

TESTING STRATEGY OBJECTIVES

The objectives of the updated testing strategy are to:

1. Ensure rapid identification of all cases of COVID-19 to assess and clinically care for them as well as stop any ongoing transmission of infection by isolation, tracing and quarantining their contacts
2. Identify and minimise any undetected community spread in New Zealand and
3. Monitor people at higher risk of exposure to COVID-19 to ensure that protections in place are working
4. Ensure access to testing is effective and equitable for all groups in particular Māori

Stream 1

TEST: People presenting with symptoms consistent with COVID-19

- Healthline
- CBACs
- Primary Care

If positive, becomes a **CASE**

+/- High Index Suspicion (HIS)

If symptomatic, and have had any of the following:

- International travel
- Contact with a confirmed or probable case
- Direct contact with a person who has travelled overseas (e.g. Customs and Immigration staff, staff at quarantine/isolation facilities)
- Worked or cleaned at an international airport, shipping vessel or maritime port in area visited by international arrivals, or any other criteria requested by the local Medical Officer of Health

Stream 2

TEST: Contacts of cases (Contact Tracing)

This includes symptomatic, and where appropriate asymptomatic testing.

These people are referred to:

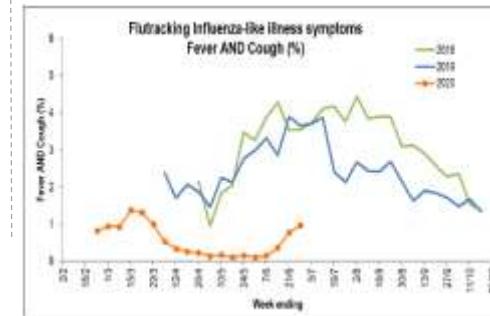
- CBACs
- GPs

If positive, becomes a **CASE**

Stream 3

Health Intelligence Gathering Surveillance Information

- FluTracker survey
- Healthstat
- GP Sentinel Surveillance



Stream 4

Testing at the Border

International Arrivals

Health Check on Arrival

Symptomatic

QUARANTINE
(e.g. Jet Park)

TEST
Immediately

If Negative...

Stay in Quarantine Managed according clinical protocol for clinical care and discharge

Asymptomatic

Managed Isolation Facilities (MIF)

TEST

Exit on Day 14 (if Negative)

On Day 3 and Day 12

If Positive...

CASE

Contact Tracing **Stream 2**
Test close contacts/family

Air Crew

Health Check on Arrival

Symptomatic

QUARANTINE
(as International)

Self Isolate for 48 hours

TEST

POSITIVE
(Quarantine)

NEGATIVE

CASE

Asymptomatic

High Risk Airport

Low/Med Risk Airport

1. Rolling schedule for asymptomatic testing

2. Test via GP / CBAC if becomes symptomatic **Stream 1**

Able to work
(Point 2 only)

Contact Tracing **Stream 2**

Border Staff

Includes:

- Customs staff
- Immigration staff
- Aviation Security
- Bio Security
- Cleaning Staff
- Airport retail
- Transport
- Staff at Facilities
- Health Staff and testers at Facilities
- Maritime border – e.g. Ships pilots

1. DAILY HEALTH CHECK/ HEALTH SURVEY

Regular (daily) health checks / health surveys for all staff by employers.

If report symptoms

2. ASYPTOMATIC TESTING

Starting from 10 July, a rolling schedule for testing asymptomatic staff will take place

TEST

Via CBACs / GP **Stream 1**

SURVEILLANCE DATA ANALYSIS

The whole system relies on analysis of data gathered locally and nationally from:

- The testing and activities outlined above in parts 1 to 4 of the system
- Supplementary data attached to the test results
- Rapid and comprehensive investigations of a new outbreak, including lessons learned from operational performance locally and nationally, and details of active clusters and activity at the border
- A thorough understanding of the individual circumstances at the DHB/PHU level, and
- Integration of one-off findings from local and international research and experience, and emerging evidence
- Information from new COVID-19 testing methods as they become available, such as serology tests and detecting SARS-CoV-2 in wastewater
- Interpretation of modelling of disease spread, and
- The results of intermittent surveys on attitudes towards health services

The COVID-19 expert working group is a team of technical experts drawn from ESR and teams from the Ministry of Health. This working group will work closely with other related advisory groups and stakeholders as appropriate.

Regular data and information are gathered and supplied to the working group about active clusters, investigations, observed symptoms, border activity, testing and other pertinent information to inform next steps.

Risk levels for Air Crew

The risk levels for aircrew are determined by international airport (its a combination of the country, the layover conditions and it is determined port by port). Current examples:

LOW	Rarotonga, Cook Islands Nadi, Fiji Sydney (no layover)
MED	Hong Kong Narita, Japan Sydney (1 night layover)
HIGH	San Francisco, USA Los Angeles, USA