

Health Report

Cabinet review of COVID-19 Alert Level restrictions 5 October 2020

Date due to MO: 2 October 2020

Action required by: 2 October 2020

Security level: IN CONFIDENCE

Health Report number: 20201762

To: Hon Chris Hipkins, Minister of Health

Contact for telephone discussion

Name	Position	Telephone
Dr Ashley Bloomfield	Director-General of Health	s 9(2)(a)

Action for Private Secretaries

Return the signed report to the Ministry of Health.

Date dispatched to MO:

Review of COVID-19 Alert Level restrictions

Purpose of report

This report sets out my interim advice to inform Cabinet's review of COVID-19 Alert Level settings to take place on Monday 5 October 2020.

Key points

- Cabinet agreed on Monday 21 September 2020 that Auckland would move to the standard Alert Level 2 settings (without the additional restrictions on gatherings that had been in place) at 11:59 pm on Wednesday 23 September 2020. Cabinet also confirmed its earlier in-principle decision that the rest of New Zealand would move to Alert Level 1 from 23:59 pm on Monday 21 September 2020.
- The public health factors to be considered in relation to decisions on levels on the COVID-19 Alert System were agreed by Cabinet on 4 May 2020. These factors continue to be relevant to consideration of the new outbreak. They are my confidence that: transmission is restricted to households and known clusters, that testing and contact tracing capacity is adequate, that border control and isolation measures are robust and compliance is high, and that the health system has sufficient capacity to manage COVID-19 cases, including adequate PPE for people for whom it is recommended.
- Having reviewed those factors in relation to the current situation as at 9.30am on 2 October 2020, my current assessment is as follows:
 - There are currently 11 active identified cases of community transmission of COVID-19, with a total of 181 cases as part of the Auckland community outbreak that was identified on 11 August 2020, and 6 linked to the Christchurch returnees. There have been no new community cases identified in the past seven days.
 - All except two of these cases have been linked epidemiologically and/or genomically as part of a known cluster. The two unlinked cases were reported more than 28 days ago, and after extensive testing of contacts have not shown any wider spread, suggesting that these have not led to additional clusters.
 - Of the linked cases, four do not yet have an epidemiological link. This means that, while the cases are part of a single incursion, the precise link is unknown, raising the possibility that there were additional as-yet undetected cases in the community. Having said that, the last such case was detected on 21 August 2020, and wide community and casual contact testing has not identified significant community spread.
 - Testing rates have slightly declined but have remained at high levels with about 35,000 in the past week, showing that members of the public are still seeking and accepting tests. The decline this week is likely to be related to the school holidays and general decline in respiratory symptoms with warmer weather. Testing guidance to health services is clear that all people presenting with relevant symptoms should be tested, regardless of region; and that in Auckland additional at-risk communities should be offered a test even if asymptomatic. Contact tracing capacity remains able to manage 350 cases per day, and meets the WHO's guidelines for responsiveness, testing speed and notification of results.

- Although we cannot yet be certain of the source of the outbreaks, investigations have found no evidence of widespread or systematic failure at the border. More widely, there continues to be strong support for and compliance with the Government's approach and control measures.
- The health system has sufficient capacity, including workforce and ICU capacity, to respond to COVID-19 and has identified surge capacity and contingency plans; there is sufficient PPE capacity for those for whom it is recommended.
- There have been no new cases in the Auckland cluster since Monday 13 September, barring one case detected on 24 September 2020 in a household contact who had been in daily-monitored self-isolation since leaving isolation in Jet Park on 18 September 2020. There is good reason to be confident this cluster remains contained.
- The Christchurch returnee cluster consists of six cases, with no new cases detected since 22 September 2020. All close contacts have been isolated and have returned an initial negative test. Border quarantine procedures and infection control protocols have been reviewed and will continue to be monitored. While there remains some residual risk of undetected community transmission from this cluster, it has now been nine days with no further cases being detected, and close contacts have been identified and are in isolation, giving some confidence the cluster has been contained. This confidence is expected to improve as follow-up tests are completed and contacts complete self-isolation.
- As New Zealand moves fully in to Alert Level 1, it will be important to maintain strong public messaging to reinforce good public health behaviours and continue to emphasise the importance of practices such as staying home if sick, hand washing, considering wearing of masks in confined indoor spaces and ongoing use of QR codes to support contact tracing. The remaining requirements at Alert Level 1 on display of QR codes will support this but should be accompanied by communications which aim to avoid complacency and build resilience for the future.
- Based on the available evidence at 9.30am on 2 October 2020, **my interim advice is that on balance we are on track for Auckland to move to Alert Level 1. This will be 14 days since the last case was identified in the Christchurch returnees cluster.**
- I will advise further on any new information received before the Cabinet meeting that might bear on this advice and Cabinet's considerations.

Recommendations

The Ministry recommends that you:

- a) **Note** the advice in this report.
- b) **Agree** to forward this advice to the Prime Minister.

Yes/No



Dr Ashley Bloomfield
Director-General of Health

Hon Chris Hipkins
Minister of Health

Date:

PROACTIVELY RELEASED

Review of COVID-19 alert level restrictions

Background

1. After four new community cases of COVID-19 were identified without an established link to overseas travel, on Tuesday 11 August 2020 Cabinet decided to move to Alert Level 3 in the Auckland region and Alert Level 2 for the rest of New Zealand.
2. On Monday 24 August 2020, Cabinet agreed that, from 11.59pm on Sunday 30 August 2020, Auckland would move into Alert Level 2, with a temporary limit on gathering size, and the rest of the country would remain in Alert Level 2. Cabinet also agreed a number of changes that would come into effect to amend certain public health requirements on the use of face coverings and the display of QR codes on public transport, to apply at Level 2 in all regions.
3. On Friday 4 September, Cabinet reviewed these alert level settings and confirmed that the ongoing public health risk associated with the outbreak meant they should continue without amendment. Cabinet agreed to a further review point on Monday 14 September 2020.
4. On Monday 14 September, Cabinet agreed to maintain Alert Level 2 in Auckland, with the additional restrictions on gatherings, until at least 11:59pm on Wednesday 23 September. Cabinet agreed in principle that the rest of New Zealand should move to Level 1 from 11:59pm on Monday 21 September, depending on the spread of cases and subject to confirmation at Cabinet on 21 September.
5. On Monday 21 September, Cabinet agreed to move Auckland to the standard Level 2 arrangements (that is, without the additional restrictions on gatherings) from 11:59 pm on Wednesday 23 September. Cabinet agreed to review the Alert Levels again on Monday 5 October.
6. This report provides my interim advice to support Cabinet to review the current alert level settings on Monday 5 October.

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

7. The public health factors to be considered when making decisions about COVID-19 Alert Levels were agreed by Cabinet on 4 May 2020. These factors continue to be relevant in the context of the new outbreak. They are my confidence that:
 - a. transmission is restricted to households and known clusters;
 - b. testing and contact tracing capacity is adequate;
 - c. border control and isolation measures are robust;
 - d. public compliance is high; and
 - e. sufficient health and disability system capacity to manage COVID-19 cases, including adequate PPE for people for whom it is recommended.

Latest case information

8. As at 9.30am on 1 October 2020, there are 11 active community cases of COVID-19 in the current outbreak; 7 of those associated with the Auckland outbreak and 4 associated with the Christchurch returnees cluster. A total of 181 cases have been identified in the Auckland outbreak since 11 August 2020. There are a total of 6 cases associated with the Christchurch cluster.
9. All except two of those cases can be linked epidemiologically and/or genomically as part of a known cluster. The two unlinked cases were reported more than four weeks ago. Extensive testing of contacts of these cases has not shown any wider spread of infection, suggesting that these have not led to additional clusters. Both cases has been closed (that of the Rydges Hotel maintenance worker); the other has been determined by epidemiological and clinical staff to have been an historic infection when it was detected in August.
10. Of the 179 cases linked to the Auckland cluster, four do not have an established epidemiological link. This means that the source of infection and link between certain sub-clusters remains unknown, with the consequent possibility that there are additional as-yet undetected cases in the community. However, it has been more than 28 days since such a case was identified and wide testing around these cases has not identified wide community spread.
11. The source of the Auckland outbreak remains unknown and is under investigation, with the possibility that it will be unable to be proven. The genomic sequencing suggests that the original incursion of COVID-19 was some time ago. It also suggests that the cluster was the result of a single incursion (all cases are closely linked genomically) and not multiple events.
12. There are six cases associated with a returnee who undertook isolation in Christchurch. These cases are in two returnees and their household contacts. All identified close contacts have been traced and isolated, and have returned at least one negative test (with the exception of two young children who will not be tested, but whose parents have tested negative and have isolated along with the children).
13. There are a further 32 active cases of COVID-19 in managed isolation and quarantine facilities associated with international travel. These are managed through well-established processes.

Surveillance and contact tracing

14. Since the discovery of the first new community cases, significant wider testing and contact tracing has been undertaken to ascertain the cause of the outbreak and identify further cases.
15. National testing guidance has been updated for the current outbreak and is clear that all people presenting with relevant symptoms should be tested, regardless of region. In Auckland, at-risk communities (including Māori, Pasifika, older people and those with pre-existing conditions) should be offered a test when presenting to primary or secondary care services, even if asymptomatic. Additionally, frontline professional groups at the greatest risk of exposure (including health workers, hospitality and

transport workers) should also be offered a test. Border worker groups are subject to separate testing requirements.

16. Testing has continued to be at a high, albeit decreasing, level in recent weeks. On 30 September 2020, 5,723 tests were performed, bringing the weekly total to 35,655. Over 450,000 tests have been carried out in total since 12 August 2020. This level of testing is sustainable in the medium term, without putting undue pressure on supplies or laboratory staff. We have supplies in stock for nearly 300,000 tests.
17. The recent decline in testing is likely to be attributable to school holidays and warmer weather meaning fewer respiratory symptoms. On an ongoing basis, testing is focused on the border, both arrivals and border workers, and quickly detecting community transmission. In particular, everyone with COVID-19 symptoms should be offered a test and the national guidance is clear on this. It will be important to continue to promote testing and encourage everyone with possible COVID-19 symptoms to seek a test.
18. Contact tracing capacity is sufficient to manage 350 cases per day. Of the 4047 close contacts identified as part of the current outbreak, all had been contacted as on 9am on Friday 2 October 2020. Public Health Units are continuing to work well to support each other's efforts.

Health and disability system capacity

19. There is currently no one in hospital with COVID-19, at 2 October 2020. Hospitals are well-placed to manage cases that do require hospital care and have plans in place to manage a surge in demand associated with new outbreaks.
20. There are good stocks of personal protective equipment. As of 30 September, 111 million gloves, 2.4 million pairs of safety glasses/face shields, and 117 million masks are available from District Health Board and Ministry of Health reserves.

Border controls

21. Robust border controls are critical to the continued success of our elimination strategy. The air and maritime borders remain closed to non-residents and a limited number of others, except by Minister-approved exception.
22. Although we have not yet confirmed the origin of the Auckland cluster, at present the evidence from ongoing investigations does not suggest this is the result of a widespread or systemic failure in border controls. Mandatory testing of all air and maritime border staff did not identify any positive cases, with the exception of the recent case of the maintenance worker in the Rydges Hotel. This suggests that infection control protocols at the border have been working as intended. We have now put in place orders to require the testing of all border workers on a one-off basis and are implementing a regular testing regime.
23. Source identification work for the Christchurch returnee case has found the most likely link appears to be related to rubbish bin usage, although investigation is continuing. The identified issues have been corrected, and people identified via CCTV as potentially in contact with a contaminated surface are being followed up.
24. Some of the contact details for people released from isolation in Christchurch were not current. This has meant delays in locating some of the 138 identified contacts. There are

5 people still with finding services. The Ministry is working with MBIE to ensure contact details for people who have passed through managed isolation or quarantine are as up to date as possible. In addition, 14 of the found people have so far declined a second test. It is important to remember that these are casual contacts, so pose a low risk, and have passed through managed isolation and tested negative before release.

Compliance and public sentiment

25. There is still good support, for and compliance with, the Government's approach and control measures. There number of registrations for the NZ COVID Tracer application has plateaued at just over 2,200,000 registered users. There has been an apparent decrease in app activity, with only about 1 million QR codes scanned on 30 September 2020, although this may be attributable to the app now allowing scans when a user is not logged in, so data not being available until they log in again. The functionality was changed on 9 September, with the Ministry's data showing a steep drop in scans from shortly after the change.

Advice on alert level settings

26. Based on the available evidence at 9.30am on 2 October 2020, **my interim advice is that on balance we are on track for Auckland to move to Alert Level 1.**
27. There have been no new cases in the Auckland cluster since Monday 13 September, barring one case detected on 24 September 2020 in a household contact who had been in daily-monitored self-isolation since leaving isolation in Jet Park on 18 September 2020.
28. The Christchurch returnee cluster consists of six cases, with no new cases detected since 22 September 2020. All close contacts have been isolated and have returned an initial negative test. Border quarantine procedures and infection control protocols have been reviewed and
29. As New Zealand moves fully in to Alert Level 1, it will be important to maintain strong public messaging to reinforce good public health behaviours and continue to emphasise the importance of practices such as staying home if sick, hand washing, considering wearing of masks in confined indoor spaces and ongoing use of QR codes to support contact tracing. The remaining requirements at Alert Level 1 on display of QR codes will support this but should be accompanied by multichannel communications which aim to avoid complacency and build resilience for the future.

Summary

30. In summary, **I recommend moving Auckland into Level 1 from 11:59 pm on Wednesday 7 October 2020.**

Next steps

31. I will advise further on any new information received before the Cabinet meeting on Monday 5 October that might bear on the situation.

ENDS.

PROACTIVELY RELEASED