to ensure the first allocation of vaccines under the Sequencing Framework achieves equitable outcomes for our Māori communities, who remain vulnerable to the impacts of COVID-19.
- In addition, the COVID-19 Immunisation Programme is being designed to reach everyone, and this will require different models of delivery and working closely with our community partners.
- For example, we will consider community based immunisation centres and options for Māori-led delivery models.
- Officials are considering the best ways to achieve these outcomes and are working closely with an advisory

group (the Immunisation Implementation Advisory Group) with strong Māori and Pacific representation.

How do we know the vaccines are safe to use?

- Medsafe is the New Zealand Medicines and Medical Devices Safety Authority.
- It is responsible for the regulation of all new medicines, including vaccines, in New Zealand.
- Medsafe evaluates applications for vaccines to ensure that they comply with international standards and local requirements for quality, safety and efficacy.
- This includes assessing data from well-designed clinical trials.
- Only if the COVID-19 vaccine meets these standards will Medsafe recommend approval for use in New Zealand.
- We will also continue to monitor the safety of vaccines once they are in use, which will allow us to respond quickly if needed.

How long will the Medsafe process take?

- Medsafe's timeframe is dependent on the quality of the data provided by the pharmaceutical company and how quickly they respond to any queries.
- To speed up the process, Medsafe is allowing pharmaceutical manufacturers to make rolling applications for their COVID-19 vaccines, which means they can submit data as it is completed and ready for assessment.
- It will also build on any earlier approvals of trusted regulators, including those from Australia, Canada, Europe and the USA.
- So we are hoping for faster approval by Medsafe, but with the same rigorous level of scrutiny that all medicines undergo in New Zealand.

Our advice

Communications plan and parameters for the event

The Auckland University Vaccine Event is an opportunity to provide the public with an update on progress and reduce their uncertainty about what 2021 brings in terms of COVID-19 immunisation.

You will separately be provided with a joint event briefing from the Ministry for Business, Innovation and Employment (MBIE).

We understand that the Minister Woods, the Prime Minister and you will be providing progress updates at the event. In terms of parameters for each update, we are drafting speeches to cover off the following key points:

- **Prime Minister** to introduce the event and cover high level messaging on our COVID-19 response, the two new Advanced Purchasing Agreement announcements, Medsafe timing, what immunisation will mean for our borders, and how important our Pacific neighbours are.
- **Minister of Research, Science and Innovation** to cover more detail on the Advance Purchasing Agreements, the expected delivery schedules, manufacturing, and announce the \$75 million in dedicated funding for the Pacific.
- **Minister for COVID-19 Response** to cover the planning for COVID-19 immunisation, including distribution, workforce, the National Immunisation Solution and sequencing.

We will be providing these speeches for you and the Prime Minister soon, as well as a draft Press Release. MBIE will provide a speech for Minister Woods.

Finally, you will receive a briefing next week on documents to share publicly after the COVID-19 vaccine announcements on 17 December 2020.

Dr Ashley Bloomfield
Director-General
Ministry of Health

Weekly Report Extracts between 10/12/20 and 18/1/21

Minister of Health and Minister for COVID-19 Response: 10 December 2020

1.1 COVID-19 vaccine and immunisation programme

Cabinet paper

The COVID-19 immunisation strategy Cabinet paper was considered by Cabinet on 7 December 2020 [CAB-20-MIN-0509].

Cabinet agreed:

- that the government approach to COVID-19 immunisation is guided by the following principles:
 - the COVID-19 vaccines that are delivered will be free and safe
 - the roll-out will be sequenced as COVID-19 vaccines become available
 - the sequencing of access will be needs based
 - there will continue to have strong border settings and roll-out strategy until there is confidence that the New Zealand population is sufficiently protected
- 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.

DHB engagement

Engagement with DHBs has commenced and we intend to establish a working group prior to Christmas to test elements of the COVID-19 vaccine and immunisation programme.

Two DHB chief executives were incorporated into the programme governance, with the addition of Dale Bramley and Chris Fleming to the COVID-19 Immunisation Steering Group.

Meetings have commenced with DHB General Managers responsible for planning and funding at DHBs to engage on a variety of aspects within the programme.

We will establish a DHB working group prior to Christmas to receive feedback about models of care, service delivery models, commissioning and funding models, logistics, workforce as well as other elements as they arise.

Service design

We have started to design the service delivery models for administering the vaccine once it arrives into New Zealand:

- Different models are based on the scenarios as determined by the draft sequencing strategy, which is yet to be approved by Cabinet, and we are considering a range of locations and approaches for immunisation.
- Delivery models being considered include existing models such as General Practitioner facilities, pharmacies, workplace vaccinations, and models leveraging community pop-up and mobile centres in a range of locations, and at DHB facilities.
- The next stage of this process is to engage with stakeholders to test the approach for rollout and ensuring that we take a collaborative approach to designing the consumer experience.

Distribution to the Pacific

s 9(2)(f)(iv)

Next steps

We will provide you with a further update in the next Weekly Report.

Deputy Director-General	Sue Gordon, Deputy Chief Executive, COVID-19 Health System Response, s 9(2)(a)
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Minister of Health and Minister for COVID-19 Response: 17 December 2020

COVID-19 vaccine and immunisation programme

The COVID-19 Vaccine and Immunisation Programme Governance Group had its final meeting for the year on 9 December 2020.

Members of the group received an update on a number of areas, including outcomes from the Cabinet paper, the service design model, technology, communications, and programme assurance. Overall good progress was noted alongside the scale of the work that is still required to get underway. The Governance Group will reconvene on 15 January 2021.

Service design

Since our last update, the service design model was tested and endorsed by the Programme Steering Group.

Our approach is focused on making the vaccine accessible and ensuring the workforce is employed, trained and in the right locations from 1 March 2021. The approach is one of tight national oversight, with local delivery.

On 16 December 2020 we shared a letter with DHBs to start our formal engagement process, which included information requests so we can collaborate with them in the development of the model in the New Year.

Vaccine eligibility

We will develop advice on vaccine eligibility for Ministers following Cabinet's agreement that the COVID-19 vaccine will be free.

Immigration status currently limits access to publicly funded immunisation. Our preferred option is to allow anyone in New Zealand to have access to a free COVID-19 vaccine as it would support our goal of population immunity over time.

Further advice will be shared with Ministers in January 2021 to feed into the Cabinet paper report back.

COVID-19 immunisation plan and sequencing framework

Two documents are expected to be published on the Ministry's website following the Prime Minister's COVID-19 vaccine announcements on 17 December 2020:

- *COVID-19 Immunisation Plan*, which provides a strategic overview of the work underway to prepare for delivery of a COVID-19 vaccine

- *Sequencing Framework Summary*, which sets out the sequencing framework in a digestible format so the public can identify where they would be eligible for a vaccine under different outbreak scenarios.

These documents will be published to share information with the public about the COVID-19 vaccine and the sequencing framework, and will be supported by content on the All of Government website.

COVID-19 transition plan

s 9(2)(f)(iv)



National Immunisation Solution

The first release of the new COVID-19 National Immunisation Solution was completed on schedule for 1 January 2021. Work will continue on the solution with a target of 1 March 2021 to support first delivery of the vaccine, with support and change processes in place.

Next steps

We will provide you with a further update in the next Weekly Report.

Deputy Director-General	Sue Gordon, Deputy Chief Executive, COVID-19 Health System Response, s 9(2)(a)
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Released under the Official Information Act 1982