



SITREP 73
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hours 1 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours on 1 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here:
<https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 1 April 2020 there are 708 combined confirmed and probable cases. There are 61 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website:
<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. New Zealand recorded its first death linked to COVID-19 on 29 March 2020.
4. As at 0900 hours on 1 April 2020 there are 82 recovered cases (up 8 from 31 March 2020).
5. Additional border measures came into effect at 0200 hours 26 March 2020. Only New Zealand residents and citizens (and their children and partners) are still permitted to enter New Zealand.

KEY MESSAGES

6. New Zealand has an alert system specifically for COVID-19. As at 2359 hours on 25 March 2020 we are on “Level 4: Eliminate.” As part of the measures being taken to contain COVID-19, New Zealanders have been instructed to stay at home, educational facilities have been closed, businesses are closed except for those deemed as essential services and domestic travel is limited.
7. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

8. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
9. We continue to regularly review border restrictions and advice around any changes required. Border advice has been updated and is available on the Ministry of Health website. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>
10. The Ministry of Health is continuing to actively track and monitor COVID-19 cases in New Zealand.
11. Close contacts of cases will be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.

OUTBREAK SITUATION

12. As at 0900 hours on **1 April** 2020 there are **708** combined confirmed and probable cases. There are **61** combined new confirmed and probable cases reported in the last 24 hours. See Figure 1 for the epidemic curve and Figure 2 for DHB breakdown.
13. As at 0900 hours on **1 April** 2020 there are **82** recovered cases.

Figure 1: COVID-19 Epidemic Curve

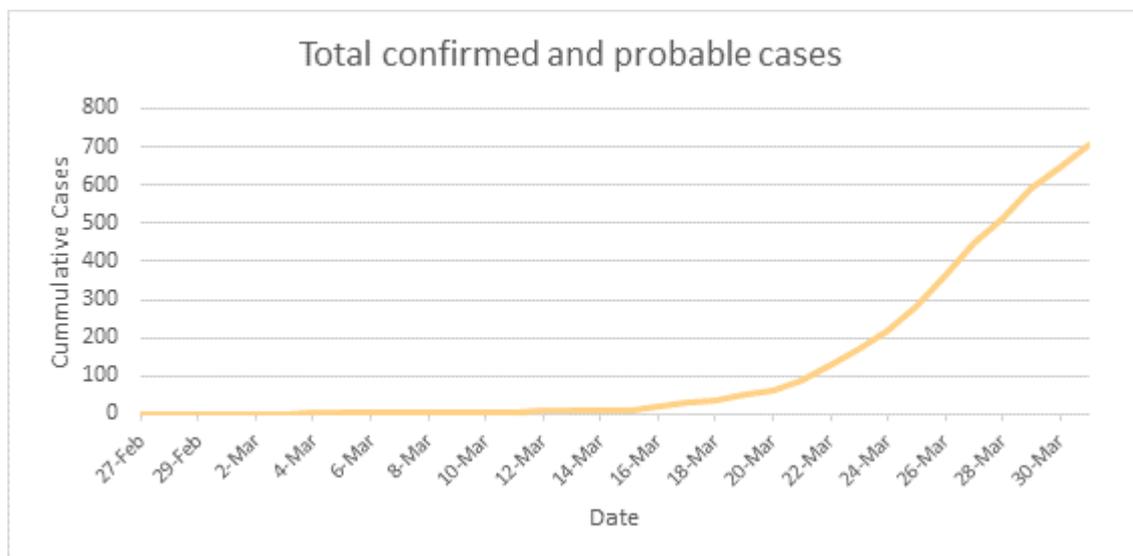


Figure 2: COVID-19 confirmed and probable cases by DHB

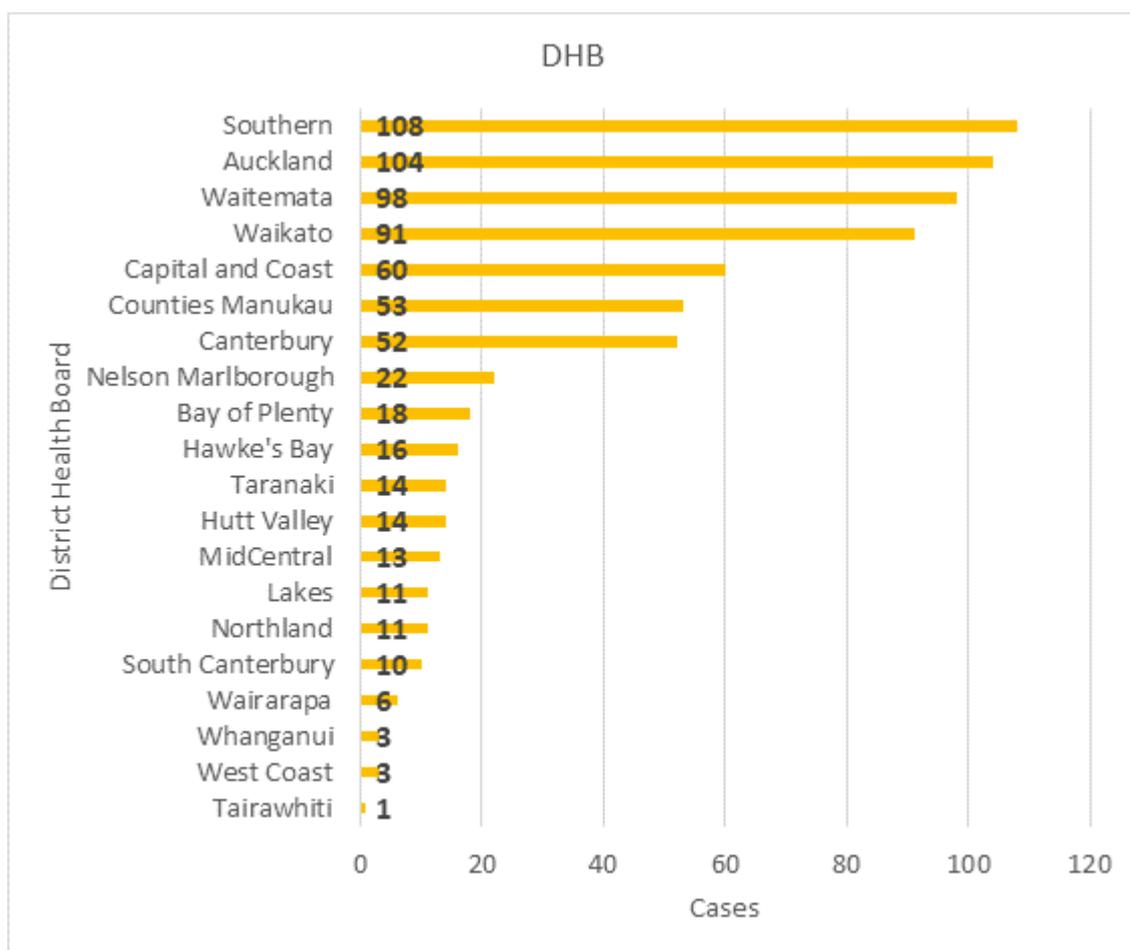


Table 1: hospital inpatients by DHB

DHB	Patients	Condition & Bed type
Auckland	1	Stable on ward
Bay of Plenty	1	Stable on ward
Canterbury	1	Stable on ward
Capital & Coast	3	3 patients: 2 stable on ward; 1 critical on ICU ventilator
Counties Manukau	2	Stable on ward
Hawke's Bay	1	Stable on ward
MidCentral	1	Stable on ward
Nelson Marlborough	2	1 stable on ward 1 stable on ICU, no ventilator
Southern	1	stable on ward
Tairawhiti	1	Stable on ward
Taranaki	1	Stable on ward
Waikato	1	Stable on ward

New Zealand health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
15. ESR, Canterbury Health Laboratories (CHL), LabPLUS and Middlemore hospital in Auckland, Waikato hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
16. See Table 2, below, for further information on laboratory capacity and the number of people tested.

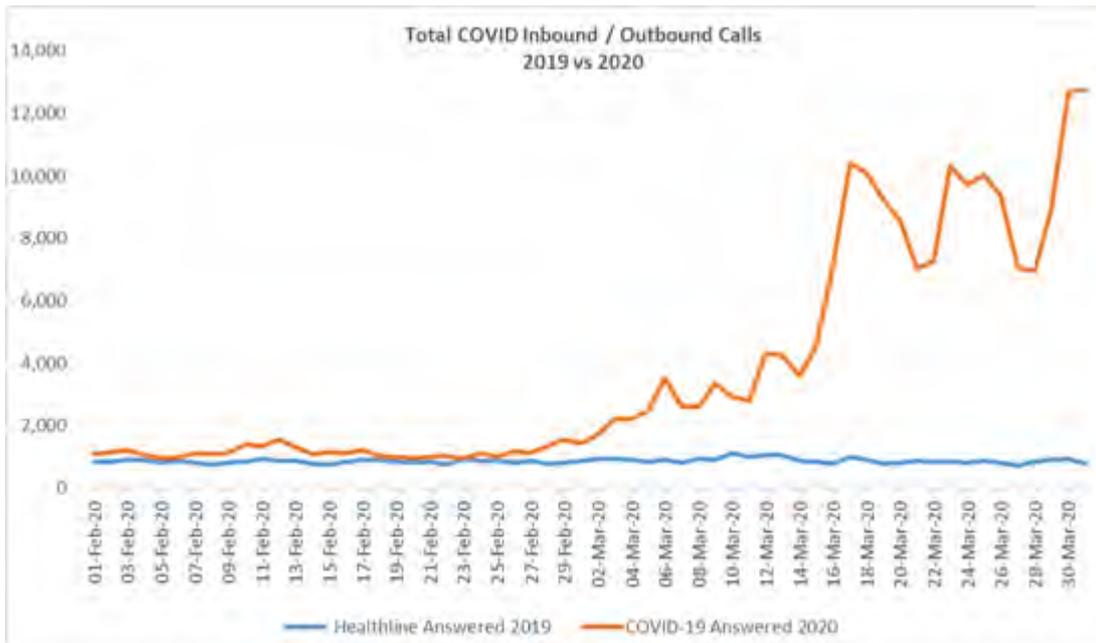
Table 2: laboratory tests done and capacity

Lab Testing	Tests done	Date (range)
Daily total	2004	31 March 2020
7-day rolling average	1,843 (per day)	24 to 31 March 2020
Total lab tests to date	23,481	3 to 31 March 2020
Capacity		
Total daily national capacity	3,546	

National Telehealth Service update

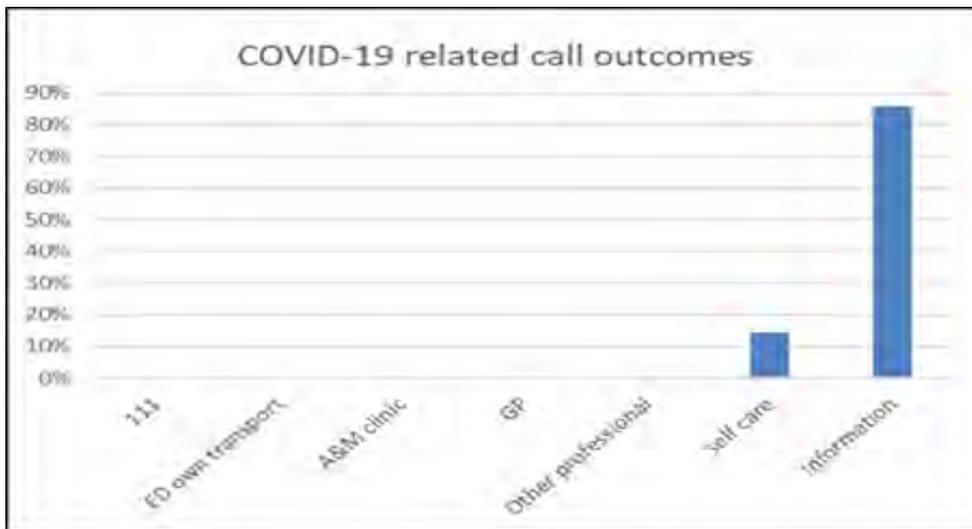
17. On 31 March 2020, 12,763 calls were answered/outbound calls made (compared to 773 on the same day last year).
18. This was the busiest day to date, but about 5,000 of the calls were outbound calls for self isolation checks. The average wait times have reduced substantially. The graph below compares call volumes today to the same day last year.

Figure 3: calls to and from Healthline



19. On 31 March 2020 the clinical trends seen include:
- 57% of callers were experiencing cold or flu-like symptoms
 - 29% were regarding people who had been outside NZ in the previous 4 weeks
 - 100% received self-care advice or information.

Figure 4: outcomes of calls



20. On 31 March there were 114 callers concerned about Coronavirus who expressed severe distress. This is 29.1% of answered calls on Mental Health support lines. The service was 38% busier than forecast – with COVID related topics discussed in most calls/texts.

Table 3: calls to helpline about mental health matters

Is the caller experiencing distress because of Coronavirus? Yes		
Date	# Cases	on answer
19/03/2020	36	11.9%
20/03/2020	39	13.3%
21/03/2020	20	8.4%
22/03/2020	60	24.5%
23/03/2020	146	48.3%
24/03/2020	165	59.4%
25/03/2020	177	49.4%
26/03/2020	149	32.1%
27/03/2020	62	18.6%
28/03/2020	87	22.7%
29/03/2020	129	38.1%
30/03/2020	177	44.5%
31/03/2020	114	29.1%
Grand Total	1361	

Community Based Assessment Centres (CBAC)

21. As at 0900 hours on 1 April 2020 there are 50 CBACs active and 45 designated practices/testing stations.

Contact Tracing — National Close Contact Service (NCCS)

22. Since 24 March 2020, the number of contacts traced (i.e. resolved) is 3,382.

New Zealand border response

23. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
24. New Zealand Customs data showed 309 travellers entered New Zealand on 31 March 2020. Everyone permitted to enter New Zealand is screened on arrival. Passengers are disembarked in small groups from their aircraft and met by Government officials at the gate. Officials discuss passengers' self-isolation and transport arrangements, answer questions, and provide assistance. The Ministry of Health website includes the requirements for travel and isolation at <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>.

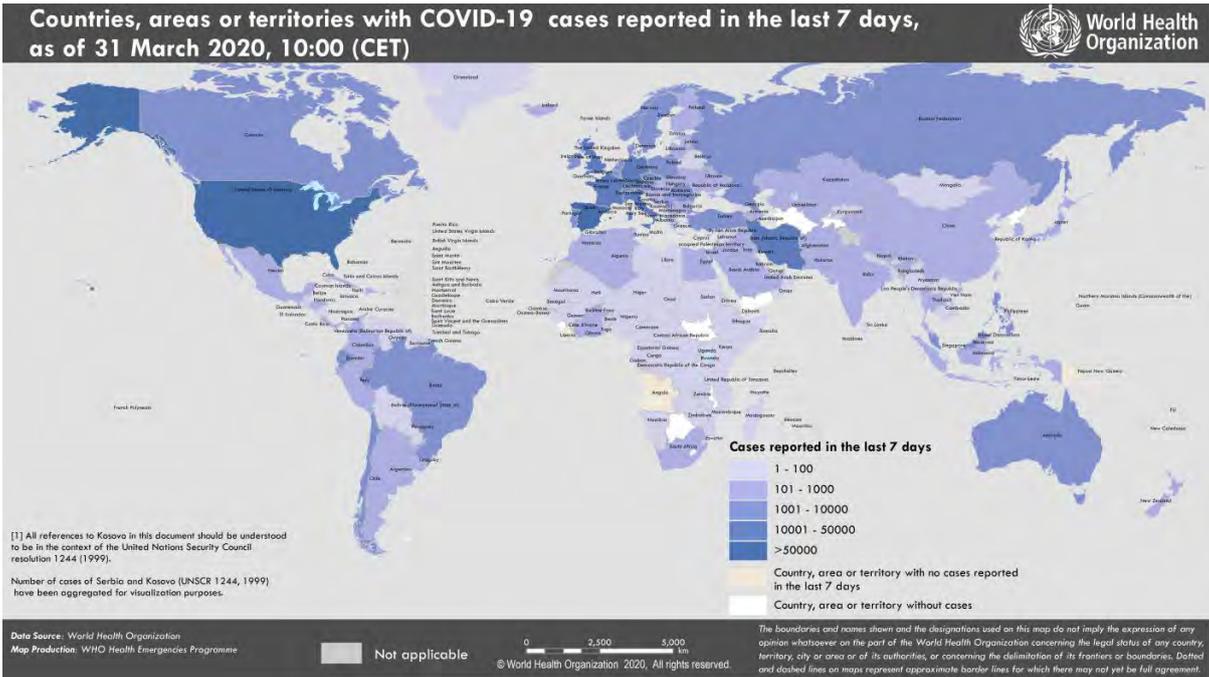
- 25. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. These are for persons with no suitable transport or accommodation for self-isolation identified. Over 3,300 rooms and 1,400 campervans are available. Flights from Auckland to other New Zealand cities **commenced yesterday** for safely relocating travellers to points where they can travel home to go into self-isolation.
- 26. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.

Global

27. As reported by the WHO on **31 March 2020**, globally there have been **57,610** confirmed new cases (now **750,890** confirmed cases in total) and **3,301** new deaths reported (**36,405** confirmed deaths in total). Based on the number of reported cases globally, the case fatality rate is approximately **4.8** percent.

28. As reported by WHO on **31 March 2020**, no new country, territory or area reported confirmed cases. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 5: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.

- The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.
- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
PIM	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1300 hours on 2 April 2020.**

Prepared by: Martin Kennedy, NHCC Intelligence

Approved by: Bruce Mackay, NHCC Response Manager



SITREP 74
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hours 2 April 2020
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Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 2 April 2020 there are 797 combined confirmed and probable cases. There are 89 combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. New Zealand recorded its first death linked to COVID-19 on 29 March 2020.
4. As at 0900 hours on 2 April 2020 there are 92 recovered cases (up 10 from 1 April 2020).
5. The criteria for COVID-19 testing will now include anyone showing respiratory symptoms consistent with COVID-19, regardless of travel history and close contacts. Work is underway to increase testing capacity up to 5,000 per day to provide the most accurate picture of COVID-19 transmission in New Zealand.
6. Additional border measures came into effect at 0200 hours 26 March 2020. Only New Zealand residents and citizens (and their children and partners) are still permitted to enter New Zealand.

KEY MESSAGES

7. We are currently on Alert Level 4. As part of measures being taken to contain COVID-19, New Zealanders have been instructed to stay at home, educational facilities have been closed, businesses are closed except for those deemed as essential services and domestic travel is limited.

8. Testing capacity for COVID-19 continues to increase and more complete tests continue to arrive.
9. We know how crucial it is to test people for COVID-19 as we work to understand what level of community transmission there may be and to break the chain of transmission.
10. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
11. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
12. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.

OUTBREAK SITUATION

13. As at 0900 hours on **2 April** 2020 there are **797** combined confirmed and probable cases. There are **89** combined new confirmed and probable cases reported in the last 24 hours. See Figure 1 for the epidemic curve and Figure 2 for DHB breakdown.
14. As at 0900 hours on **2 April** 2020 there are **92** recovered cases.

Figure 1: COVID-19 Epidemic Curve

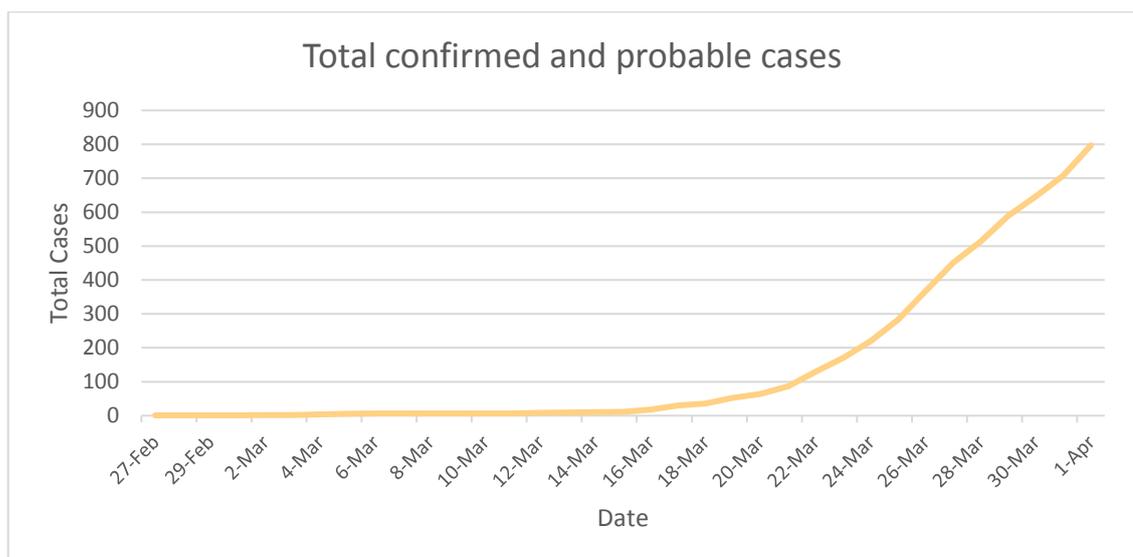


Figure 2: COVID-19 confirmed and probable cases by DHB

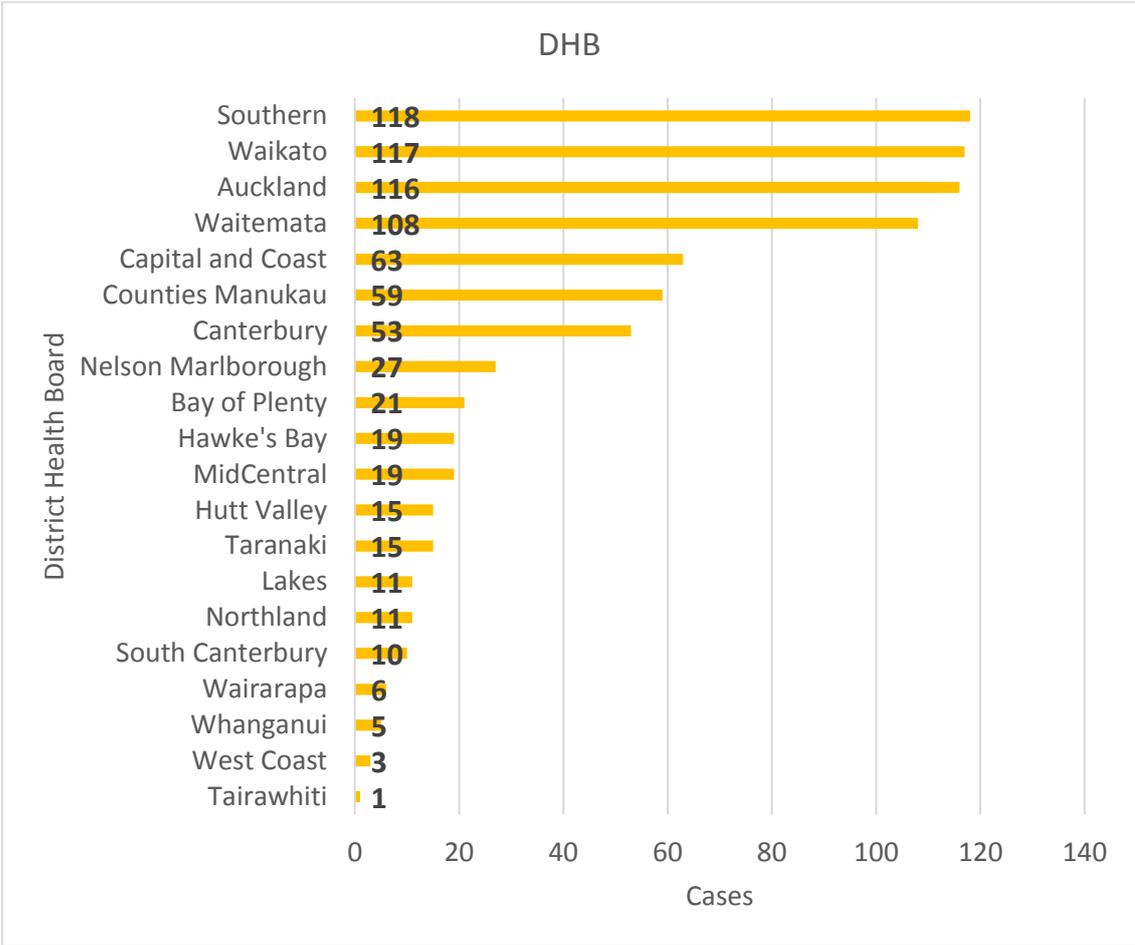


Table 1: COVID-19 in-patients across all DHBs

DHB	Patients	Condition & Bed type
Auckland	1	Stable on ward
Bay of Plenty	1	Stable on ward
Canterbury	1	Stable on ward
Capital & Coast	3	3 patients, 2 stable on ward, 1 stable on ICU ventilator
Hawke's Bay	1	Stable on ward
Nelson Marlborough	2	1 stable on ward

		1 stable on ICU no ventilator
Southern	1	Stable on ward
Tairāwhiti	1	Stable on ward
Taranaki	1	Stable on ward
Waikato	1	Stable on ward

New Zealand health sector response

15. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
16. ESR, Canterbury Health Laboratories (CHL), LabPLUS and Middlemore hospital in Auckland, Waikato hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
17. See Table 2, below, for further information on laboratory capacity and the number of people tested.

Table 2: laboratory tests done and capacity

Lab Testing	Tests	% Difference*	Date range
7-day rolling average	1,848 (per day)	0%	26 March to 1 April 2020
Total lab tests to date	26,015	10%	3 March to 1 April 2020
Test Capacity	4,182	4%	1 April 2020

* Percent difference is calculated against yesterday's counts.

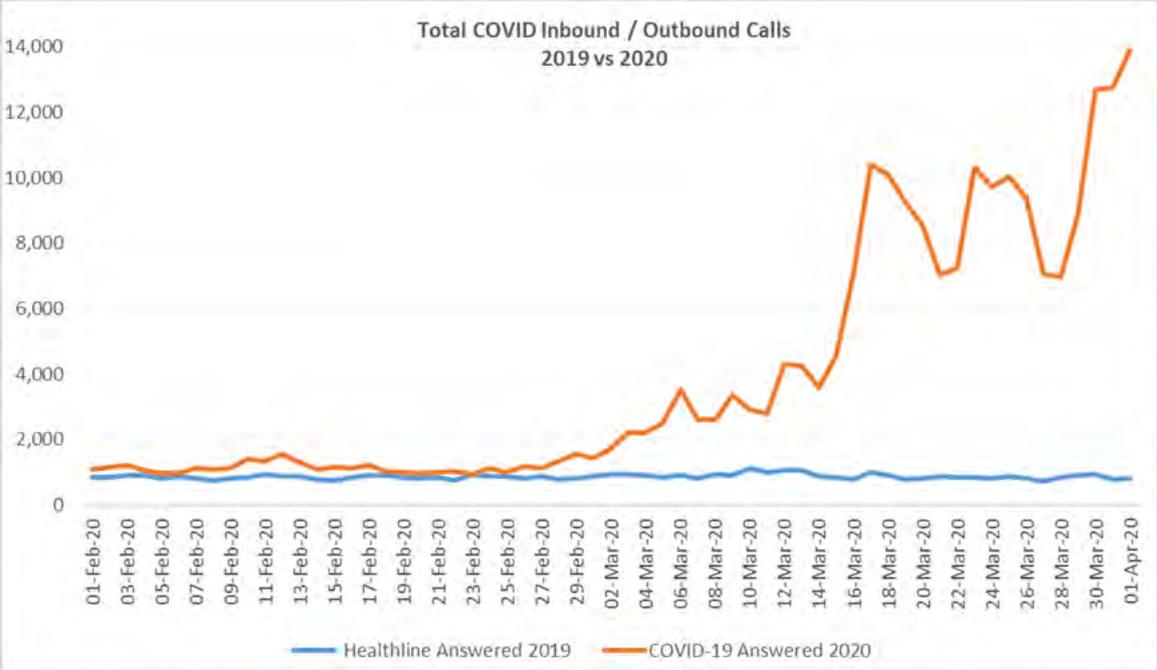
18. **The criteria for COVID-19 testing will now include anyone showing respiratory symptoms consistent with COVID-19, regardless of travel history and close contacts. Work is underway to increase testing capacity up to 5,000 per day to provide the most accurate picture of COVID-19 transmission in New Zealand.**

National Telehealth Service update

19. On **1 April 2020**, **13,902** calls were answered/outbound calls made (compared to 818 on the same day last year).

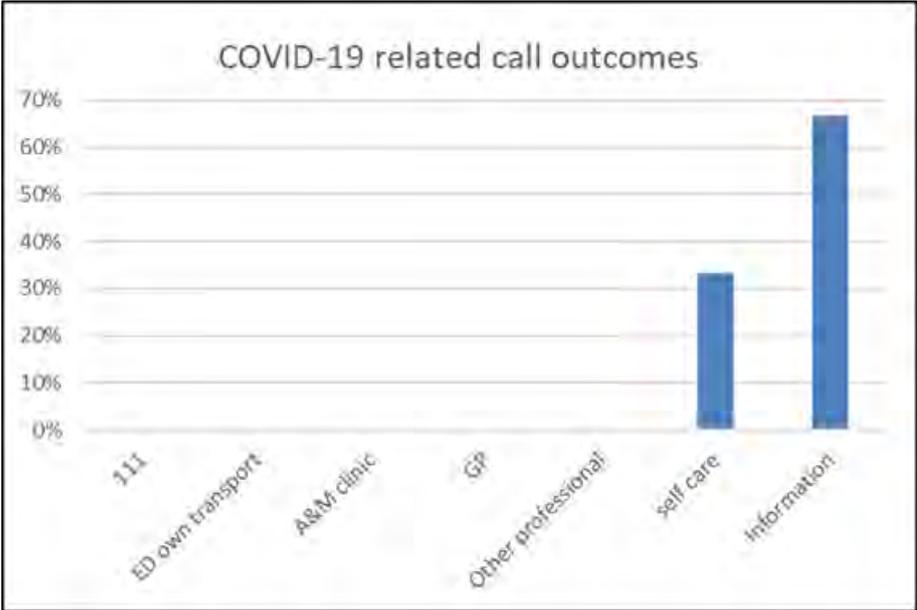
20. This was the busiest day to date, but about 6,224 of the calls were outbound calls for self isolation checks. The average wait times have further reduced in the past 24 hours. The graph below compares call volumes today to the same day last year.

Figure 3: calls to and from Healthline



21. On 1 April 2020 the clinical trends seen include:
- 45% of callers were experiencing cold or flu-like symptoms
 - 100% received self-care advice or information.

Figure 4: outcomes of calls



22. On 31 March there were 108 callers concerned about Coronavirus who expressed severe distress. This is 33.3% of answered calls on Mental Health support

lines. The service was 34% busier than forecast – with COVID related topics discussed in most calls/texts.

Table 3: calls to helpline about mental health matters

Is the caller experiencing distress because of Coronavirus? Yes		
Date	# Cases	on answer
19/03/2020	36	11.9%
20/03/2020	39	13.3%
21/03/2020	20	8.4%
22/03/2020	60	24.5%
23/03/2020	146	48.3%
24/03/2020	165	59.4%
25/03/2020	177	49.4%
26/03/2020	149	32.1%
27/03/2020	62	18.6%
28/03/2020	87	22.7%
29/03/2020	129	38.1%
30/03/2020	177	44.5%
31/03/2020	114	29.1%
01/04/2020	108	33.3%
Grand Total	1469	

Community Based Assessment Centres (CBAC)

23. As at 0900 hours on 2 April 2020 there are 50 (↑10) CBACs active and 47(↑2) designated practices/testing stations.

Contact Tracing — National Close Contact Service (NCCS)

24. Since 24 March 2020, the number of contacts traced (i.e. resolved) is 3,382.

New Zealand border response

25. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand’s territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
26. New Zealand Customs data showed 188 travellers entered New Zealand on 1 April 2020. Everyone permitted to enter New Zealand is screened on arrival. Passengers are disembarked in small groups from their aircraft and met by Government officials at the gate. Officials discuss passengers' self-isolation and transport arrangements, answer questions, and provide assistance. The Ministry of Health website includes the requirements for travel and isolation at <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel->

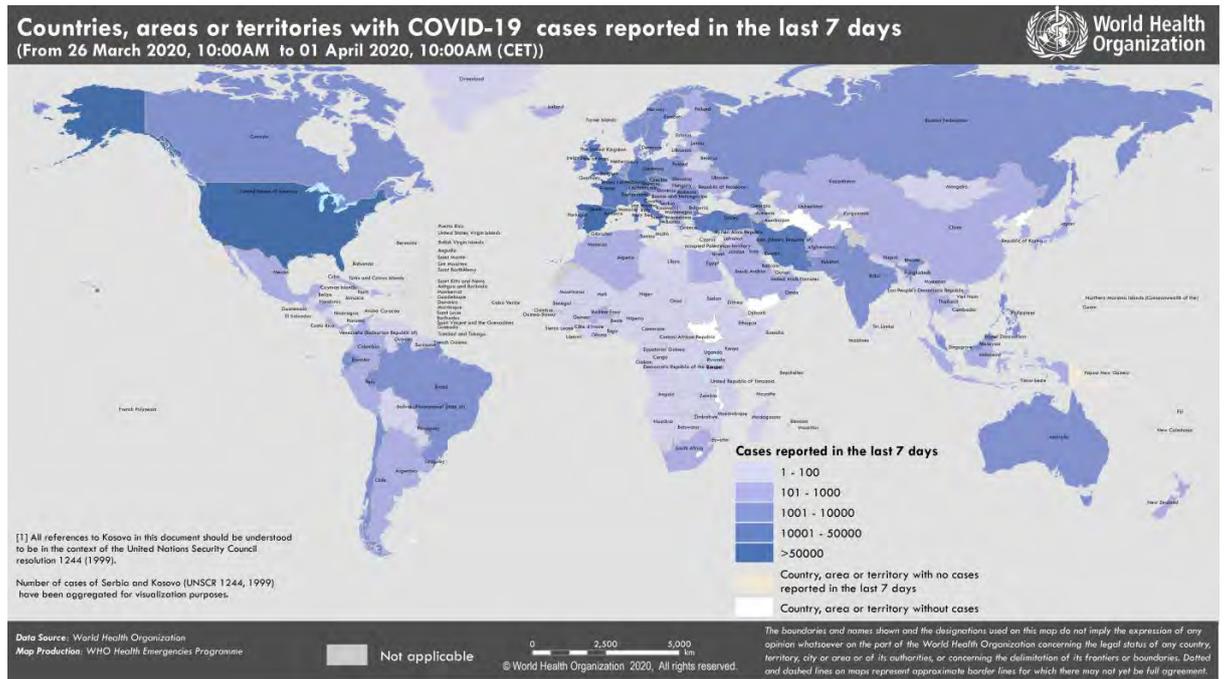
[coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls](#).

27. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. These are for persons with no suitable transport or accommodation for self-isolation identified. Over 3,300 rooms and 1,400 campervans are available **nationally**. Flights from Auckland to other New Zealand cities commenced on 31 March 2020 for safely relocating travellers to points where they can travel home to go into self-isolation.
28. **There are currently domestic repatriation flights returning guests to an approved self isolation location. A cabinet paper today approved an additional Qatar Airline flight daily into New Zealand which will add pressure on these facilities.**
29. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.

Global

30. As reported by the WHO on **1 April** 2020, globally there have been **72,736** confirmed new cases (now **823,626** confirmed cases in total) and **4,193** new deaths reported (**40,598** confirmed deaths in total). Based on the number of reported cases globally, the case fatality rate is approximately **4.9** percent.
31. As reported by WHO on **1 April** 2020, three new countries/territories/areas reported confirmed cases of COVID-19 in the past 24 hours: **Botswana, Burundi, and Sierra Leone**. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 5: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 12 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 infection for people in the EU/EEA and UK is currently considered moderate for the general population and high for older adults and individuals with chronic underlying conditions, based on the probability of community transmission and the impact of the disease.

- The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high. The impact and risk assessment on health system capacity can be mediated by the application of effective infection prevention and control and surge capacity measures.
- The risk of transmission of COVID-19 in health and social institutions with large vulnerable populations is considered high. The impact of transmission in health and social institutions can be mediated by the application of effective infection prevention and control and surge capacity.
- The EU/EEA and the UK are quickly moving toward a scenario of sustained community transmission of COVID-19. The situation is evolving very quickly, and a rapid, proactive and comprehensive approach is essential in order to delay transmission, as containing transmission to local epidemics is no longer considered feasible. A rapid shift from a containment to a mitigation approach is required, as the rapid increase in cases, that is anticipated in the coming days to few weeks may not provide decision makers and hospitals enough time to realise, accept and adapt their response accordingly if not implemented ahead of time. Measures taken at this stage should ultimately aim at protecting the most vulnerable population groups from severe illness and fatal outcome by reducing transmission and reinforcing healthcare systems.

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APPENDIX 3: Psychosocial Coordination

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NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
PIM	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1300 hours on 3 April 2020.**

Prepared by: Kirsten Forrest and Bridget Murphy, NHCC Intelligence

Approved by: Johnny Mulheron, NHCC Response Manager



SITREP 75
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hours 3 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of **1300 hours on 3 April 2020**.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At **0900** hours on **3 April 2020** there are **868** combined confirmed and probable cases. There are **71** combined new confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. New Zealand recorded its first death linked to COVID-19 on 29 March 2020.
4. As at **0900** hours on **3 April 2020** there are **103** recovered cases (**up 11 in the last 24 hours**).
5. Additional border measures came into effect at 0200 hours 26 March 2020. Only New Zealand residents and citizens (and their children and partners) are still permitted to enter New Zealand.

KEY MESSAGES

6. We are currently on Alert Level 4. As part of measures being taken to contain COVID-19, New Zealanders have been instructed to stay at home, educational facilities have been closed, businesses are closed except for those deemed as essential services and domestic travel is limited.
7. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

8. We know how crucial it is to test people for COVID-19 as we work to understand what level of community transmission there may be and to break the chain of transmission.
9. Testing capacity for COVID-19 continues to increase and more complete tests continue to arrive.
10. There is more PPE on the way to New Zealand and clinical advice is available about recommended use of PPE.
11. We have confirmed an order for 41 million additional face masks that will start to arrive over the next six weeks.
12. The Ministry of Health has established contracts with two major third party logistics service providers. Between them they will manage the distribution of PPE to both the health sector and the non-health essential workforce.
13. In addition, there is considerable ongoing Government effort to secure supplies of other PPE items.
14. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
15. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.

OUTBREAK SITUATION

16. As at 0900 hours on 3 April 2020 there are 868 combined confirmed and probable cases. There are 71 combined new confirmed and probable cases reported in the last 24 hours. See Figure 1 for the epidemic curve and Figure 2 for DHB breakdown.
17. As at 0900 hours on 3 April 2020 there are 103 recovered cases.

Figure 1: COVID-19 Epidemic Curve

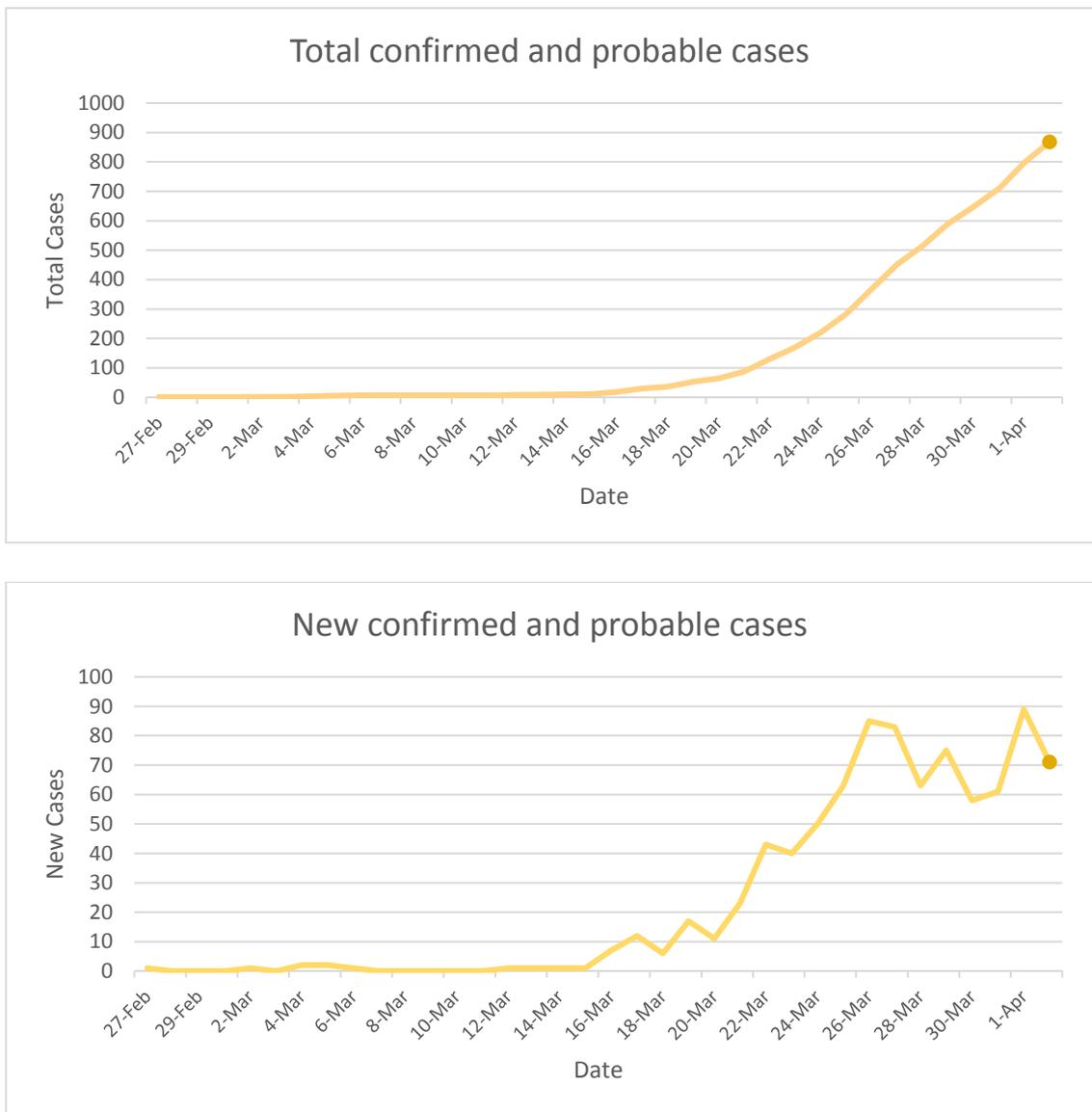


Figure 2: COVID-19 confirmed and probable cases by DHB

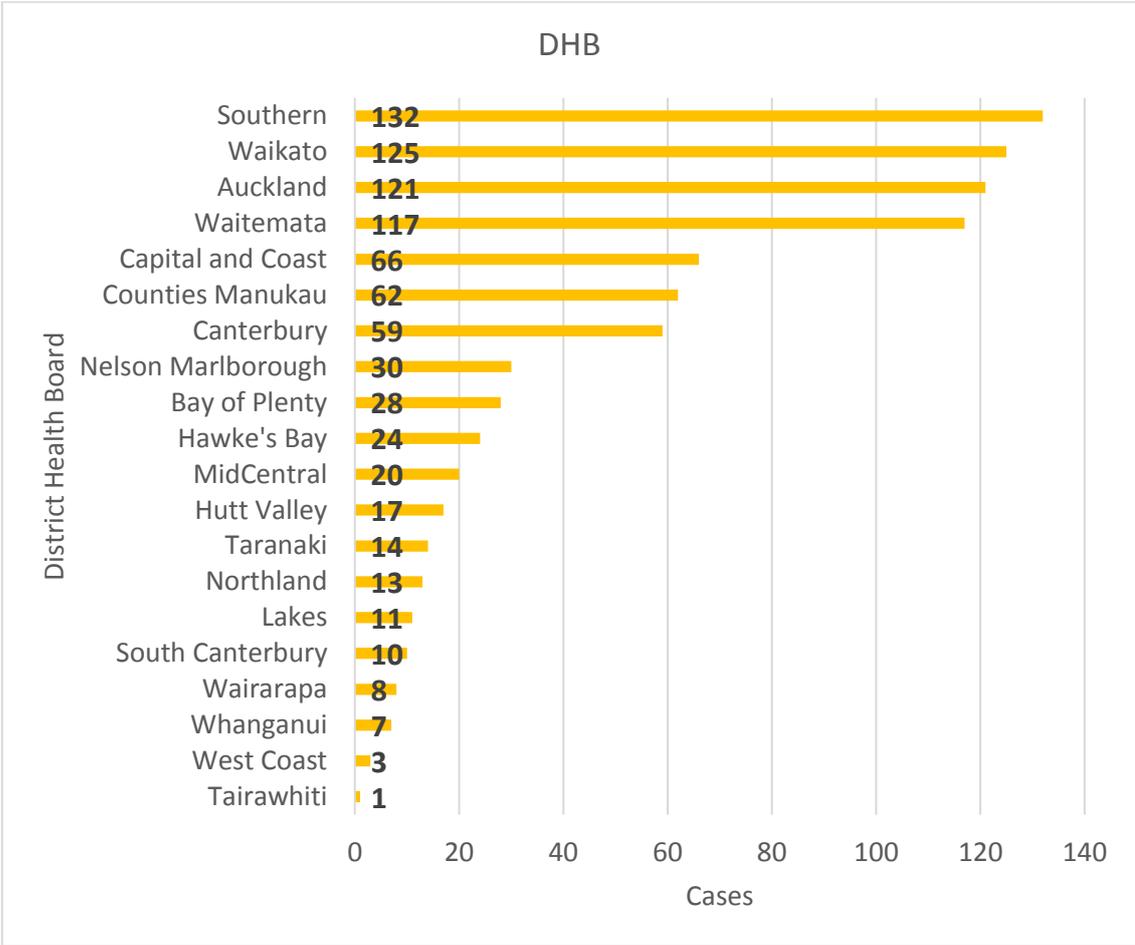


Table 1: COVID-19 in-patients across all DHBs

DHB	Patients	Condition & Bed type
Auckland	1	Stable on ward
Bay of Plenty	1	Stable on ward
Capital & Coast	3	1 stable on ward, 1 deteriorating on ward, 1 stable on ICU ventilator
Counties Manukau	1	Stable on ward
Hawke's Bay	1	Stable on ward
Nelson Marlborough	2	2 stable on ward

Southern	1	Stable on ward
Tairāwhiti	1	Stable on ward
Taranaki	1	Stable on ward
Waikato	1	Stable on ward
Total	13	

New Zealand health sector response

18. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
19. ESR, Canterbury Health Laboratories (CHL), LabPLUS and Middlemore hospital in Auckland, Waikato hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
20. See Table 2, below, for further information on laboratory capacity and the number of people tested.

Table 2: laboratory tests done and capacity

Lab Testing	Tests	% Difference*	Date range
7-day rolling average	2041 (per day)	10%	27 March to 2 April 2020
Total lab tests to date	29,485	11%	9 March to 2 April 2020
Test Capacity	5,438	16%	3 April 2020
Supplies in Stock	37,951	21%	3 April 2020

* Percent difference is calculated against yesterday's counts.

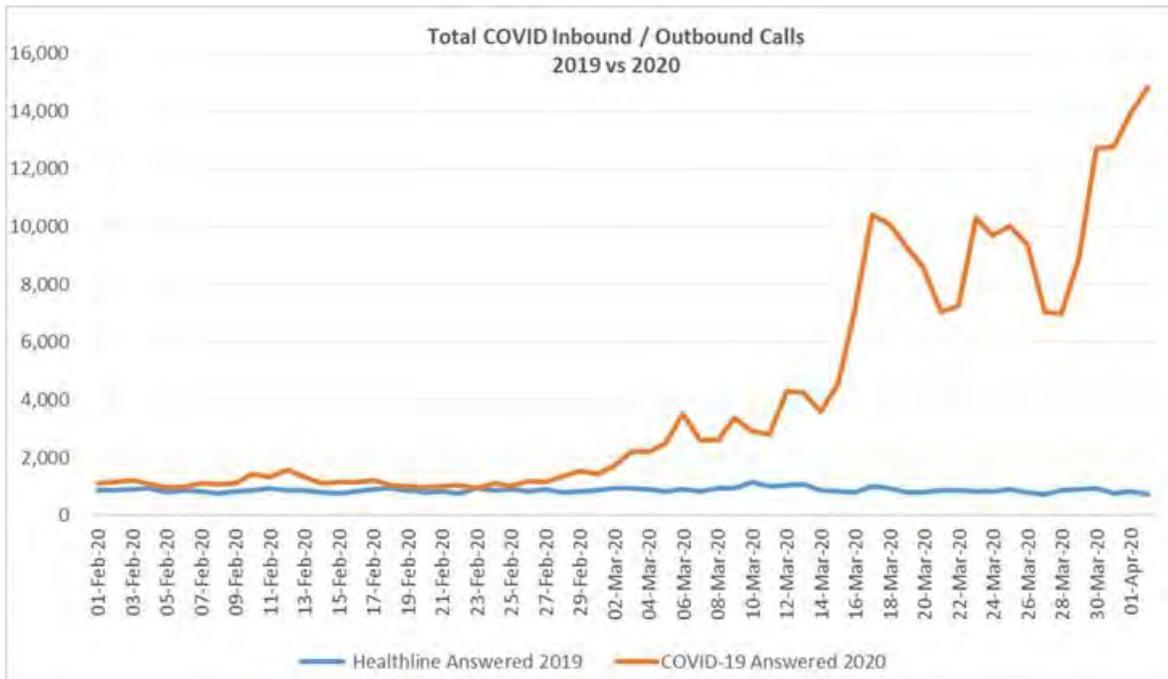
21. The case definition was amended on 2 April 2020 to de-couple respiratory symptoms from a travel history. Testing is now available to people with respiratory symptoms suggestive of COVID-19 infection (including the acute onset of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>

National Telehealth Service update

22. Information and insights relating to call activity and self-isolation:

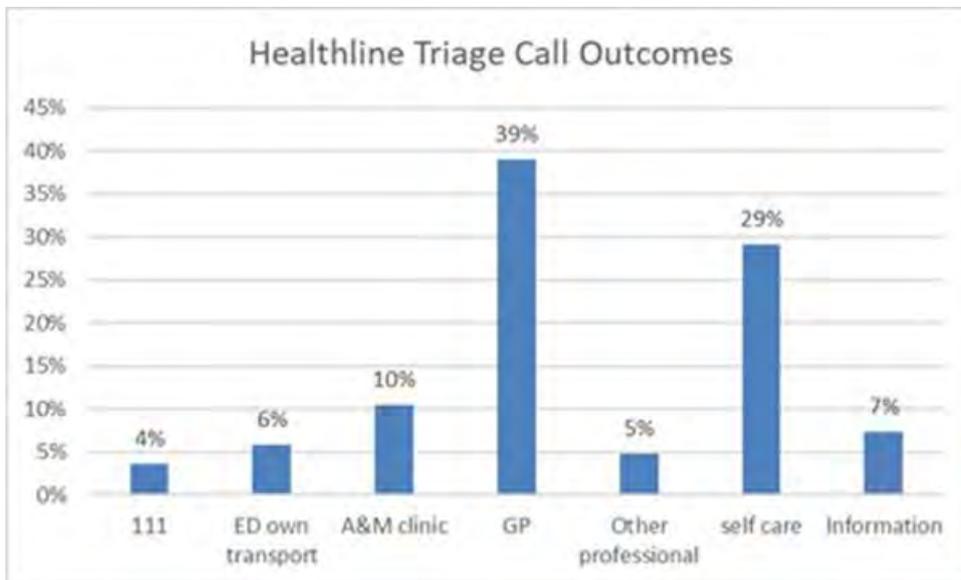
- There was growing discomfort from the public about the testing criteria vs. the reported perception that everyone could get tested
 - Large portion of calls were from people who believed they were unwell and concerned about community transmission
 - Increasing levels of anger relating to the lock down and its implications
 - The implementation of the change in case definition is ongoing – this has caused significant rework of our processes and systems due to the need to move the decision making to a different team
 - The community clinical advice line continues its soft launch today – a go live decision for early next week will be made in the next 24 hours
 - Onboarding continues to run at full capacity with a pipeline of resources being screened
 - Escalations are underway to ensure that the current border information continues to flow – without it the process commissioned last week for the border health declaration cards will not function as required
 - Work to develop an insight dashboard across all NTS services continues with an anticipated draft to be ready to share early next week
 - Overnight we have received the logic behind the Australian Government symptom checker – we believe that this provides a good basis on which to develop a New Zealand version when we are at the right phase of the response
23. On 2 April 2020, 14,821 calls were answered/outbound calls made (compared to 715 on the same day last year).
24. This was the busiest day to date, but about 8,851 of the calls were outbound calls for self isolation checks. The average wait times have further reduced in the past 24 hours. The graph below compares call volumes today to the same day last year.

Figure 3: calls to and from Healthline



- 25. On 2 April there was an increase in GP referrals reflecting the change in case definition.

Figure 4: outcomes of calls



- 26. On On 2 April there were 93 callers concerned about Coronavirus who expressed severe distress. This is 26% of answered calls on Mental Health support lines. The service was 34% busier than forecast – with COVID related topics discussed in most calls/texts.

Table 3: calls to helpline about mental health matters

Is the caller experiencing distress because of Coronavirus? Yes		
Date	# Cases	on answer
19/03/2020	36	11.9%
20/03/2020	39	13.3%
21/03/2020	20	8.4%
22/03/2020	60	24.5%
23/03/2020	146	48.3%
24/03/2020	165	59.4%
25/03/2020	177	49.4%
26/03/2020	149	32.1%
27/03/2020	62	18.6%
28/03/2020	87	22.7%
29/03/2020	129	38.1%
30/03/2020	177	44.5%
31/03/2020	114	29.1%
01/04/2020	108	33.3%
02/04/2020	93	26.0%
Grand Total	1562	

Community Based Assessment Centres (CBAC)

27. As at 0900 hours on 3 April 2020 there are 50 (↑10) CBACs active and 47(↑2) designated practices/testing stations.

Contact Tracing — National Close Contact Service (NCCS)

28. 388 close contacts were contacted yesterday, and 4603 since 24 March (when the Ministry picked up contact tracing from individual public health units at DHBs).

29. The transition and training of staff for the new NCCS call centre IT solution is expected to be completed by Saturday evening. From today, all data received from PHUs will be loaded into the new system. During this transition the volume of work completed may be impacted, however this is being closely monitored.

	Totals to date (from 24th March)	Daily total for 02 April	Daily total for 01 April	Trend from previous day
Number of close contacts processed by NCCS	7279	596	1056	↓
Attempted calls*	14731	1423	2459	↓
Number of contacts traced (i.e resolved)	4603	388	702	↓
Number of requests referred to 'Finding services' – Police, Customs, Flights**	1841	41	53	↓
Non-compliant close contacts	17	0	0	→
Workforce – number in Triage	n/a	37	42	↓
Workforce – number in Call Centre	n/a	90	107	↓

- **Attempted calls does not yet include calls made for close contacts processed through Salesforce.*
- ***Referrals to Finding Services include those requests from Ops which are referred back to Triage. Some requests could involve more than one individual could be more than the number of requests.*

New Zealand border response

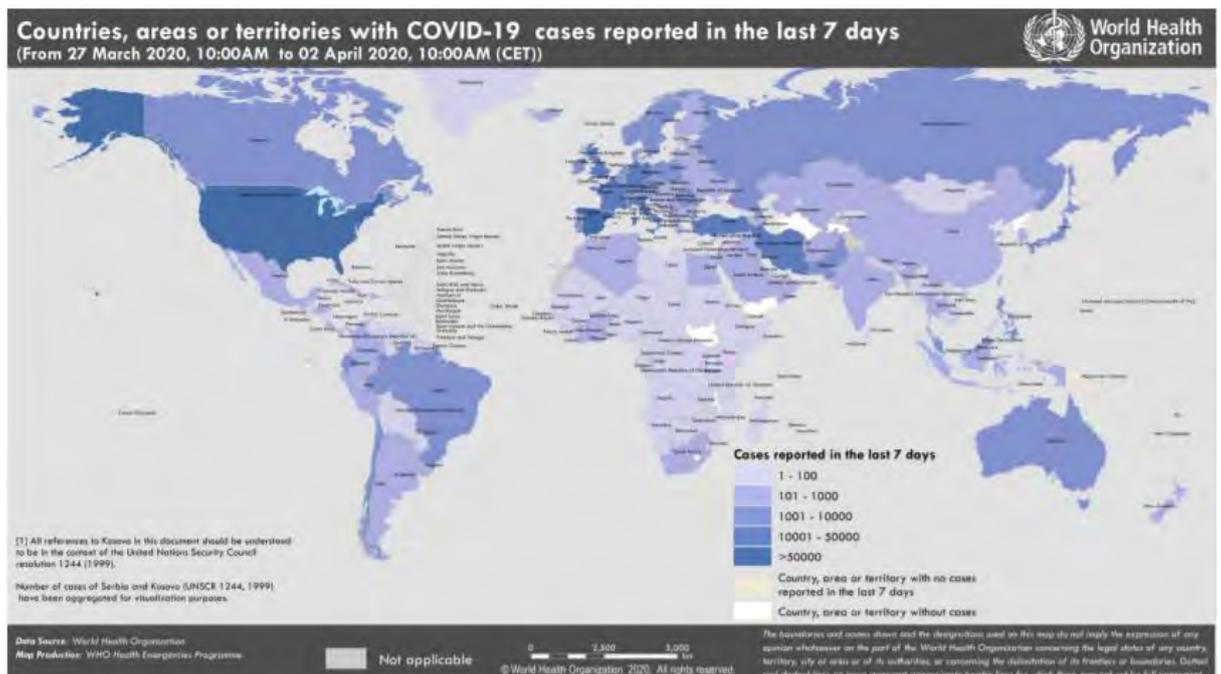
30. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
31. New Zealand Customs data showed **300** travellers entered New Zealand on **2 April 2020**. Everyone permitted to enter New Zealand is screened on arrival. Passengers are disembarked in small groups from their aircraft and met by Government officials at the gate. Officials discuss passengers' self-isolation and transport arrangements, answer questions, and provide assistance. The Ministry of Health website includes the requirements for travel and isolation at <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-health-advice-general-public/covid-19-border-controls>.
32. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. These are for persons with no suitable transport or accommodation for self-isolation identified. Over 3,300 rooms and 1,400 campervans are available nationally. Flights from Auckland to other New Zealand cities commenced on 31 March 2020 for safely relocating travellers to points where they can travel home to go into self-isolation.
33. There are currently domestic repatriation flights returning guests to an approved self isolation location. A cabinet paper on **2 April** approved additional Qatar Airline flight **twice daily** into New Zealand which will add pressure on these facilities.

34. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.

Global

35. As reported by the WHO on **2 April 2020**, globally there have been **72,839** confirmed new cases (now **896,450** confirmed cases in total) and **4,924** new deaths reported (**45,526** confirmed deaths in total).
36. As reported by WHO on **2 April 2020**, there were **no** new countries reporting confirmed cases of COVID-19 in the past 24 hours. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 5: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment **on 25 March 2020** which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered moderate for the general population and very high for older adults and individuals with chronic underlying conditions.
 - The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is moderate if

effective mitigation measures are in place, and very high if insufficient mitigation measures are in place.

- The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz

Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
PIM	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1300 hours on 4 April 2020.**

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: Lisa McPhail, NHCC Response Manager



SITREP 76
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hours 4 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of **1300 hours on 4 April 2020**.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At **0900** hours on **4 April** 2020 there are **950** combined confirmed and probable cases. There are **82** new combined confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. The case definition was amended on 3 April 2020 to de-couple respiratory symptoms from a travel history with testing made available to people with respiratory symptoms suggestive of COVID-19 infection (including the acute onset of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
4. New Zealand recorded its first death linked to COVID-19 on 29 March 2020.
5. As at **0900** hours on **4 April** 2020 there are **127** recovered cases (**up 24 in the last 24 hours**).
6. **There are 10 people in hospital with COVID-19, 1 of whom is in intensive care and is in a stable condition.**
7. **There are 10 clusters (cluster = 10 or more people) under investigation by public health officials throughout the country with confirmed and probable cases. The largest clusters are in Auckland, Southland and Waikato.**

KEY MESSAGES

8. We are currently on Alert Level 4.
9. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
10. We know how crucial it is to test people for COVID-19 as we work to understand what level of community transmission there may be and to break the chain of transmission.
11. Testing capacity for COVID-19 continues to increase and more complete tests continue to arrive.
12. There is more PPE on the way to New Zealand and clinical advice is available about recommended use.
13. We have confirmed an order for 41 million additional face masks that will start to arrive over the next six weeks.
14. The Ministry of Health has established contracts with two major third party logistics service providers. Between them they will manage the distribution of PPE to both the health sector and the non-health essential workforce.
15. In addition, there is considerable ongoing Government effort to secure supplies of other PPE items.
16. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
17. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
18. Additional border measures came into effect at 0200 hours 26 March 2020. Only New Zealand residents and citizens (and their children and partners) are still permitted to enter New Zealand.
19. Arrangements are underway to transition border roles from health staff at the border to former Air New Zealand staff, working for the Ministry of Health, in order to release health staff to the workforce.

OUTBREAK SITUATION

20. As at 0900 hours on 4 April 2020 there are 950 combined confirmed and probable cases. There are 82 new combined confirmed and probable cases reported in the last 24 hours. See Figure 1 for the epidemic curve and Figure 2 for DHB breakdown.

21. As at 0900 hours on 4 April 2020 there are 127 recovered cases.

Figure 1: COVID-19 Epidemic Curve

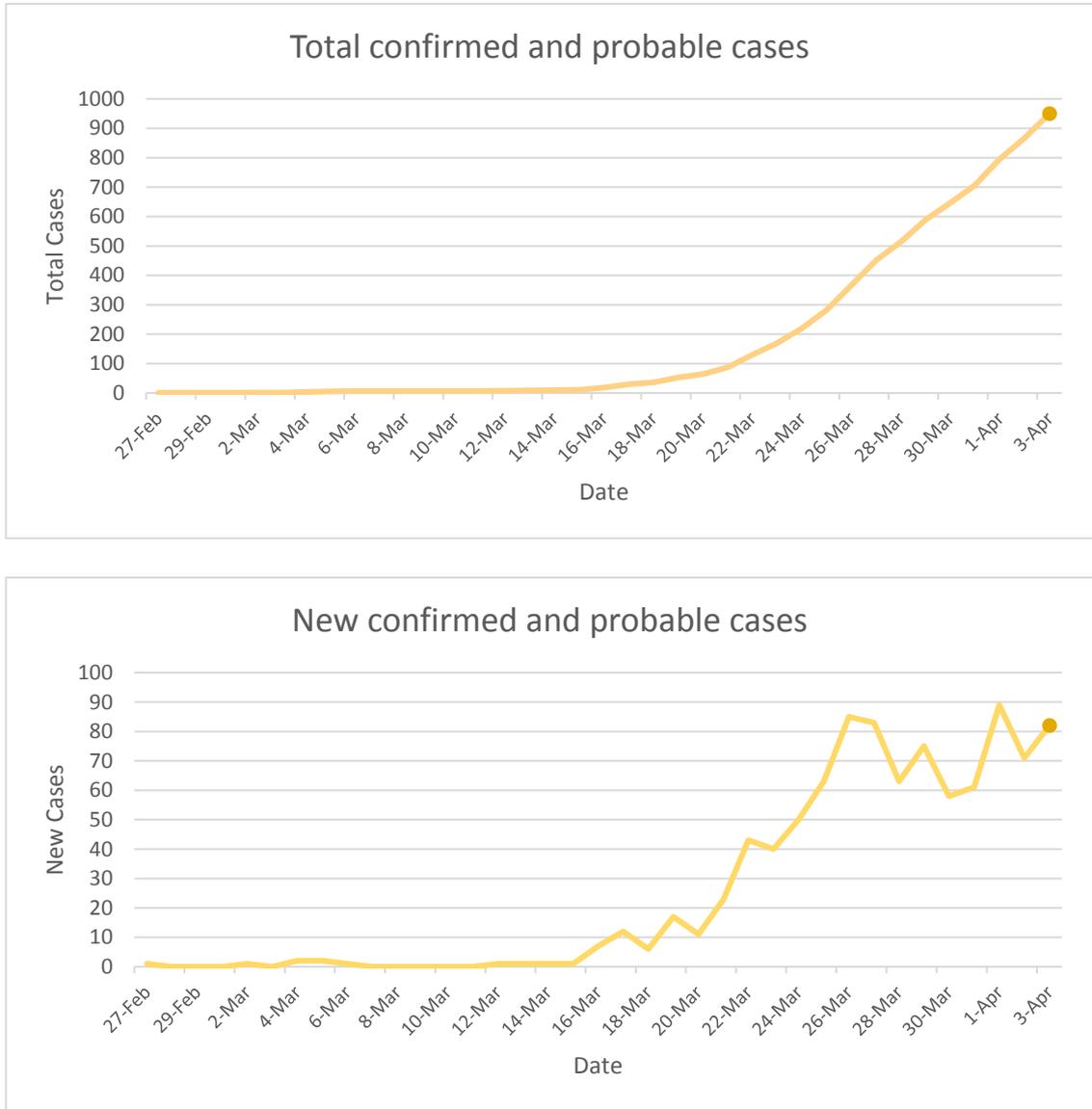


Figure 2: COVID-19 confirmed and probable cases by DHB

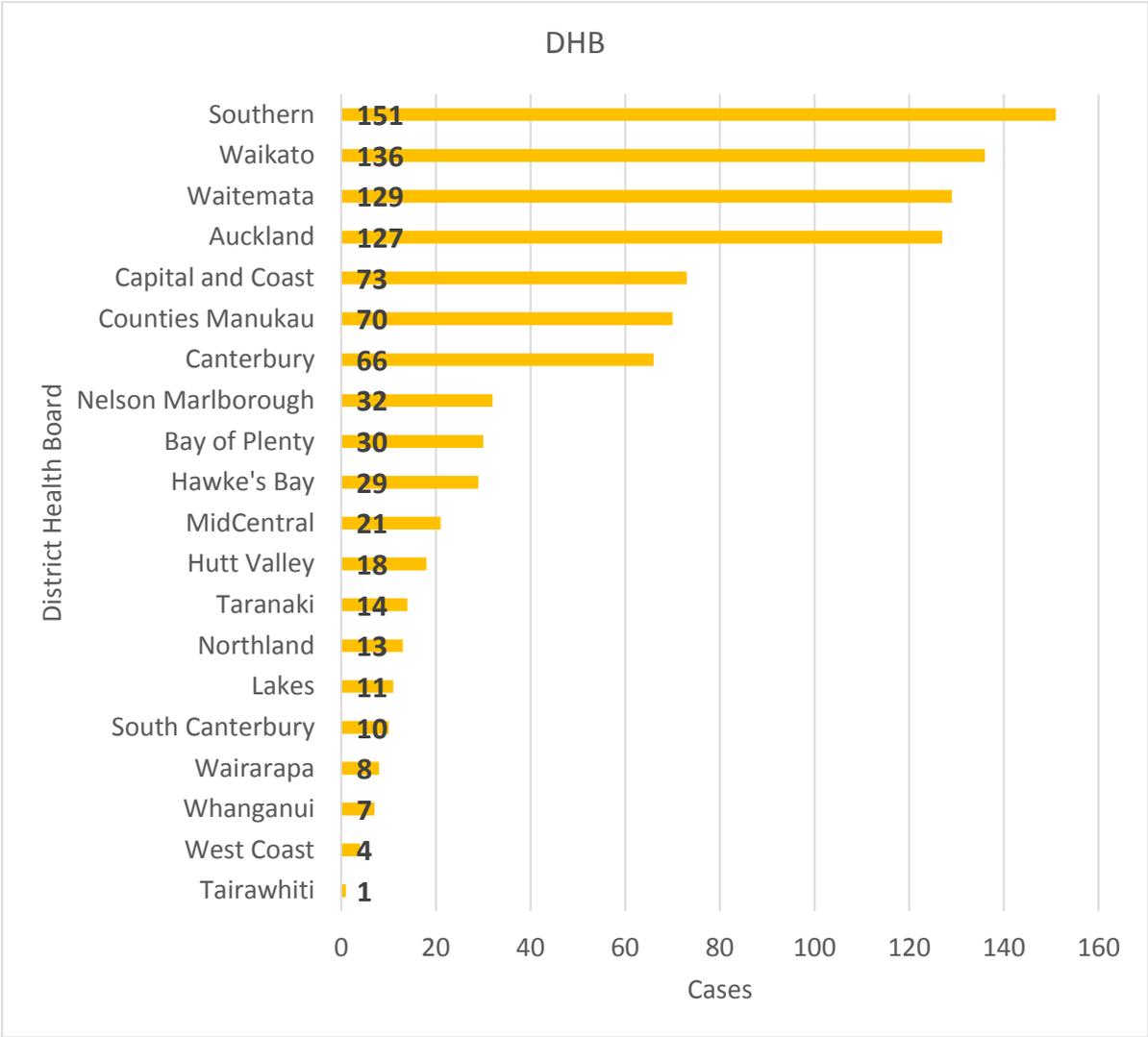


Table 1: COVID-19 in-patients across all DHBs

DHB	Patients	Condition & Bed type
Auckland	1	Stable on ward
Bay of Plenty	1	Stable on ward
Capital & Coast	3	2 stable on ward, 1 stable on ICU ventilator
Counties Manukau	1	Stable on ward
Nelson Marlborough	1	Stable on ward
Tairawhiti	1	Stable on ward

Taranaki	1	Stable on ward
Waikato	1	Stable on ward
Total	10	

22. There are 10 clusters (cluster = 10 or more people) under investigation throughout the country with confirmed and probable cases. The largest clusters are in Auckland, Southern and Waikato. All clusters are being investigated by public health officials.

Table 2: COVID-19 Cluster Report (10+ cases): 4 April 2020

Source: EpiSurv 09:00 04/04/2020

Note: case changes in brackets reflect changes in the past 24 hours. Decrease in case count is due to probable cases being reclassified.

Cluster	Overseas	Cases	Cluster Type	Transmission Ongoing?	Last case notified date
Cluster 1, Auckland	Unknown	16 (-)	Workplace	Yes	02/04/2020
Cluster 2, Waikato	Unknown	54 (↑5)	Workplace	Yes	03/04/2020
Cluster 3, Southern	Unknown	55 (↑2)	Event	Yes	03/04/2020
Cluster 7, Auckland	Yes	13 (↑1)	Group travel	Yes	03/04/2020
Cluster 10, Auckland	No	60 (↑1)	School	Yes	03/04/2020
Cluster 11, Southern	Yes	32 (↑3)	Event	Yes	02/04/2020
Cluster 12, Waikato	Yes	14 (-)	Rest Home	Likely	28/03/2020

Cluster 13, Wellington	Yes	13 (-)	Group travel	Likely	25/03/2020
Cluster 14, Wellington	Yes	13 (-)	Event	Yes	27/03/2020

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New Zealand health sector response

23. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
24. ESR, Canterbury Health Laboratories (CHL), LabPLUS and Middlemore hospital in Auckland, Waikato hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
25. See Table 3, below, for further information on laboratory capacity and the number of people tested.

Table 3: laboratory tests done and capacity

Lab Testing	Tests	% Difference	Date
Daily total	3,631	5%	3 April 2020
7-day rolling average	2,264	11%	28 March to 3 April 2020
Total tested to date	33,116	12%	9 March to 3 April 2020
Test capacity	6,271	15%	4 April 2020
Supplies in stock	24,886	-34%	4 April 2020

* Percent difference is calculated against yesterday's counts.

Community Based Assessment Centres (CBAC)

26. As at 0900 hours on **4 April** 2020 there are **64** CBACs active and **48** designated practices/testing stations.

Contact Tracing — National Close Contact Service (NCCS)

27. **306** close contacts were contacted on **3 April**, and **4,909** since 24 March (when the Ministry picked up contact tracing from individual public health units at DHBs).
28. The transition and training of staff for the new NCCS call centre IT solution is expected to be completed by Saturday evening. **From 3 April**, all data received from PHUs will be loaded into the new system. During this transition the volume of work completed may be impacted, however this is being closely monitored.

	Totals to date (from 24th March)	Daily total for 03 April	Daily total for 02 April	Trend from previous day
Number of close contacts processed by NCCS	7663	384	596	↓
Attempted calls*	15524	793	1423	↓
Number of contacts traced (i.e resolved)	4909	306	388	↓
Number of requests referred to 'Finding services' – Police, Customs, Flights*/**	1850	9	41	↓
Non-compliant close contacts	18	1	0	↑
Workforce – number in Triage	n/a	31	37	↓
Workforce – number in Call Centre	n/a	81	90	↓

**Referrals to Finding Services and attempted calls do not yet include the number of referrals and calls made for close contacts that were processed through Salesforce.*

***Referrals to Finding Services include those requests from Ops which are referred back to Triage. Some requests could involve more than one individual, which means the number of individuals could be more than the number of requests.*

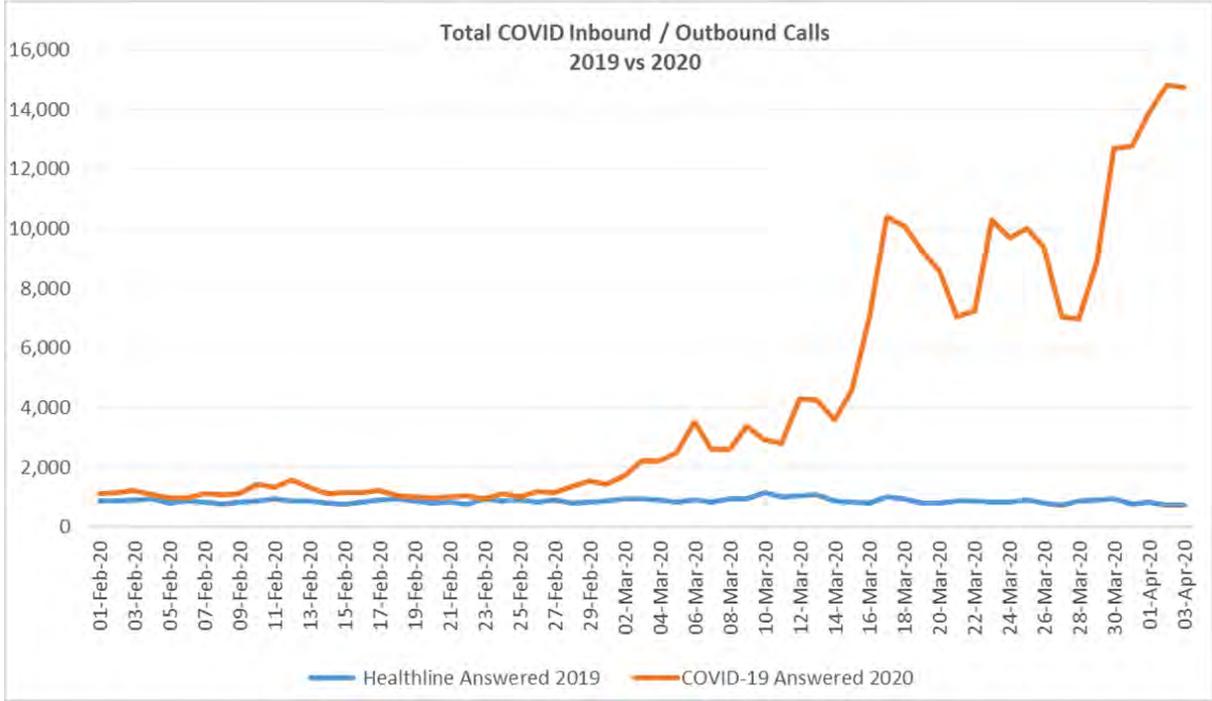
National Telehealth Service update

29. Information and insights relating to call activity and self-isolation from **4 April**:
- **Concern that people are delaying treatment and advice on non COVID-19 health related matters which is seeing higher acuity present to us. Messages that reinforce people can still contact their GP, call ambulances etc are important**
 - **Finding that people not contacting us at night as we would expect – messages that reinforce the overnight (24/7) nature of the service next week will be useful**
 - **The implementation of the change in case definition is ongoing – this has caused significant rework of our processes and systems due to the need to move the decision making to a different team**
 - **The community clinical advice line continues its soft launch today – a comms plan is being developed for launch early next week**
 - **Work to develop an insight dashboard across all NTS services continues.**

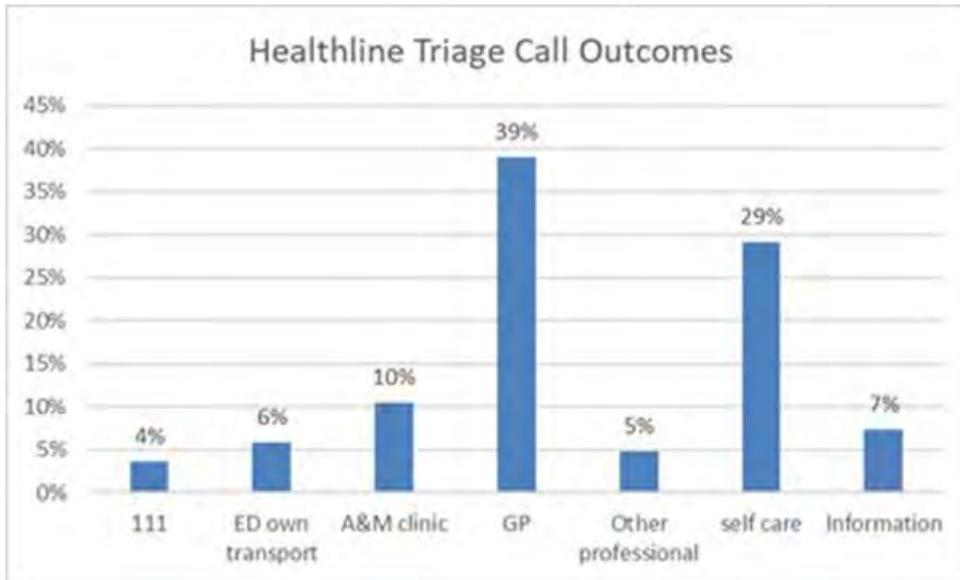
- 30. On 3 April 2020, 14,746 calls were answered/outbound calls made (compared to 715 on the same day last year).
- 31. This was the second busiest day to date, but 8,484 of the calls were outbound calls for self-isolation checks. The graph below compares call volumes today to the same day last year.

Figure 3: calls to and from Healthline

The graph below compares 3 April, 2020 to the same day last year:



- 32. On 2 April there was an increase in GP referrals reflecting the change in case definition. In addition, Healthline is seeing people delaying reaching out for non COVID-19 healthcare in the core Healthline service – which is seeing higher acuity in the overall case mix.



33. On 3 April there were 64 callers concerned about Coronavirus who expressed severe distress. This is 20% of answered calls on Mental Health support lines. The service was 30% busier than forecast – with COVID related topics discussed in most calls/texts.

Table 3: calls to helpline about mental health matters

Date	# Cases	% answered
25/03/2020	177	49.4%
26/03/2020	149	32.1%
27/03/2020	62	18.6%
28/03/2020	87	22.7%
29/03/2020	129	38.1%
30/03/2020	177	44.5%
31/03/2020	114	29.1%
01/04/2020	108	33.3%
02/04/2020	93	26.0%
03/04/2020	64	20.0%
Grand Total	1160	

New Zealand border response

34. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
35. Everyone permitted to enter New Zealand is screened on arrival. Passengers are disembarked in small groups from their aircraft and met by Government officials at the gate. Officials discuss passengers' self-isolation and transport arrangements, answer questions, and provide assistance. Arrangements are underway to transition

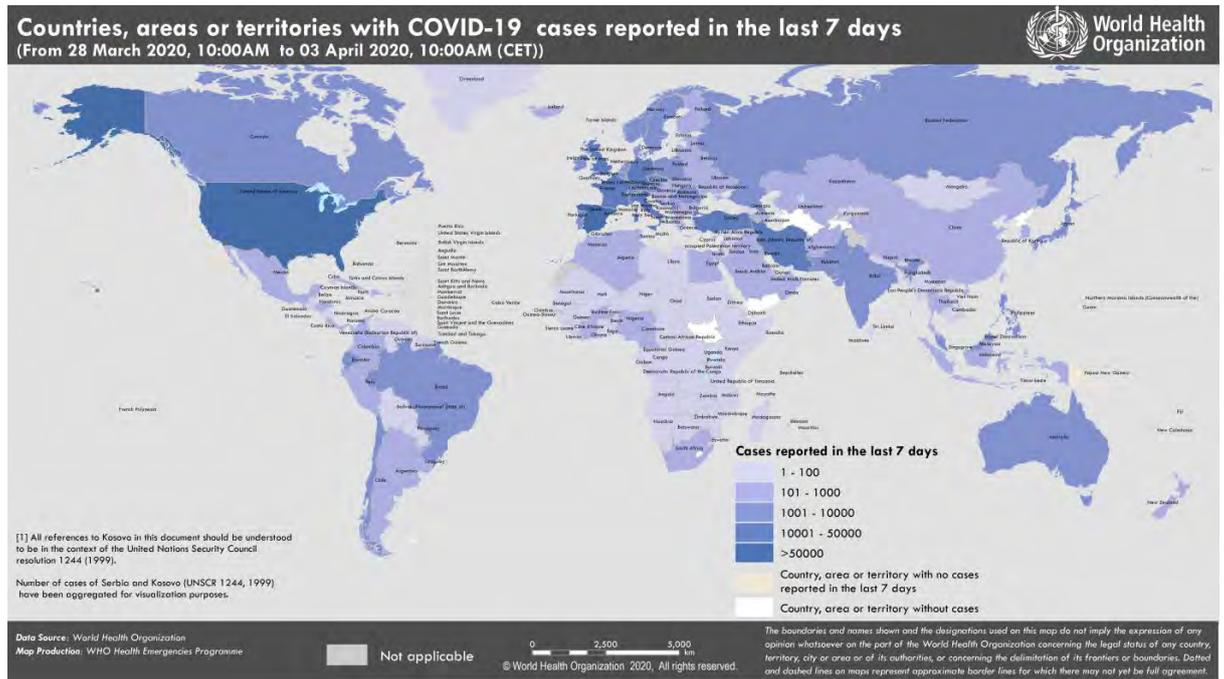
from health staff at the border to former Air New Zealand staff, working for the Ministry of Health. This will free health staff to return to health sector work, while providing a workforce for entry and exit measures at airports who are trained to deal with travellers and accustomed to working in airport environments. This will also allow exit and entry airport measure to be escalated as required if border restrictions are eased in coming months. The former Air New Zealand staff will be provided with training before taking up their new roles and will be provided with ongoing clinical oversight.

36. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. These are for persons with no suitable transport or accommodation for self-isolation identified. Over 3,300 rooms and 1,400 campervans are available nationally. There are currently domestic flights transporting guests to an approved isolation location. Qatar Airlines will be offering twice daily flights to New Zealand which will add pressure on the quarantine and isolation facilities.
37. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.

Global

38. As reported by the WHO on 3 April 2020, globally there have been 75,853 confirmed new cases (now 972,303 confirmed cases in total) and 4,823 new deaths reported (50,322 confirmed deaths in total).
39. As reported by WHO on 3 April 2020, there was one new country reporting confirmed cases of COVID-19 in the past 24 hours: Malawi. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 5: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 25 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered moderate for the general population and very high for older adults and individuals with chronic underlying conditions.
 - The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is moderate if

effective mitigation measures are in place, and very high if insufficient mitigation measures are in place.

- The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

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10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

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Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
PIM	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
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Welfare	NHCC_Welfare@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1300 hours on 5 April 2020.**

Prepared by: Kirsten Forrest and Bridget Murphy NHCC Intelligence

Approved by: Bruce MacKay, NHCC Response Manager



SITREP 77
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hours 5 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of **1300 hours on 5 April 2020**.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At **0900** hours on **5 April 2020** there are **1,039** combined confirmed and probable cases. There are **89** new combined confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. The case definition was amended on 3 April 2020 to de-couple respiratory symptoms from a travel history with testing made available to people with respiratory symptoms suggestive of COVID-19 infection (including the acute onset of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
4. New Zealand recorded its first death linked to COVID-19 on 29 March 2020.
5. As at **0900** hours on **5 April 2020** there are **156** recovered cases (up **29** in the last 24 hours).
6. As at **0900** hours on **5 April 2020** there are **12** clusters (cluster = 10 or more people) under investigation by public health officials throughout the country with confirmed and probable cases. This is an increase from 10 clusters the previous day. The largest clusters are in Auckland, Southland and Waikato.

7. As of midnight on 4 April 2020, there were 15 people in hospital with COVID-19, 3 of whom are in intensive care (1 stable on ventilator, 1 critical on ventilator, 1 deteriorating).

KEY MESSAGES

8. We are currently on Alert Level 4.
9. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
10. We know how crucial it is to test people for COVID-19 as we work to understand what level of community transmission there may be and to break the chain of transmission.
11. Testing capacity for COVID-19 continues to increase and more complete tests continue to arrive.
12. There is more PPE on the way to New Zealand and clinical advice is available about recommended use.
13. We have confirmed an order for 41 million additional face masks that will start to arrive over the next six weeks.
14. The Ministry of Health has established contracts with two major third party logistics service providers. Between them they will manage the distribution of PPE to both the health sector and the non-health essential workforce.
15. In addition, there is considerable ongoing Government effort to secure supplies of other PPE items.
16. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
17. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
18. Additional border measures came into effect at 0200 hours 26 March 2020. Only New Zealand residents and citizens (and their children and partners) are still permitted to enter New Zealand.
19. Arrangements are underway to transition border roles from health staff at the border to former Air New Zealand staff, working for the Ministry of Health, in order to release health staff to the workforce.

OUTBREAK SITUATION

20. As at 0900 hours on 5 April 2020 there are 1,039 combined confirmed and probable cases. There are 89 new combined confirmed and probable cases reported in the last 24 hours. See Figure 1 for the epidemic curve and Figure 2 for DHB breakdown.

21. As at 0900 hours on 5 April 2020 there are 156 recovered cases (up 29 in the last 24 hours).

Figure 1: COVID-19 Epidemic Curve

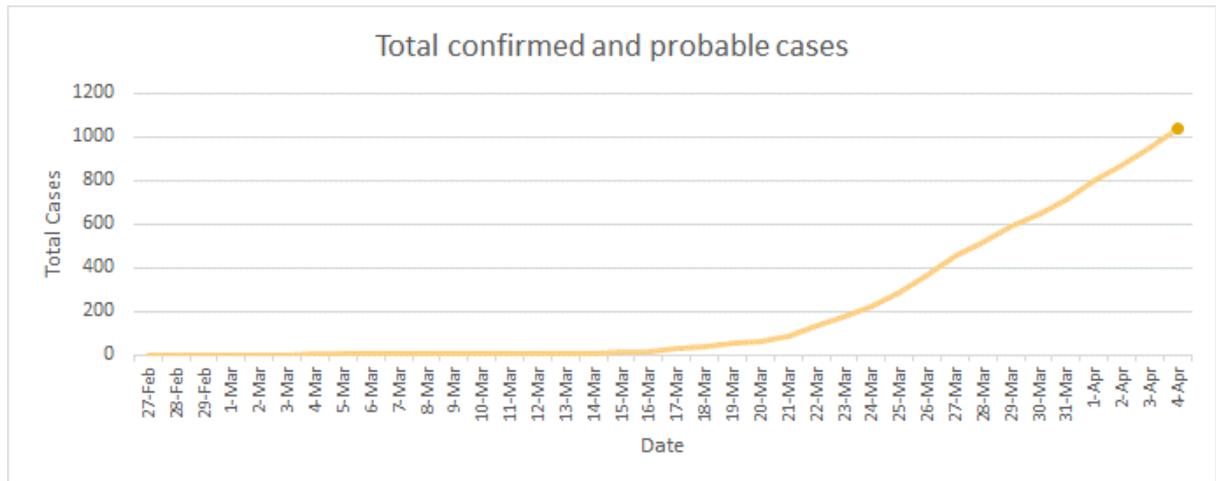


Figure 2: New cases

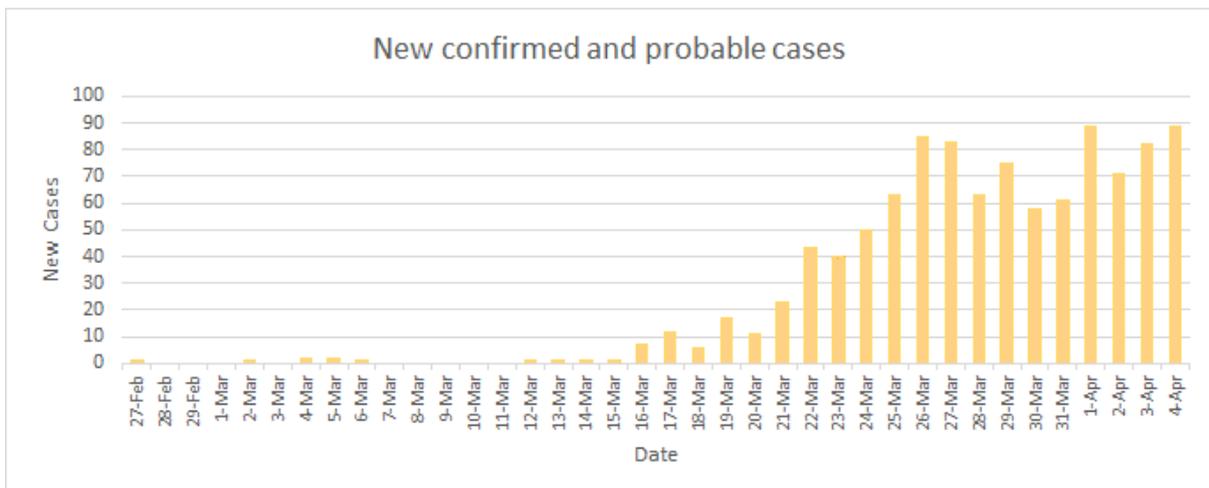


Figure 3: COVID-19 confirmed and probable cases by DHB

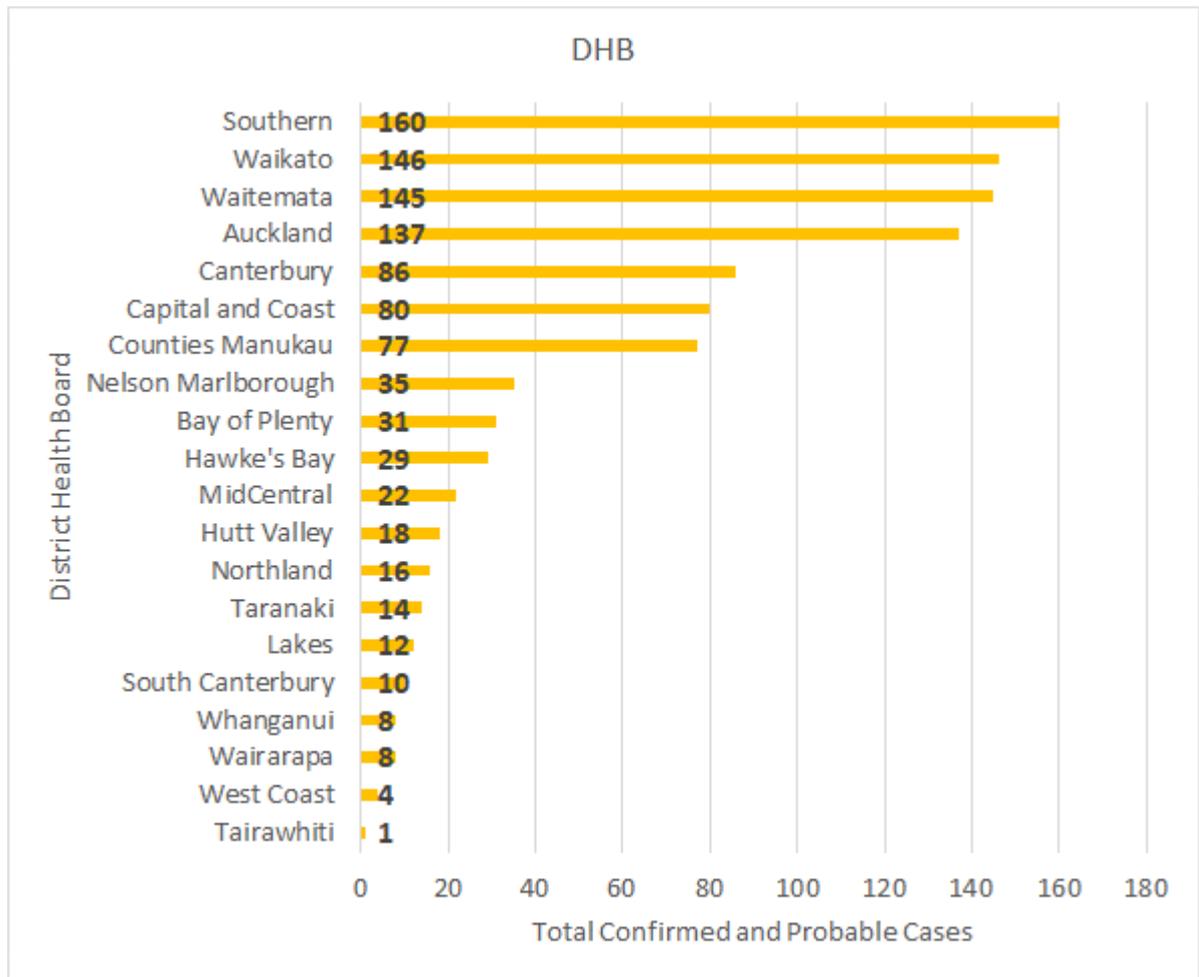


Table 1: COVID-19 in-patients across all DHBs

DHB	Patients	Condition & Bed type
Auckland	1	Stable on ward
Waitemata	1	Critical on ICU ventilator
Bay of Plenty	1	Stable on ward
Capital & Coast	3	2 stable on ward, 1 stable on ICU ventilator
Counties Manukau	2	1 stable on ward, 1 ICU deteriorating
Nelson Marlborough	1	Stable on ward
Southern	1	Stable on ward
Tairawhiti	1	Stable on ward
Taranaki	1	Stable on ward
Waikato	2	2 stable on ward
West Coast	1	Stable on ward
Total	15	

22. There are 12 clusters (cluster = 10 or more people) under investigation throughout the country with confirmed and probable cases. This is an increase from 10 clusters the previous day. The largest clusters are in Auckland, Southern and Waikato. All clusters are being investigated by public health officials.

Table 2: COVID-19 Cluster Report (10+ cases): 5 April 2020

Cluster	Overseas	Confirmed & Probable Cases	Cluster Type	Transmission Ongoing?	Last case notified date
Cluster 1, Auckland	Unknown	16 (-)	Workplace	Yes	02/04/2020
Cluster 2, Waikato	Yes	56 (↑2)	Workplace	Yes	04/04/2020
Cluster 3, Southern	Unknown	58 (↑3)	Wedding	Yes	04/04/2020
Cluster 7, Auckland	Yes	12 (↓1)	Group travel	Yes	03/04/2020
Cluster 10, Auckland	No	66 (↑6)	School	Yes	04/04/2020
Cluster 11, Southern	Yes	32 (-)	Conference	Yes	02/04/2020
Cluster 12, Waikato	Yes	14 (-)	Rest Home	Likely	28/03/2020
Cluster 13, Wellington	Yes	16 (↑3)	Group travel	Likely	03/04/2020
Cluster 14, Wellington	Yes	13 (-)	Wedding	Yes	27/03/2020
s 6(c)					
Cluster 16, Auckland	Unknown	13	Unknown	Yes	04/03/2020
Cluster 20, Christchurch	Unknown	10	Unknown	Unknown	04/04/2020

Note: case changes in brackets reflect changes in the past 24 hours. Decrease in case count is due to probable cases being reclassified.

New Zealand health sector response

23. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
24. ESR, Canterbury Health Laboratories (CHL), LabPLUS and Middlemore hospital in Auckland, Waikato hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions>

[conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection](#)

25. See Table 3, below, for further information on laboratory capacity and the number of people tested. **There was a lower volume of tests done yesterday, in part because the Waikato hospital laboratory had technical issues and completed very few tests. The backlog has been prepared and will be tested today. Supplies in stock equate to 17 days at current (7-day average) testing levels.**

Table 3: laboratory tests done and capacity

Lab Testing	Tests	Date
Total tested yesterday	3,093	4 April 2020
7-day rolling average	2,448	29 March to 4 April 2020
Total tested to date	36,209	9 March to 4 April 2020
Test capacity	4,613	5 April 2020
Supplies in stock	41,813	5 April 2020

* Percent difference is calculated against yesterday's counts.

Community Based Assessment Centres (CBAC)

26. As at 0830 hours on 5 April 2020 there are 64 CBACs active and 48 designated practices/testing stations.

Contact Tracing — National Close Contact Service (NCCS)

27. 425 close contacts were contacted on 4 April and 5,334 since 24 March (when the Ministry picked up contact tracing from individual public health units at DHBs).
28. The transition and training of staff for the new NCCS call centre IT solution is expected to be completed by Saturday evening. From 3 April, all data received from PHUs will be loaded into the new system. During this transition the volume of work completed may be impacted, however this is being closely monitored.

	Totals to date (from 24th March)	Daily total for 04 April	Daily total for 03 April	Trend from previous day
Number of close contacts processed by NCCS	8161	498	384	⬆️
Attempted calls*	16288	764	793	⬇️
Number of contacts traced (i.e resolved)	5334	425	306	⬆️
Number of requests referred to 'Finding services' – Police, Customs, Flights*/**	2326	274	211	⬆️
Non-compliant close contacts	19	1	1	➡️
Workforce – number in Triage	n/a	13	31	⬇️
Workforce – number in Call Centre	n/a	90	81	⬆️

Notes

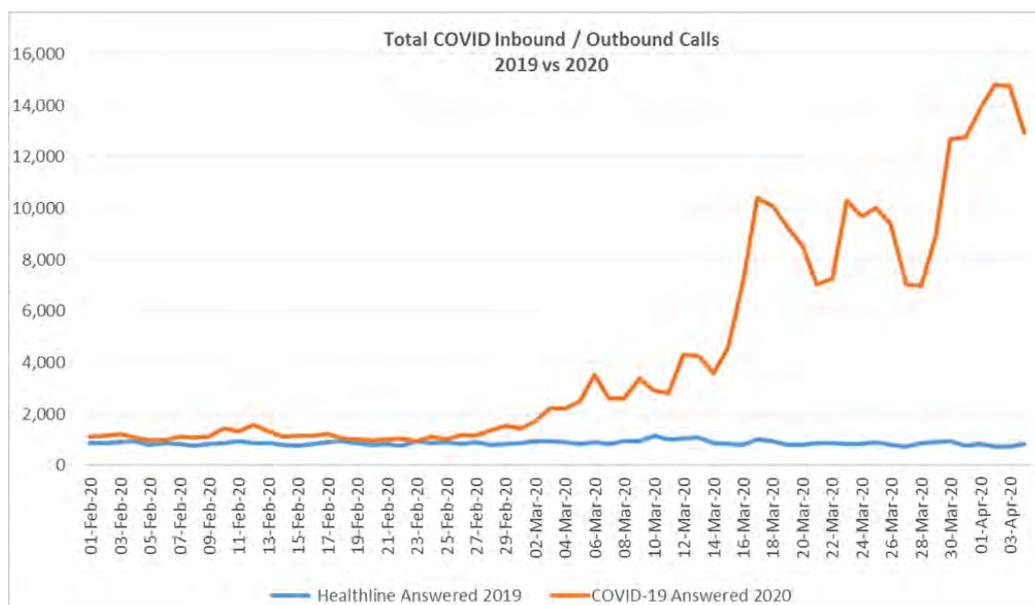
*Referrals to Finding Services and attempted calls do not yet include the number of referrals and calls made for close contacts that were processed through Salesforce.

**Referrals to Finding Services include those requests from Ops which are referred back to Triage. Some requests could involve more than one individual, which means the number of individuals could be more than the number of requests.

National Telehealth Service update

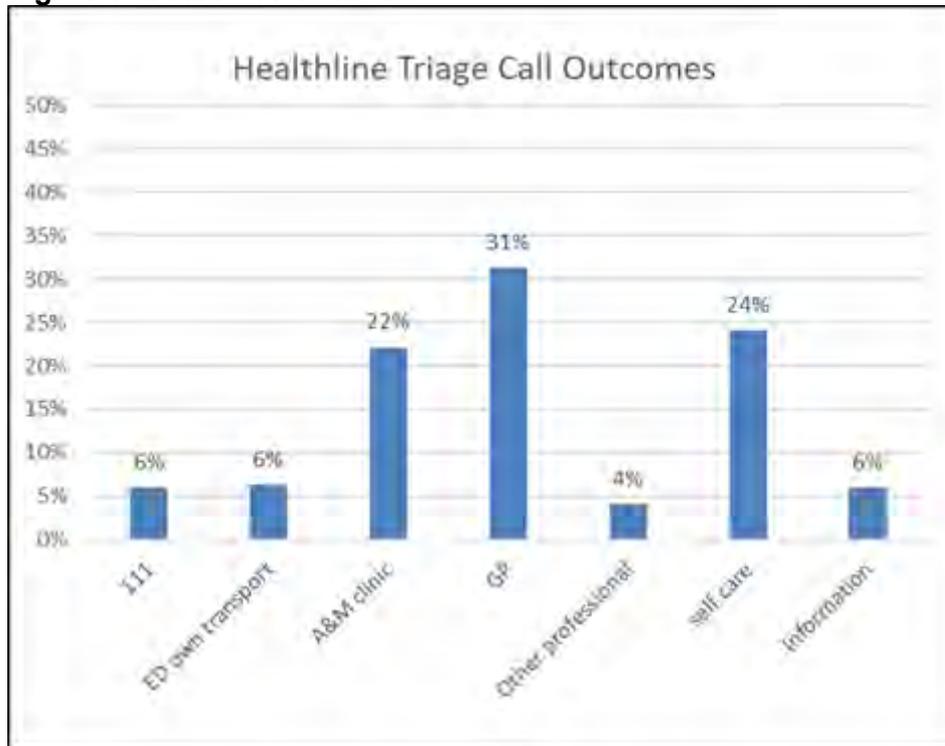
29. On 4 April 2020, 12,955 calls were answered/outbound calls made (compared to 843 on the same day last year). 7,520 of the calls were outbound calls for self-isolation checks. The graph below compares call volumes today to the same day last year.

Figure 4: Calls to and from Healthline versus the same day last year



30. On 4 April there was an increase in GP referrals reflecting the change in case definition.

Figure 5: Outcomes of calls



31. On 4 April there were 51 callers concerned about Coronavirus who expressed severe distress. This is 18% of answered calls on Mental Health support lines. The service was 37% busier than forecast – with COVID related topics discussed in most calls/texts.

Table 4: Calls to helpline about mental health matters

Is the caller experiencing distress because of Coronavirus?		Yes	%
Date	# Cases on answered		
25/03/2020	177	49.4%	
26/03/2020	149	32.1%	
27/03/2020	62	18.6%	
28/03/2020	87	22.7%	
29/03/2020	129	38.1%	
30/03/2020	177	44.5%	
31/03/2020	114	29.1%	
01/04/2020	108	33.3%	
02/04/2020	93	26.0%	
03/04/2020	64	20.0%	
04/04/2020	51	17.8%	
Grand Total	1211		

New Zealand border response

32. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for

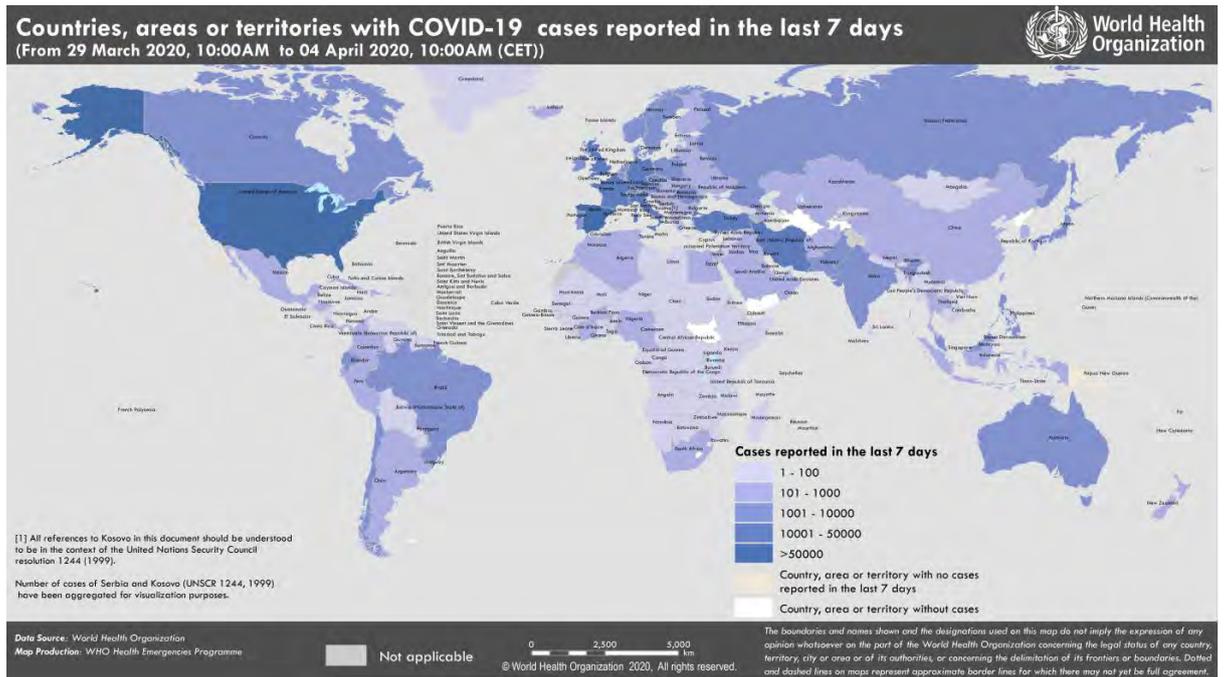
humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.

33. **New Zealand Customs data report 122 passengers arrived in New Zealand on 4 April 2020.** Everyone permitted to enter New Zealand is screened on arrival. Passengers are disembarked in small groups from their aircraft and met by Government officials at the gate. Officials discuss passengers' self-isolation and transport arrangements, answer questions, and provide assistance. Arrangements are underway to transition from health staff at the border to former Air New Zealand staff, working for the Ministry of Health. This will free health staff to return to health sector work, while providing a workforce for entry and exit measures at airports who are trained to deal with travellers and accustomed to working in airport environments. This will also allow exit and entry airport measure to be escalated as required if border restrictions are eased in coming months.
34. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. Domestic flights are transporting guests to an approved isolation location. Over 3,300 rooms and 1,400 campervans are available nationally for people with no suitable transport or accommodation for self-isolation. **Arrangements are being made for people to travel home after their 14-day isolation is completed. Planning for impacts on quarantine and isolation facilities is underway in the event that border restrictions are changed.**
35. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.

Global

36. As reported by the WHO on **4 April 2020**, globally there have been **79,332** confirmed new cases (now **1,051,635** confirmed cases in total) and **6,664** new deaths reported (**56,985** confirmed deaths in total).
37. As reported by WHO on **4 April 2020**, there was **one** new country reporting confirmed cases of COVID-19 in the past 24 hours: **Bonaire, Sint Eustatius and Saba**. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 6: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 23 March 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further importations from Category 1B travelers, even with the strict border measures currently in place.
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3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact of one or more cases in New Zealand would be **HIGH** both for public health staff, the wider health sector and the community.
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Global risk assessment

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The NHCC continues to operate 7 days per week.

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Prepared by: Maria Turley and Li-Chia Yeh, NHCC Intelligence

Approved by: Bruce MacKay, NHCC Response Manager



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2. At 0900 hours on 6 April 2020 there are 1,106 combined confirmed and probable cases. There are 67 new combined confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
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4. New Zealand recorded its first death linked to COVID-19 on 29 March 2020.
5. As at 0900 hours on 6 April 2020 there are 176 recovered cases (up 20 in the last 24 hours).
6. As at 0900 hours on 6 April 2020 there are 12 clusters (cluster = 10 or more people) under investigation by public health officials throughout the country with confirmed and probable cases. This is the same number of clusters as the previous day. The largest clusters are in Auckland, Southland and Waikato.

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KEY MESSAGES

8. We are currently on Alert Level 4.
9. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
10. We know how crucial it is to test people for COVID-19 as we work to understand what level of community transmission there may be and to break the chain of transmission.
11. Testing capacity for COVID-19 continues to increase and more complete tests continue to arrive.
12. There is more PPE on the way to New Zealand and clinical advice is available about recommended use.
13. We have confirmed an order for 41 million additional face masks that will start to arrive over the next six weeks.
14. The Ministry of Health has established contracts with two major third party logistics service providers. Between them they will manage the distribution of PPE to both the health sector and the non-health essential workforce.
15. In addition, there is considerable ongoing Government effort to secure supplies of other PPE items.
16. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
17. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
18. Additional border measures came into effect at 0200 hours 26 March 2020. Only New Zealand residents and citizens (and their children and partners) are still permitted to enter New Zealand.
19. Arrangements are underway to transition border roles from health staff at the border to former Air New Zealand staff, working for the Ministry of Health, in order to release health staff to the workforce.

OUTBREAK SITUATION

20. As at 0900 hours on 6 April 2020 there are 1,106 combined confirmed and probable cases. There are 67 new combined confirmed and probable cases reported in the last 24 hours. See Figure 1 for the epidemic curve and Figure 2 for DHB breakdown.

21. As at 0900 hours on 6 April 2020 there are 176 recovered cases (up 20 in the last 24 hours).

Figure 1: COVID-19 Epidemic Curve

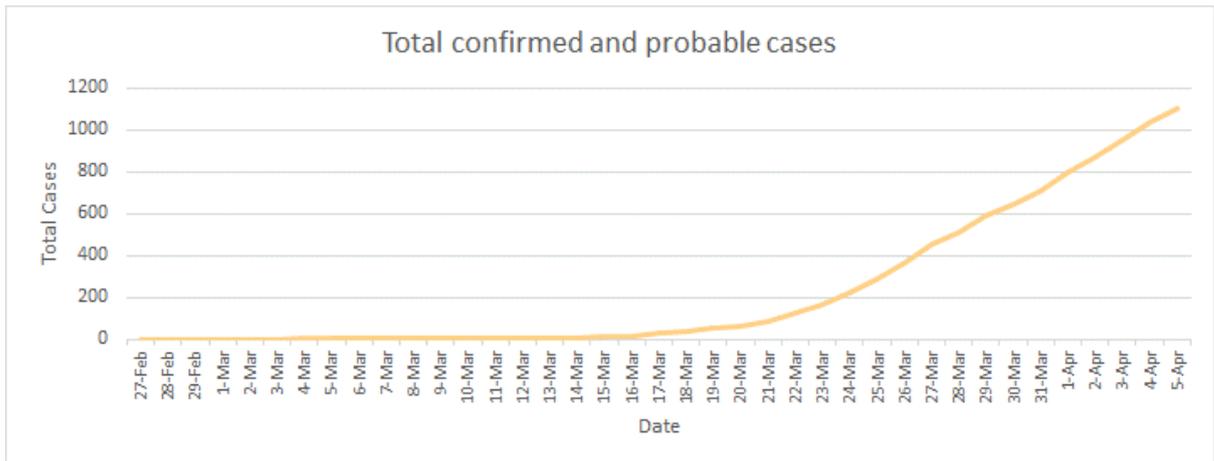


Figure 2: New cases

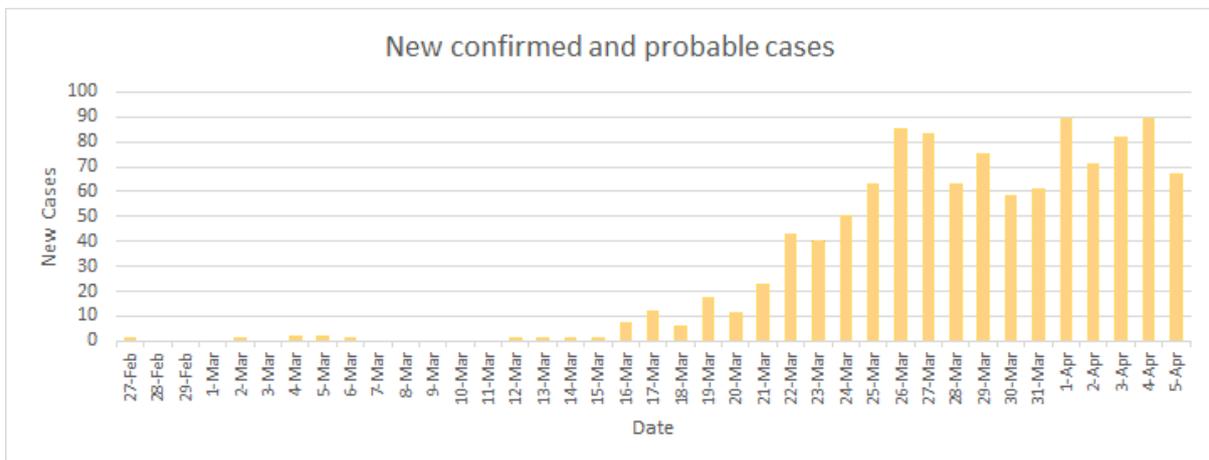
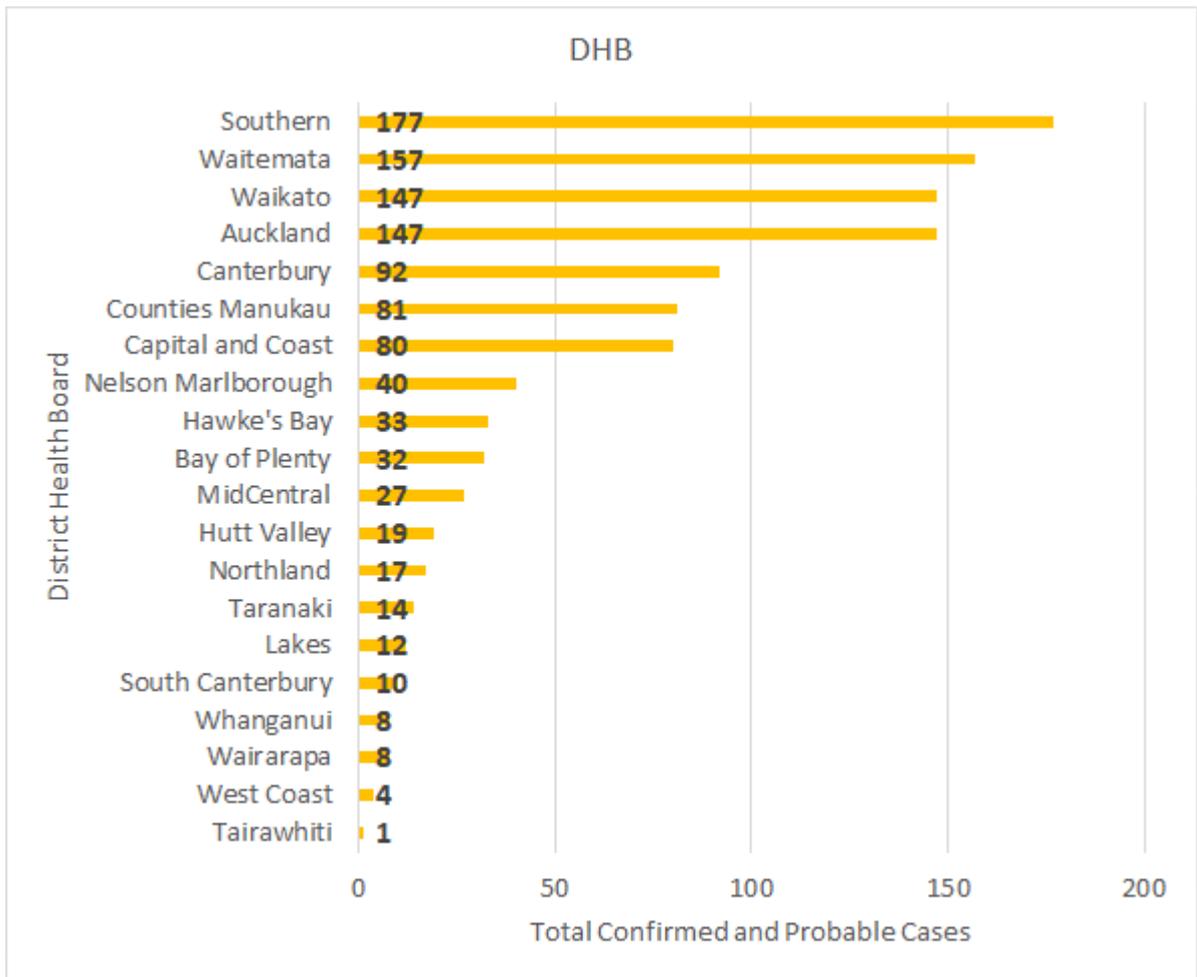


Figure 3: COVID-19 confirmed and probable cases by DHB



22. As of midnight on 5 April 2020, there were 13 people in hospital with COVID-19, down from 15 yesterday. Of those in hospital, 3 are in intensive care (2 stable on ventilator, 1 critical on ventilator) and 1 person is deteriorating on the ward.

Table 1: COVID-19 in-patients across all DHBs

DHB	Patients	Condition & Bed type
Auckland	1	Stable on ward
Waitemata	2	1 stable on ward, 1 Critical on ICU ventilator
Bay of Plenty	1	Stable on ward
Capital & Coast	3	1 stable on ward, 1 deteriorating on ward, 1 stable on ICU ventilator
Counties Manukau	1	1 stable on ICU ventilator
Southern	1	Stable on ward
Tairāwhiti	1	Stable on ward
Taranaki	1	Stable on ward
Waikato	2	2 stable on ward
Total	13	

23. As at 0900 hours on **6 April** 2020, there were 12 clusters (cluster = 10 or more people) under investigation throughout the country with confirmed and probable cases. **This is the same number of clusters as the previous day.** The largest clusters are in Auckland, Southern and Waikato. All clusters are being investigated by public health officials.

Table 2: COVID-19 Cluster Report (10+ cases)

Cluster	Overseas	Confirmed & Probable Cases	Cluster Type	Transmission Ongoing?	Last case notified date
Cluster 1, Auckland	Unknown	19 (↑3)	Workplace	Yes	05/04/2020
Cluster 2, Waikato	Yes	58 (↑2)	Workplace	Yes	04/04/2020
Cluster 3, Southern	Unknown	62 (↑4)	Wedding	Yes	05/04/2020
Cluster 7, Auckland	Yes	15 (↑3)	Group travel	Yes	03/04/2020
Cluster 10, Auckland	No	72 (↑6)	School	Yes	05/04/2020
Cluster 11, Southern	Yes	32 (-)	Conference	Yes	02/04/2020
Cluster 12, Waikato	Yes	14 (-)	Rest Home	Likely	28/03/2020
Cluster 13, Wellington	Yes	16 (-)	Group travel	Likely	03/04/2020
Cluster 14, Wellington	Yes	13 (-)	Wedding	Yes	27/03/2020

Cluster	Overseas	Confirmed & Probable Cases	Cluster Type	Transmission Ongoing?	Last case notified date
s 6(c)					
Cluster 16, Auckland	Unknown	15 (↑2)	Unknown	Yes	05/04/2020
Cluster 20, Christchurch	No	15 (↑5)	Unknown	Yes	04/04/2020

Note: case changes in brackets reflect changes in the past 24 hours. Decrease in case count is due to probable cases being reclassified.

New Zealand health sector response

24. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
25. ESR, Canterbury Health Laboratories (CHL), LabPLUS and Middlemore hospital in Auckland, Waikato hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
26. On 5 April 2020, a total of 3,709 tests were done, the largest number to date. The 7-day rolling average is 2,846 tests, up from 1,728 a week ago. Test capacity for 6 April 2020 is 4,498, up from 3,213 a week ago. See Table 3 for further information on laboratory capacity and the number of people tested.

Table 3: Laboratory tests done and capacity

Lab Testing	Tests	Date
Total tested yesterday	3,709	5 April 2020
7-day rolling average	2,846	30 March to 5 April 2020
Total tested to date	39,918	9 March to 5 April 2020
Test capacity	4,498	6 April 2020
Supplies in stock	44,571	6 April 2020

Community Based Assessment Centres (CBAC)

27. As at 0900 hours on 6 April 2020 there are 65 CBACs active and 48 designated practices/testing stations.

Contact Tracing — National Close Contact Service (NCCS)

28. 329 close contacts were contacted on 5 April 2020 and 5,663 since 24 March (when the Ministry picked up contact tracing from individual public health units at DHBs).

	Totals to date (from 24th March)	Daily total for 05 April	Daily total for 04 April	Trend from previous day
Number of close contacts processed by NCCS	8577	416	498	↓
Attempted calls*	17054	766	764	↑
Number of contacts traced (i.e resolved)	5663	329	425	↓
Number of requests referred to 'Finding services' – Police, Customs, Flights*/**	2402	76	274	↓
Non-compliant close contacts	22	3	1	↑
Workforce – number in Triage	n/a	14	13	↑
Workforce – number in Call Centre	n/a	90	99	↓

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Notes

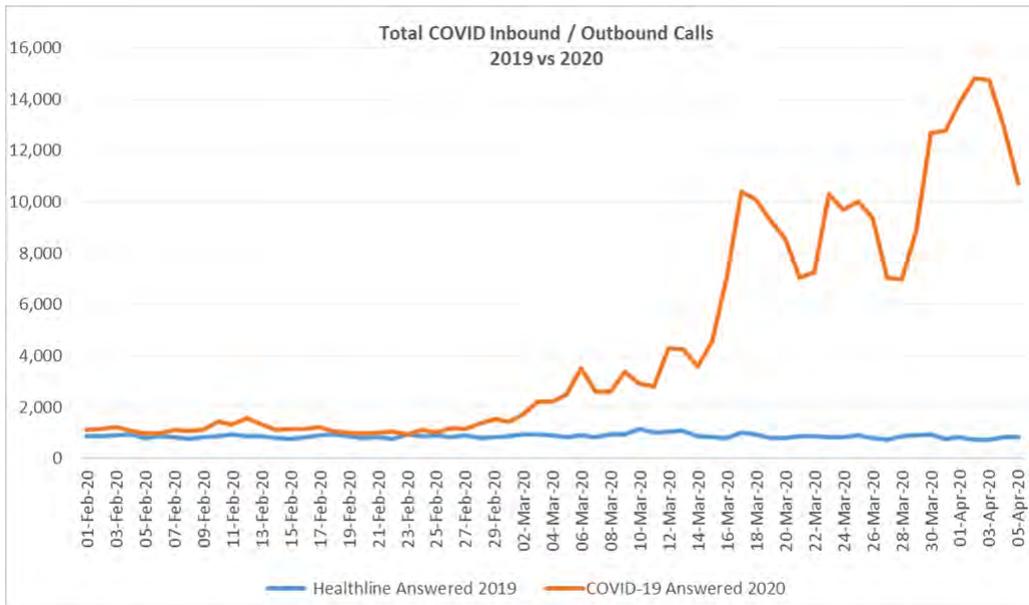
*Referrals to Finding Services and attempted calls do not yet include the number of referrals and calls made for close contacts that were processed through Salesforce.

**Referrals to Finding Services include those requests from Ops which are referred back to Triage. Some requests could involve more than one individual, which means the number of individuals could be more than the number of requests.

National Telehealth Service update

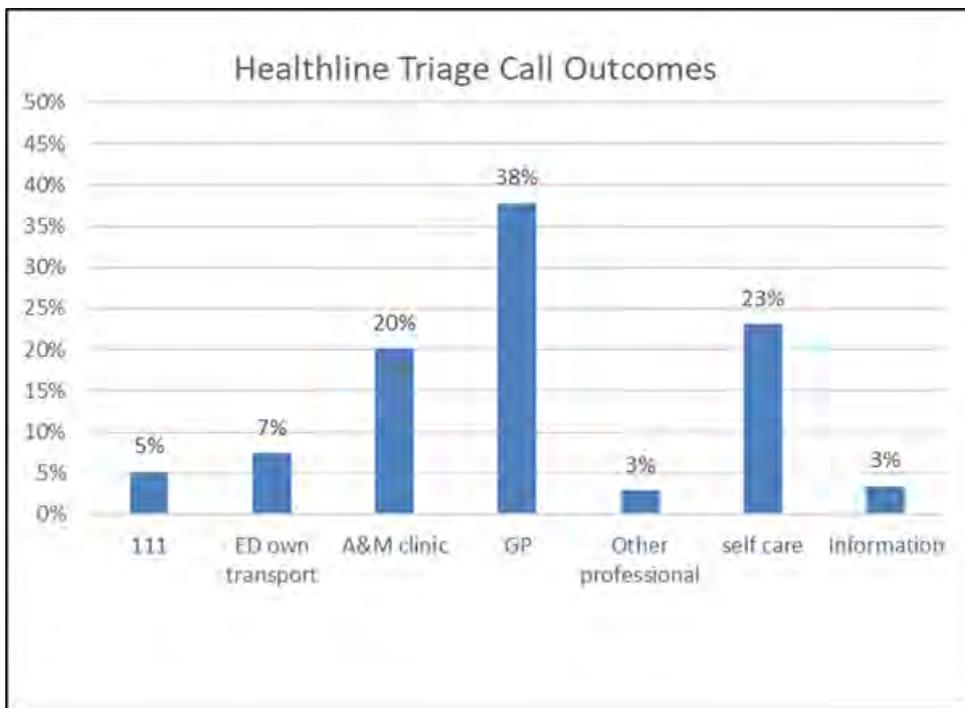
29. On 5 April 2020, 10,713 calls were answered/outbound calls made (compared to 846 on the same day last year). 5,448 of the calls were outbound calls for self-isolation checks. The graph below compares call volumes today to the same day last year.

Figure 4: Calls to and from Healthline versus the same day last year



30. The outcomes of Healthline calls on 5 April 2020 is shown in the graph below.

Figure 5: Outcomes of calls



31. On 5 April 2020 there were 99 callers concerned about Coronavirus who expressed severe distress. This is 28.5% of answered calls on Mental Health support lines. The service was 60% higher than anticipated.

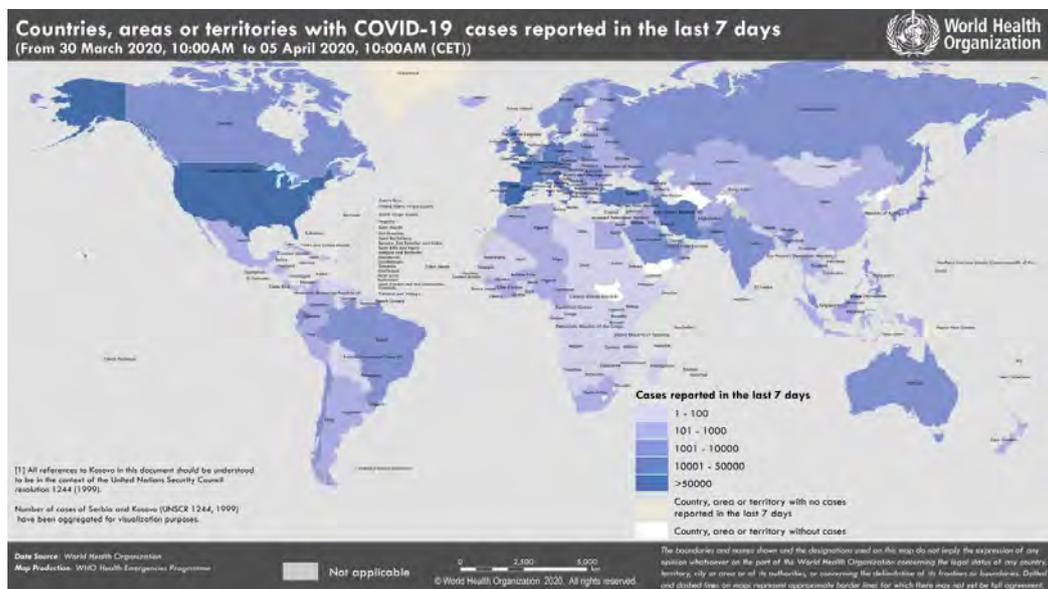
New Zealand border response

32. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
33. Cruise ships are banned from coming into New Zealand until at least 30 June 2020. Border sector officials had received a request for The World – Residences at Sea to enter a New Zealand port. The vessel currently has no passengers and around 170 crew (the minimum for operating the vessel). It has been asked to leave Freemantle by the Western Australian and Australian Governments after it completes loading stores and fuel. On 5 April 2020, Health officials declined the request as cruise ships are banned from coming to New Zealand. There is no exemption for cruise vessels with no passengers. Officials also noted that, while the request referred to the vessel as a private yacht, it is classed as a "Passenger Ship" and holds a current Passenger Ship Safety Certificate. Even if was considered a "private yacht", persons on board would not be allowed entry to New Zealand unless they were New Zealand residents.
34. New Zealand Customs data report 103 passengers arrived in New Zealand on 5 April 2020. Everyone permitted to enter New Zealand is screened on arrival. Passengers are disembarked in small groups from their aircraft and met by Government officials at the gate. Officials discuss passengers' self-isolation and transport arrangements, answer questions, and provide assistance. Arrangements are underway to transition from health staff at the border to former Air New Zealand staff, working for the Ministry of Health. This will free health staff to return to health sector work, while providing a workforce for entry and exit measures at airports who are trained to deal with travellers and accustomed to working in airport environments. This will also allow exit and entry airport measure to be escalated as required if border restrictions are eased in coming months.
35. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. Domestic flights are transporting guests to an approved isolation location. Over 3,300 rooms and 1,400 campervans are available nationally for people with no suitable transport or accommodation for self-isolation. Arrangements are being made for people to travel home after their 14-day isolation is completed. Planning for impacts on quarantine and isolation facilities is underway in the event that border restrictions are changed.
36. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.

Global

37. As reported by the WHO on **5 April 2020**, globally there have been **82,061** confirmed new cases (now **1,133,758** confirmed cases in total) and **5,798** new deaths reported (**62,784** confirmed deaths in total).
38. As reported by WHO on **5 April 2020**, there was **one** new country/territory/area reporting confirmed cases of COVID-19 in the past 24 hours: **Falkland Islands (Malvinas)**. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 6: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. **There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.**
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. **The public health impact is considered HIGH both for public health staff, the wider health sector and the community.**
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 25 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered moderate for the general population and very high for older adults and individuals with chronic underlying conditions.
 - The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is moderate if

effective mitigation measures are in place, and very high if insufficient mitigation measures are in place.

- The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
PIM	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1300 hours on 7 April 2020.**

Prepared by: Maria Turley and Li-Chia Yeh, NHCC Intelligence

Approved by: Bruce MacKay, NHCC Response Manager



SITREP 79
NOVEL CORONAVIRUS COVID-19
ISSUED: 1300 hours 7 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1300 hours on 7 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 7 April 2020 there are 1,160 combined confirmed and probable cases. There are 54 new combined confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. The case definition was amended on 3 April 2020 to de-couple respiratory symptoms from a travel history with testing made available to people with respiratory symptoms suggestive of COVID-19 infection (including the acute onset of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
4. New Zealand recorded its first death linked to COVID-19 on 29 March 2020.
5. As at 0900 hours on 7 April 2020 there are 241 recovered cases (up 65 in the last 24 hours).
6. As at 0900 hours on 7 April 2020 there are 12 clusters (cluster = 10 or more people) under investigation by public health officials throughout the country with confirmed and probable cases. This is the same number of clusters as the previous day. The largest clusters are in Auckland, Southern and Waikato DHBs.

7. As of midnight on 6 April 2020, there were 12 people in hospital with COVID-19, down from 13 yesterday. Of those in hospital, 4 are in intensive care (2 stable on ventilator, 1 deteriorating on ventilator and 1 critical on ventilator) and 1 person is deteriorating on the ward.

KEY MESSAGES

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9. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
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12. There is more PPE on the way to New Zealand and clinical advice is available about recommended use.
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14. The Ministry of Health has established contracts with two major third party logistics service providers. Between them they will manage the distribution of PPE to both the health sector and the non-health essential workforce.
15. In addition, there is considerable ongoing Government effort to secure supplies of other PPE items.
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OUTBREAK SITUATION

20. As at 0900 hours on 7 April 2020 there are 1,160 combined confirmed and probable cases. There are 54 new combined confirmed and probable cases reported in the last 24 hours. See Figure 1 for the epidemic curve, Figure 2 for new cases and Figure 3 for DHB breakdown.

21. As at 0900 hours on 7 April 2020 there are 241 recovered cases (up 65 in the last 24 hours).

Figure 1: COVID-19 Epidemic Curve

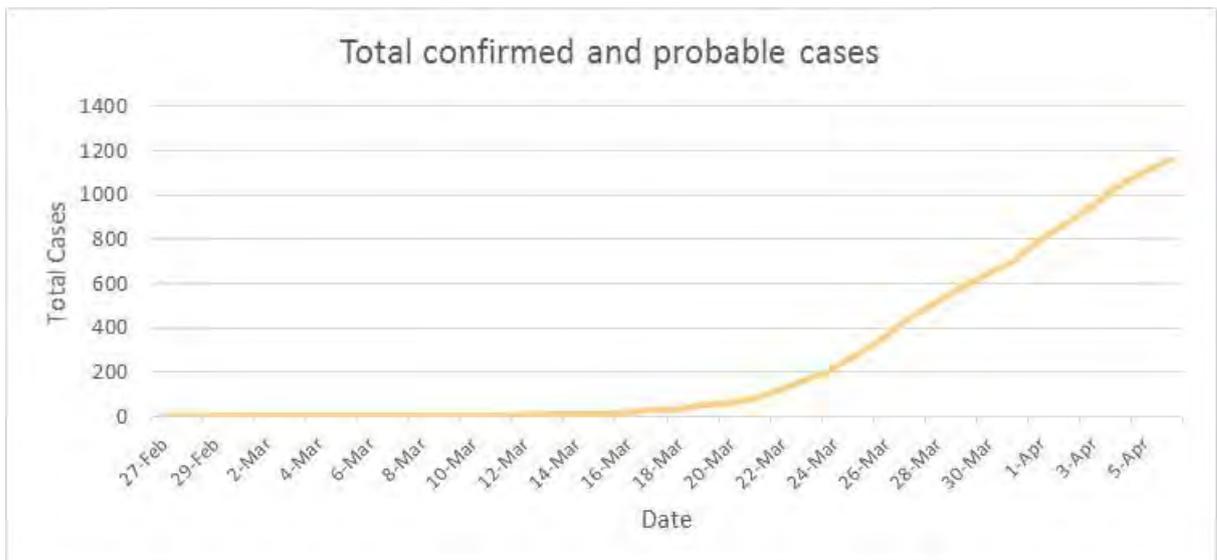


Figure 2: New cases

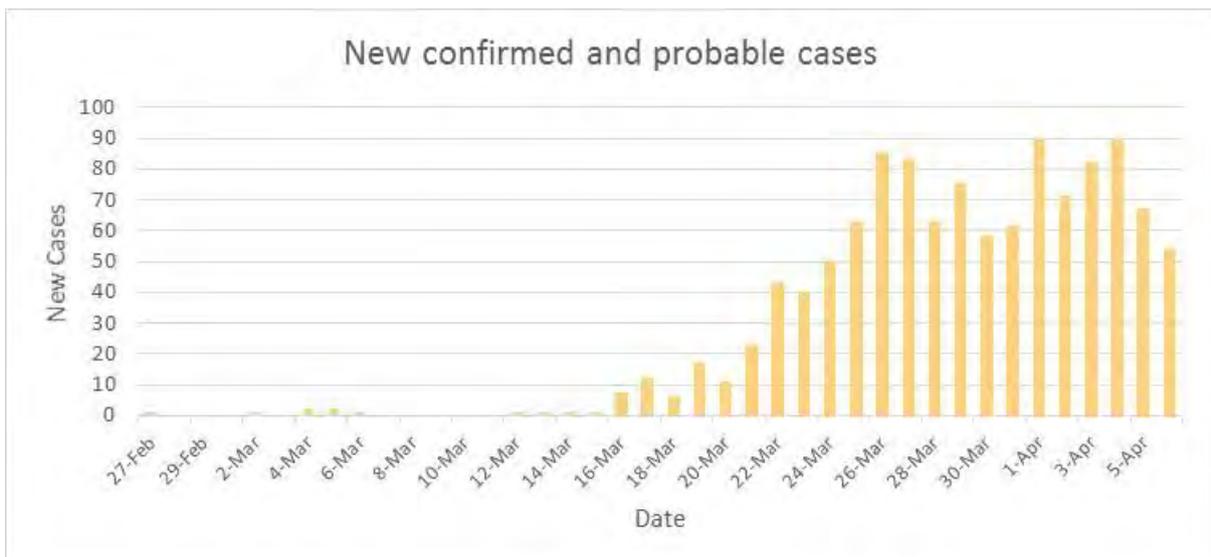
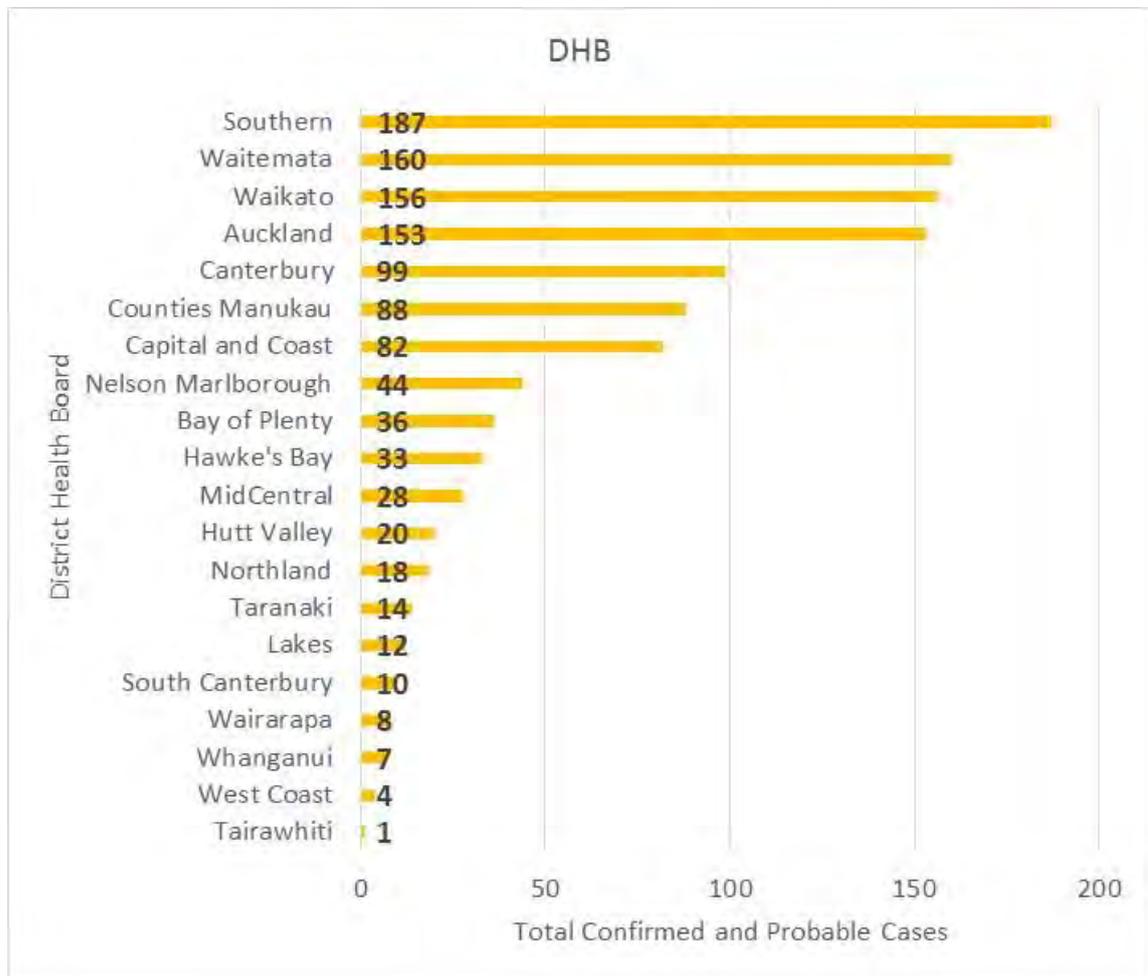


Figure 3: COVID-19 confirmed and probable cases by DHB



22. As of midnight on 6 April 2020, there were 12 people in hospital with COVID-19, down from 13 yesterday. Of those in hospital, 4 are in intensive care (2 stable on ventilator, 1 deteriorating on ventilator and 1 critical on ventilator) and 1 person is deteriorating on the ward.

Table 1: COVID-19 in-patients across all DHBs

DHB	Patients	Condition & Bed type
Auckland	2	2 stable on ward
Waitemata	2	1 stable on ward, 1 critical on ICU ventilator
Bay of Plenty (Tauranga)	1	Stable on ward
Capital & Coast (Wellington)	2	1 deteriorating on ward, 1 stable on ICU ventilator
Counties Manukau (Middlemore)	1	1 stable on ICU ventilator
Southern (Dunedin)	1	1 deteriorating on ICU ventilator
Tairāwhiti	1	Stable on ward
Waikato	2	2 stable on ward
Total	12	

23. As at 0900 hours on **7 April 2020**, there were **12** clusters (cluster = 10 or more people) under investigation throughout the country with confirmed and probable cases. **This is the same number of clusters as the previous day.** The largest clusters are in Auckland, Southern and Waikato. All clusters are being investigated by public health officials.

Table 2: COVID-19 Cluster Report (10+ cases)

Cluster	Overseas	Confirmed & Probable Cases	Cluster Type	Transmission Ongoing?	Last case notified date
Cluster 1, Auckland	Unknown	21 (↑2)	Workplace	Yes	06/04/2020
Cluster 2, Waikato	Yes	59 (↑1)	Workplace	Yes	06/04/2020
Cluster 3, Southern	Unknown	73 (↑11)	Event	Yes	05/04/2020
Cluster 7, Auckland	Yes	15 (-)	Group travel	Yes	03/04/2020
Cluster 10, Auckland	No	77 (↑5)	School	Yes	05/04/2020

Cluster 11, Southern	Yes	35 (↑3)	Conference	Yes	02/04/2020
Cluster 12, Waikato	Yes	14 (-)	Rest Home	Likely	28/03/2020
Cluster 13, Wellington	Yes	18 (↑2)	Group travel	Yes	03/04/2020
Cluster 14, Wellington	Yes	13 (-)	Event	Yes	27/03/2020
s 6(c)					
Cluster 16, Auckland	Unknown	19 (↑4)	Event	Yes	06/04/2020
Cluster 20, Christchurch	No	15 (-)	Rest home	Yes	04/04/2020

Note: case changes in brackets reflect changes in the past 24 hours. Decrease in case count is due to probable cases being reclassified. *New information is in red text.*

NEW ZEALAND HEALTH SECTOR RESPONSE

24. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Testing

25. ESR, Canterbury Health Laboratories (CHL), LabPLUS and Middlemore hospital in Auckland, Waikato hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
26. On **6 April** 2020, a total of **2,908** tests were done. The 7-day rolling average is **3,063** tests. Test capacity for **6 April** 2020 is **5,269**. See Table 3 for further information on laboratory capacity and the number of people tested.

Table 3: Laboratory tests done and capacity

	Tests	Date
Total tested yesterday	2,908	6 April 2020
7-day rolling average	3,063	31 March to 6 April 2020
Total tested to date	42,826	9 March to 6 April 2020
Test capacity	5,269	7 April 2020
Supplies in stock	43,885	7 April 2020

27. As at 0900 hours on **7 April** 2020 there are **67** Community Based Assessment Centres (CBACs) active and **50** designated practices/testing stations.

Contact Tracing — National Close Contact Service (NCCS)

28. 309 close contacts were contacted on 6 April 2020 and 5,965 since 24 March (when the Ministry picked up contact tracing from individual public health units at DHBs).

	Totals to date (from 24th March)	Daily total for 06 April	Daily total for 05 April	Trend from previous day
Number of close contacts processed by NCCS	8901	331	415	↓
Attempted calls*	17462	415	765	↓
Number of contacts traced (i.e resolved)	5965	309	328	↓
Number of requests referred to 'Finding services' – Police, Customs, Flights*/**	2402	0	76	↓
Non-compliant close contacts	22	0	3	↓
Workforce – number in Triage	n/a	15	14	↑
Workforce – number in Call Centre	n/a	125	90	↑

Notes

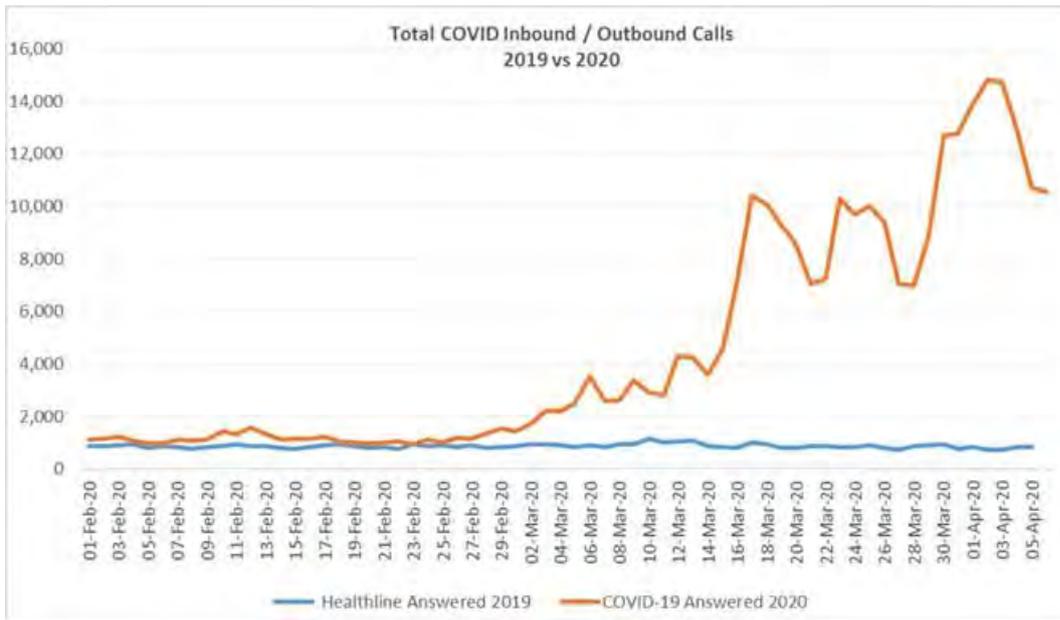
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National Telehealth Service update

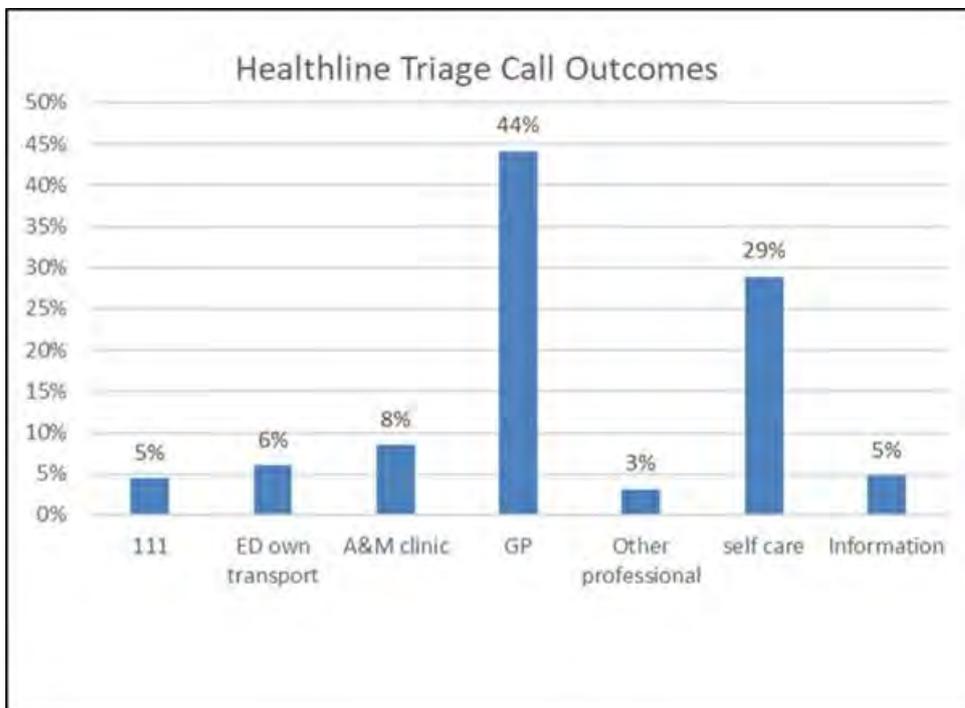
29. On 6 April 2020, 10,541 calls were answered/outbound calls made (compared to 784 on the same day last year). 4,501 of the calls were outbound calls for self-isolation checks. The graph below compares call volumes today to the same day last year.

Figure 4: Calls to and from Healthline versus the same day last year



30. The outcomes of Healthline calls on 6 April 2020 are shown in the graph below.

Figure 5: Outcomes of calls



31. On 6 April 2020 there were 107 callers concerned about Coronavirus who expressed severe distress. This is 29.6% of answered calls on Mental Health support lines. Contacts were 17% higher than anticipated which is less than on other days. COVID-19 marketing of this service has started. However, the service is not fully resourced for peak times of marketing.

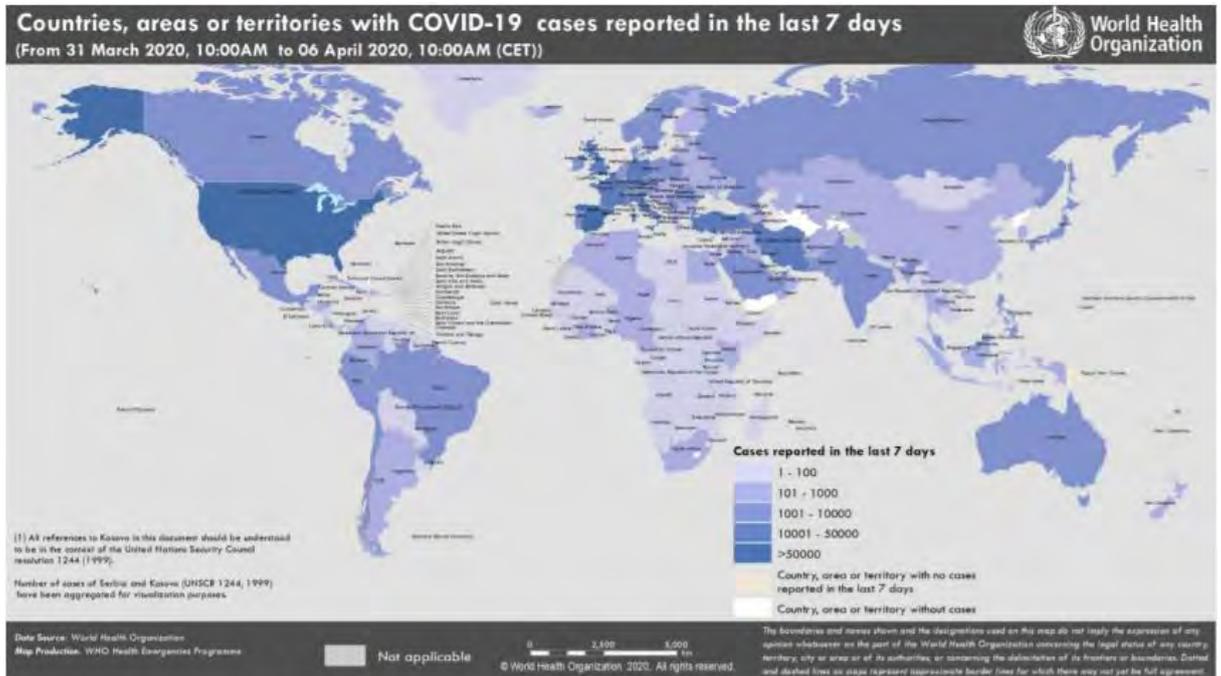
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32. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
33. New Zealand Customs data report **200 passengers** arrived in New Zealand on **6 April** 2020. Everyone permitted to enter New Zealand is screened on arrival. Passengers are disembarked in small groups from their aircraft and met by Government officials at the gate. Officials discuss passengers' self-isolation and transport arrangements, answer questions, and provide assistance. Arrangements are underway to transition from health staff at the border to former Air New Zealand staff, working for the Ministry of Health. This will free health staff to return to health sector work, while providing a workforce for entry and exit measures at airports who are trained to deal with travellers and accustomed to working in airport environments. This will also allow exit and entry airport measure to be escalated as required if border restrictions are eased in coming months.
34. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. Domestic flights are transporting guests to an approved isolation location. Over 3,300 rooms and 1,400 campervans are available nationally for people with no suitable transport or accommodation for self-isolation. Arrangements are being made for people to travel home after their 14-day isolation is completed. Planning for impacts on quarantine and isolation facilities is underway in the event that border restrictions are changed.
35. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.

Global situation

36. As reported by the WHO on **6 April** 2020, globally there have been **77,200** confirmed new cases (now **1,210,956** confirmed cases in total) and **4,810** new deaths reported (**67,594** confirmed deaths in total).
37. As reported by WHO on **6 April** 2020, there was one new country/territory/area reporting confirmed cases of COVID-19 in the past 24 hours: South Sudan. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 6: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

1. **Importation risk:** Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains **HIGH**. There also remains a **HIGH** likelihood of further returning travelers, due to high rates of infection worldwide.
2. **Risk of transmission within New Zealand:** Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
3. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is **VERY HIGH**, the likelihood of sustained transmission is **MODERATE-HIGH** and the likelihood of widespread outbreaks is **LOW-MODERATE**. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
4. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered **VERY HIGH**.
5. **Public health impact:** The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered **HIGH** both for public health staff, the wider health sector and the community.
6. **Public health risk:** Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered **HIGH**.

Global risk assessment

7. The WHO's risk assessment of the situation is **very high at the global level**.
8. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 25 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered moderate for the general population and very high for older adults and individuals with chronic underlying conditions.
 - The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is moderate if

effective mitigation measures are in place, and very high if insufficient mitigation measures are in place.

- The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

9. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
10. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
11. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

12. The psychosocial subfunction of the welfare response has now stood up a team.
13. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
14. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
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PIM	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
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Psychosocial	NHCC_Psychosocial@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1300 hours on 8 April 2020.**

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: James Poskitt, NHCC Response Manager



SITREP 80
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 8 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 8 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 8 April 2020 there are 1,210 combined confirmed and probable cases. There are 50 new combined confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. The case definition was amended on 3 April 2020 to de-couple respiratory symptoms from a travel history with testing made available to people with respiratory symptoms suggestive of COVID-19 infection (including the acute onset of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
4. New Zealand recorded its first death linked to COVID-19 on 29 March 2020.
5. As at 0900 hours on 8 April 2020 there are 282 recovered cases (up 41 in the last 24 hours).
6. As at 0900 hours on 8 April 2020 there are 12 clusters (cluster = 10 or more people) under investigation by public health officials throughout the country with confirmed and probable cases. This is the same number of clusters as the previous day. The largest clusters are in Auckland, Southern and Waikato DHBs.

7. As of midnight on 7 April 2020, there were 12 people in hospital with COVID-19, the same number as the day before. Of those in hospital, 4 are in intensive care (1 stable on ventilator and 1 stable with no ventilator, and 2 critical on ventilator) and 1 person is deteriorating on the ward.

KEY MESSAGES

8. We are currently on Alert Level 4.
9. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
10. We know how crucial it is to test people for COVID-19 as we work to understand what level of community transmission there may be and to break the chain of transmission.
11. Testing capacity for COVID-19 continues to increase and more complete tests continue to arrive.
12. There is more PPE on the way to New Zealand and clinical advice is available about recommended use.
13. We have confirmed an order for 41 million additional face masks that will start to arrive over the next six weeks.
14. The Ministry of Health has established contracts with two major third party logistics service providers. Between them they will manage the distribution of PPE to both the health sector and the non-health essential workforce.
15. In addition, there is considerable ongoing Government effort to secure supplies of other PPE items.
16. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
17. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
18. The Ministry of Health has announced the start of a range of initiatives to provide support during the COVID-19 response: Getting Through Together is the first initiative to be launched and has been developed by All Right?, a collaboration between Canterbury DHB and the Mental Health Foundation, to provide New Zealanders with a range of information and resources to help give practical advice and support during COVID-19. <https://www.allright.org.nz/campaigns/getting-through-together>

OUTBREAK SITUATION

19. As at 0900 hours on 8 April 2020 there are 1,210 combined confirmed and probable cases. There are 50 new combined confirmed and probable cases reported in the last 24 hours. See Figure 1 for the epidemic curve, Figure 2 for new cases and Figure 3 for DHB breakdown.

20. As at 0900 hours on 8 April 2020 there are 282 recovered cases (up 41 in the last 24 hours).

Figure 1: Epidemic curve

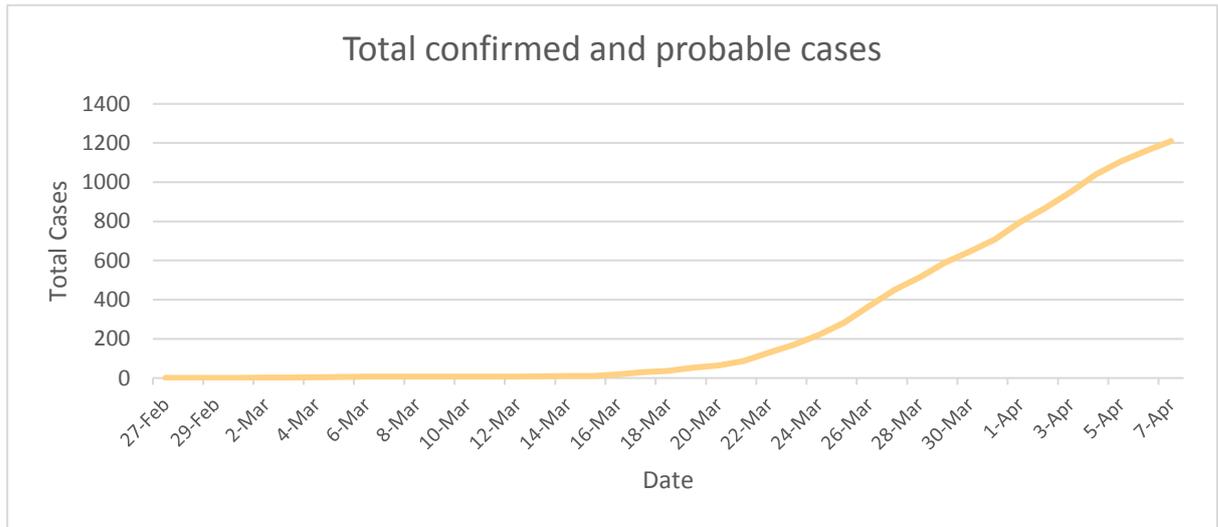


Figure 2: New cases

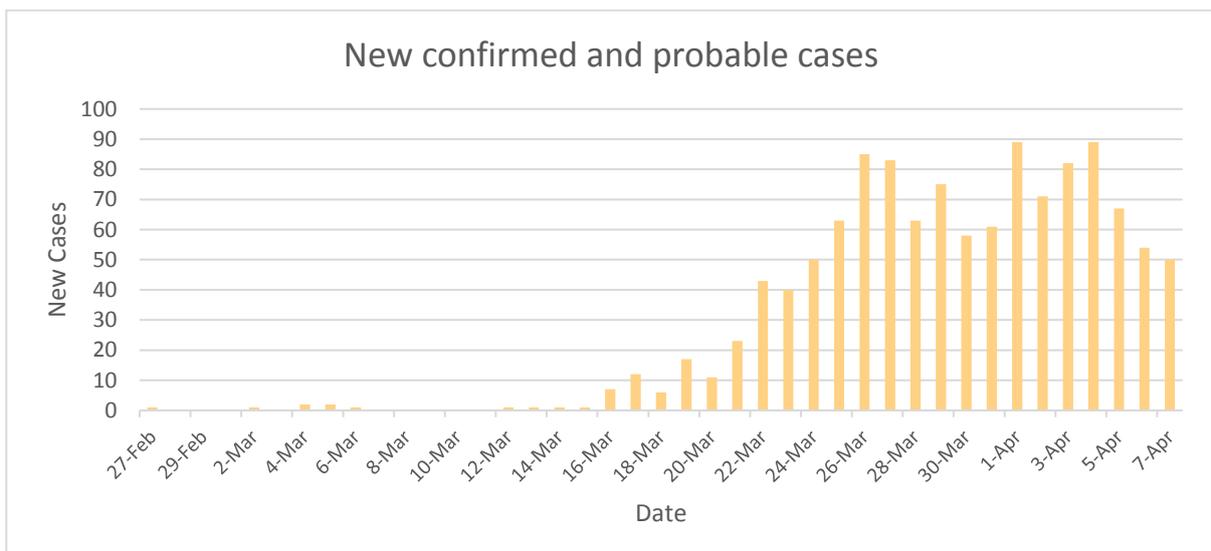


Figure 3: COVID-19 confirmed and probable cases by DHB

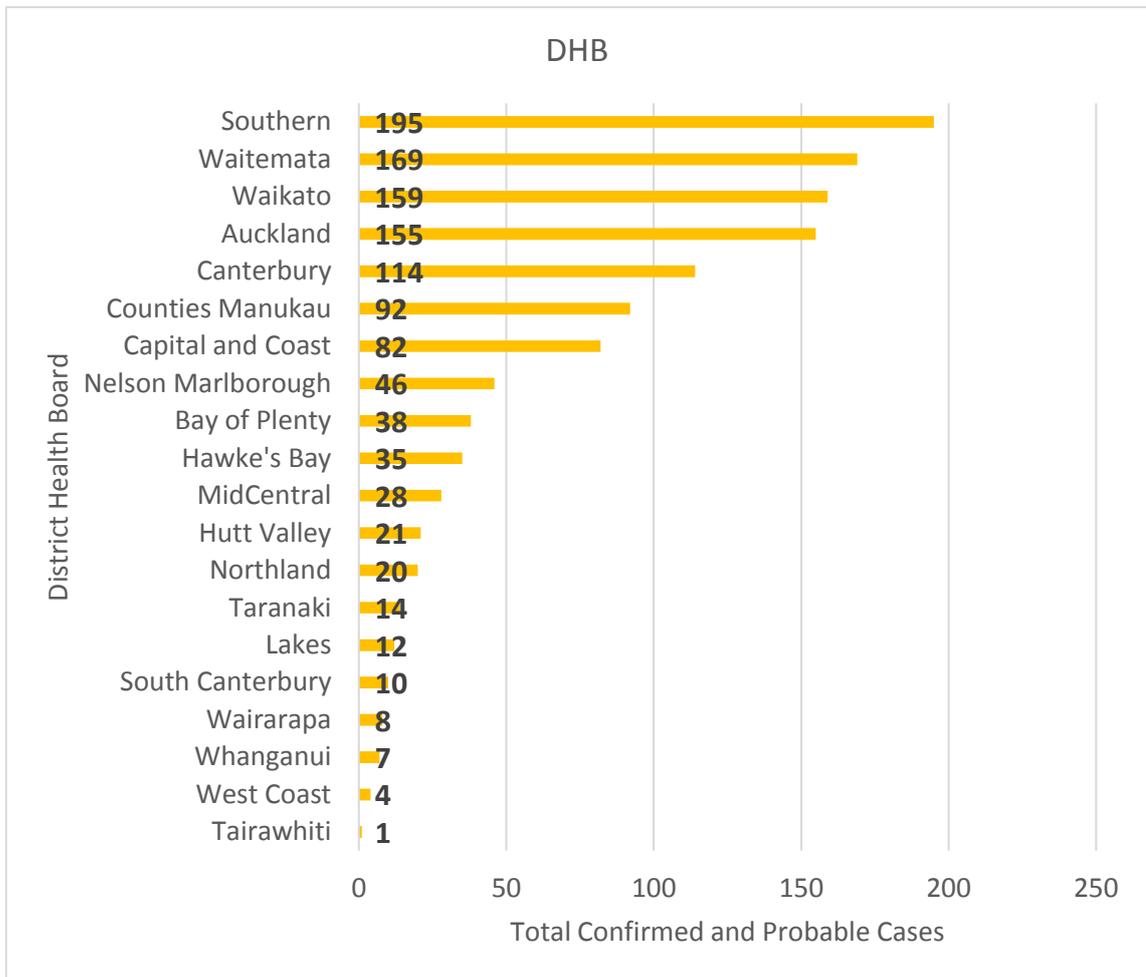


Table 1: COVID-19 in-patients across all DHBs at midnight 7 April 2020

DHB	Patients	Condition & Bed type
Auckland	2	2 stable on ward
Capital & Coast (Wellington)	2	1 deteriorating on ward, 1 stable on ICU ventilator
Counties Manukau (Middlemore)	2	1 stable on ward 1 stable on ICU no ventilator
South Canterbury	1	Stable on ward

Southern (Lakes District) (Dunedin)	2	1 stable on ward 1 critical on ICU ventilator
Waikato	1	Stable on ward
Waitemata	2	1 stable on ward 1 critical on ICU ventilator
Total	12	

21. As at 0900 hours on 8 April 2020, there were 12 clusters (cluster = 10 or more people) under investigation throughout the country with confirmed and probable cases. This is the same number of clusters as the previous day. The largest clusters are in Auckland, Southern and Waikato. All clusters are being investigated by public health officials.

Table 2: COVID-19 Cluster Report (10+ cases)

Cluster	Overseas	Confirmed & Probable Cases	Cluster Type	Transmission Ongoing?	Last case notified date
Cluster 1, Auckland	Unknown	25 (↑4)	Workplace	Yes	06/04/2020
Cluster 2, Waikato	Yes	62 (↑3)	Workplace	Yes	06/04/2020
Cluster 3, Southern	Unknown	81 (↑8)	Wedding	Yes	06/04/2020
Cluster 7, Auckland	Yes	15 (-)	Group travel	Yes	04/04/2020
Cluster 10, Auckland	No	84 (↑7)	School	Yes	07/04/2020
Cluster 11, Southern	Yes	33 (↓2)	Conference	Yes	02/04/2020

Cluster 12, Waikato	Yes	13 (↓1)	Rest Home	Likely	28/03/2020
Cluster 13, Wellington	Yes	19 (↑1)	Group travel	Yes	04/04/2020
Cluster 14, Wellington	Yes	13 (-)	Wedding	Yes	27/03/2020
s 6(c)					
Cluster 16, Auckland	Unknown	20 (↑1)	Event	Yes	06/04/2020
Cluster 20, Christchurch	No	20 (↑5)	Rest home	Yes	06/04/2020

Note: case changes in brackets reflect changes in the past 24 hours. Decrease in case count is due to probable cases being reclassified. New information is in red text.

NEW ZEALAND HEALTH SECTOR RESPONSE

22. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Testing

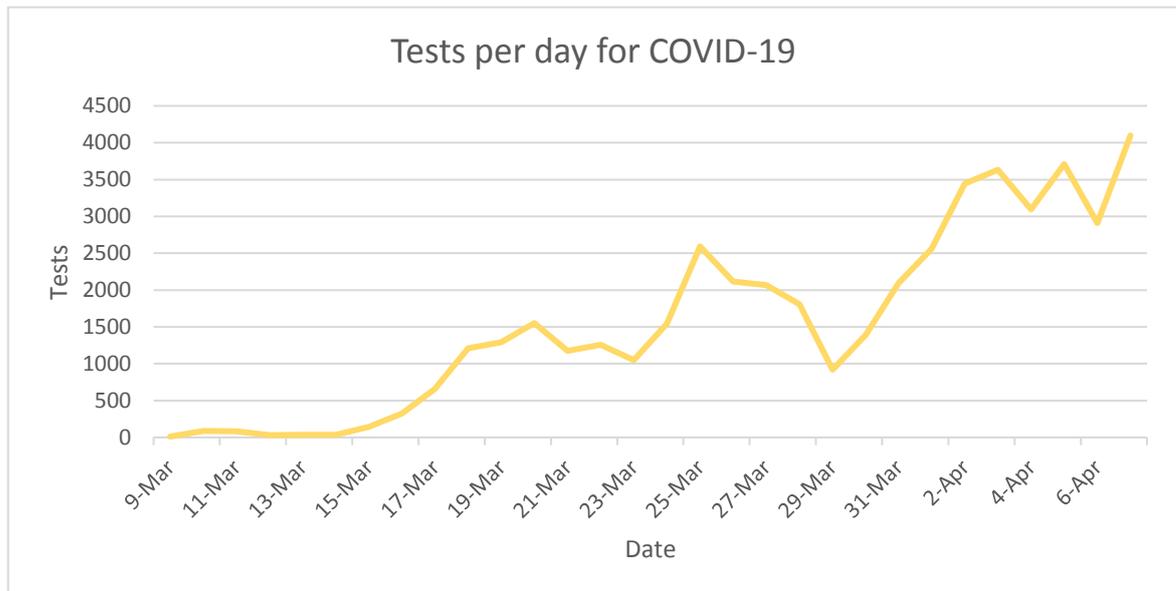
23. ESR, Canterbury Health Laboratories (CHL), LabPLUS and Middlemore hospital in Auckland, Waikato hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>

24. On **7 April 2020**, a total of **4,049** tests were done. The 7-day rolling average is **3,343** tests. Test capacity for 7 April 2020 is **5,431**. See Table 3 for further information on laboratory capacity and the number of people tested.

Table 3: Laboratory tests done and capacity

	Tests	Date
Total tested yesterday	4,049	7 April 2020
7-day rolling average	3,343	31 March to 7 April 2020
Total tested to date	46,875	9 March to 7 April 2020
Test capacity	5,431	8 April 2020
Supplies in stock	49,193	8 April 2020

Table 4: Tests per day for COVID-19



25. As at 0900 hours on **8 April 2020** there are **68** Community Based Assessment Centres (CBACs) active and **51** designated practices/testing stations.

Contact Tracing — National Close Contact Service (NCCS)

- 26. 97 close contacts were contacted on 7 April 2020 and 6,062 since 24 March (when the Ministry picked up contact tracing from individual public health units at DHBs).
- 27. Over the past three days the NCCS has seen a downward trend in the number of contacts the NCCS needs to trace. This would appear to be the result of the lockdown which has significantly limited contacts outside of people’s bubbles. NCCS continues to monitor the situation and work with PHUs to forecast demand.

	Totals to date (from 24th March)	Daily total for 07 April	Daily total for 06 April	Trend from previous day
Number of close contacts processed by NCCS	9032	131	331	↓
Attempted calls*	17778	316	415	↓
Number of contacts traced (i.e resolved)	6062	97	309	↓
Number of requests referred to ‘Finding services’ – Police, Customs, Flights*/**	2402	0	0	→
Non-compliant close contacts	22	0	0	→
Workforce – number in Triage	n/a	15	15	→
Workforce – number in Call Centre	n/a	71	125	↓

Notes

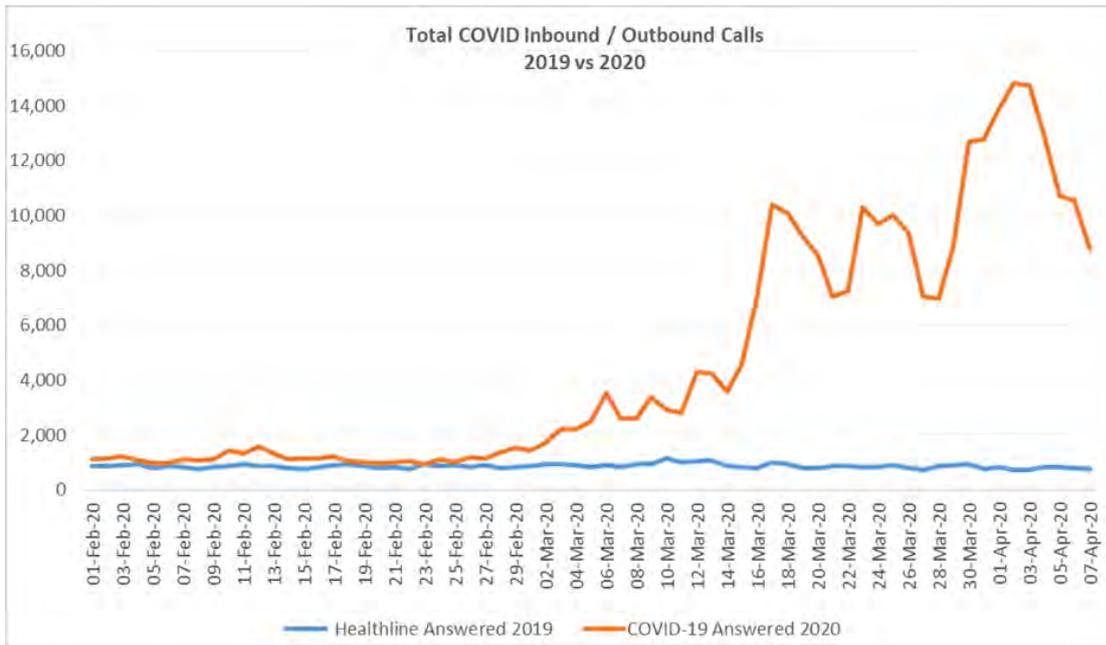
*Referrals to Finding Services and attempted calls do not yet include the number of referrals and calls made for close contacts that were processed through Salesforce. These will be available starting 7th April.

**Referrals to Finding Services include those requests from Ops which are referred back to Triage. Some requests could involve more than one individual, which means the number of individuals could be more than the number of requests.

National Telehealth Service update

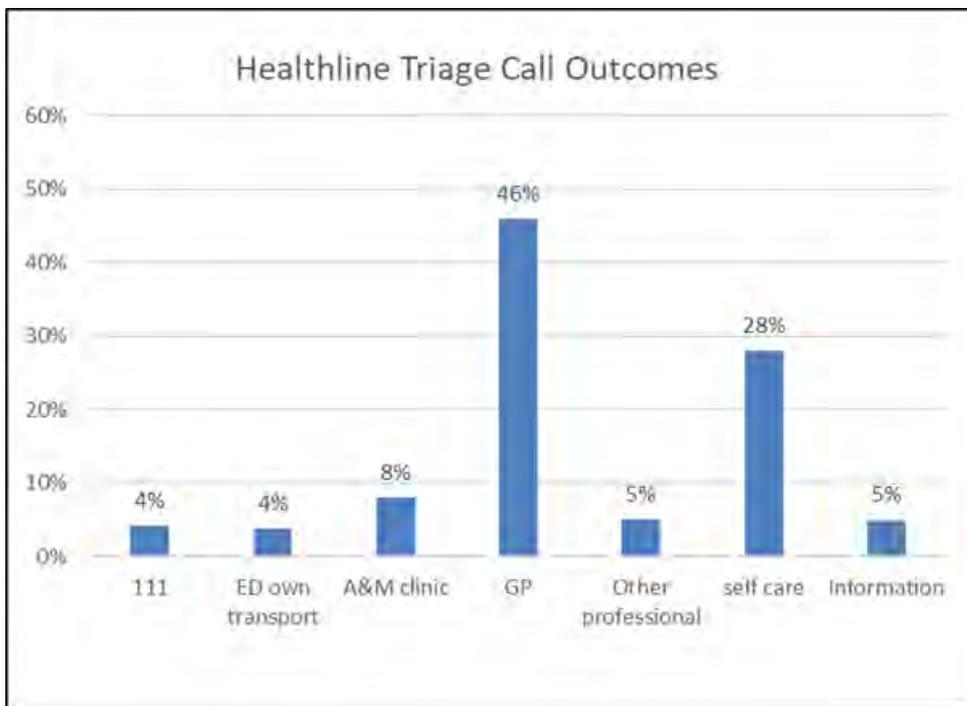
- 28. On 7 April 2020, 8,778 calls were answered/outbound calls made (compared to 753 on the same day last year). 3,258 of the calls were outbound calls for self-isolation checks. The graph below compares call volumes today to the same day last year.

Figure 4: Calls to and from Healthline versus the same day last year



29. The outcomes of Healthline calls on 7 April 2020 are shown in the graph below.

Figure 5: Outcomes of calls



30. On 7 April 2020 there were 131 callers concerned about Coronavirus who expressed severe distress. This is 34.3% of answered calls on Mental Health support lines. Contacts were 25% higher than anticipated which is less than on other days. COVID-19 marketing of this service has started. However, the service is not fully resourced for peak times of marketing.
31. Healthline reports the overall acuity of its case mix remained higher than normal yesterday and is concerned that this means that people are continuing to delay accessing care on non-COVID-19 health related matters, including long term conditions that require a visit to the doctor.
32. The COVID-19 campaign messages may need to be made clearer to express that private cars can be used to collect medication and to travel to access healthcare.
33. Healthline has a change freeze in place for Easter (5pm, 9 April – 9am 14 April), which is a normal public holiday protocol. Any known changes to case definitions or IVR changes need to be advised to Healthline today to that implementation can happen before tomorrow.

New Zealand border response

34. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
35. New Zealand Customs data report 98 passengers arrived in New Zealand on 7 April 2020. Everyone permitted to enter New Zealand is screened on arrival. Passengers are disembarked in small groups from their aircraft and met by Government officials at the gate. Officials discuss passengers' self-isolation and transport arrangements, answer questions, and provide assistance. Arrangements are underway to transition from health staff at the border to former Air New Zealand staff, working for the Ministry of Health. This will free health staff to return to health sector work, while providing a workforce for entry and exit measures at airports who are trained to deal with travellers and accustomed to working in airport environments. This will also allow exit and entry airport measure to be escalated as required if border restrictions are eased in coming months.
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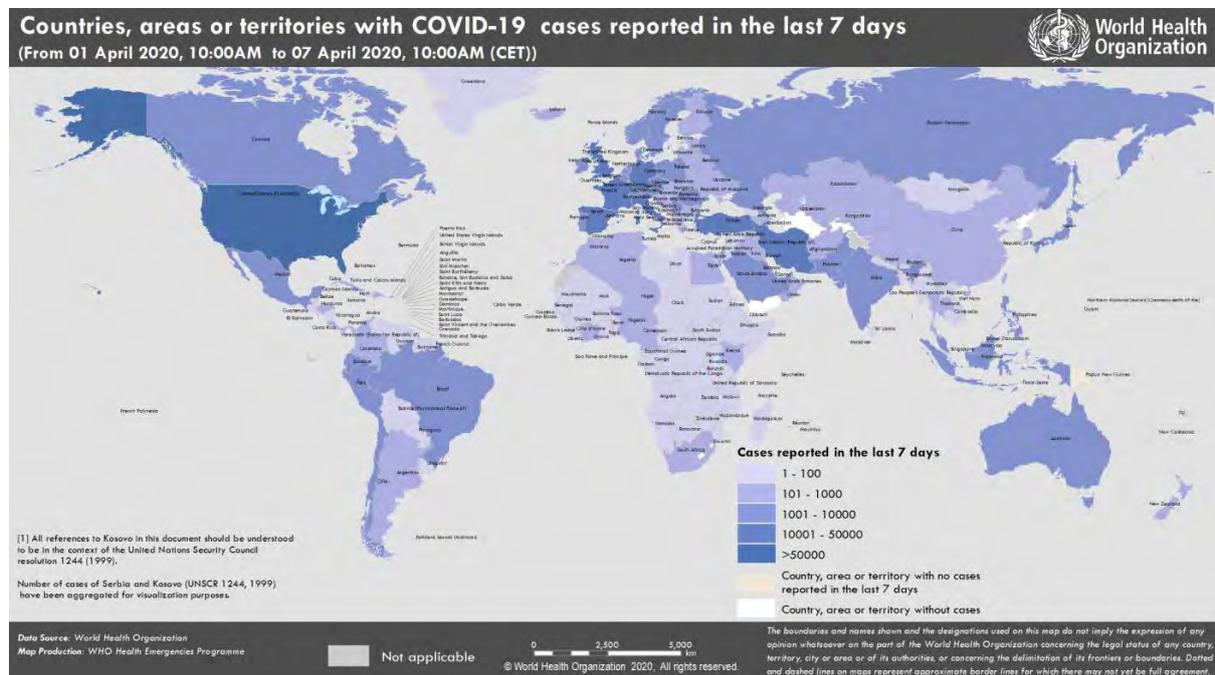
37. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.

Global situation

38. As reported by the WHO on 7 April 2020, globally there have been 68,766 confirmed new cases (now 1,279,722 confirmed cases in total) and 5,020 new deaths reported (72,614 confirmed deaths in total).

39. As reported by WHO on 7 April 2020, there was one new country/territory/area reporting confirmed cases of COVID-19 in the past 24 hours: São Tome and Principe. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 6: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

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41. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
42. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
43. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
44. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
45. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

46. The WHO's risk assessment of the situation is very high at the global level.
47. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 25 March 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered moderate for the general population and very high for older adults and individuals with chronic underlying conditions.

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is moderate if effective mitigation measures are in place, and very high if insufficient mitigation measures are in place.
- The risk of healthcare system capacity being exceeded in the EU/EEA and the UK in the coming weeks is considered high.
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PIM	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
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The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1400 hours on 9 April 2020.**

Prepared by: Kirsten Forrest and Bridget Murphy, NHCC Intelligence

Approved by: James Poskitt, NHCC Response Manager



SITREP 81
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 9 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 9 April 2020.

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SUMMARY

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2. At 0900 hours on 9 April 2020 there are 1,239 combined confirmed and probable cases. There are 29 new combined confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. As at 0900 hours on 9 April 2020 there are 317 recovered cases (up 35 in the last 24 hours).
4. As at 0900 hours on 9 April 2020 there are 12 clusters (cluster = 10 or more people) under investigation by public health officials throughout the country with confirmed and probable cases. This is the same number of clusters as the previous day. The largest clusters are in Auckland, Southern and Waikato DHBs.
5. The average age of the 49 people admitted to hospital was 58 years, with 1 person dying on 29 March 2020.
6. As at midnight on 8 April 2020, there were 14 people in hospital with COVID-19, two more than the day before. Of those in hospital, 4 are in intensive care (1 stable on ventilator and 1 stable with no ventilator, and 2 critical on ventilator) and 1 person is deteriorating on the ward.

KEY MESSAGES

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OUTBREAK SITUATION

18. The case definition was amended on 3 April 2020 to de-couple respiratory symptoms from a travel history with testing made available to people with respiratory symptoms suggestive of COVID-19 infection (including the acute onset of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see:

<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>

19. At 0900 hours on 9 April 2020 there are 1,239 combined confirmed and probable cases. There are 29 new combined confirmed and probable cases reported in the last 24 hours. See the figures below for more detail.

20. As at 0900 hours on 9 April 2020 there are 317 recovered cases (up 35 in the last 24 hours).

Figure 1: Cumulative cases



Figure 2: Epidemic curve of new cases

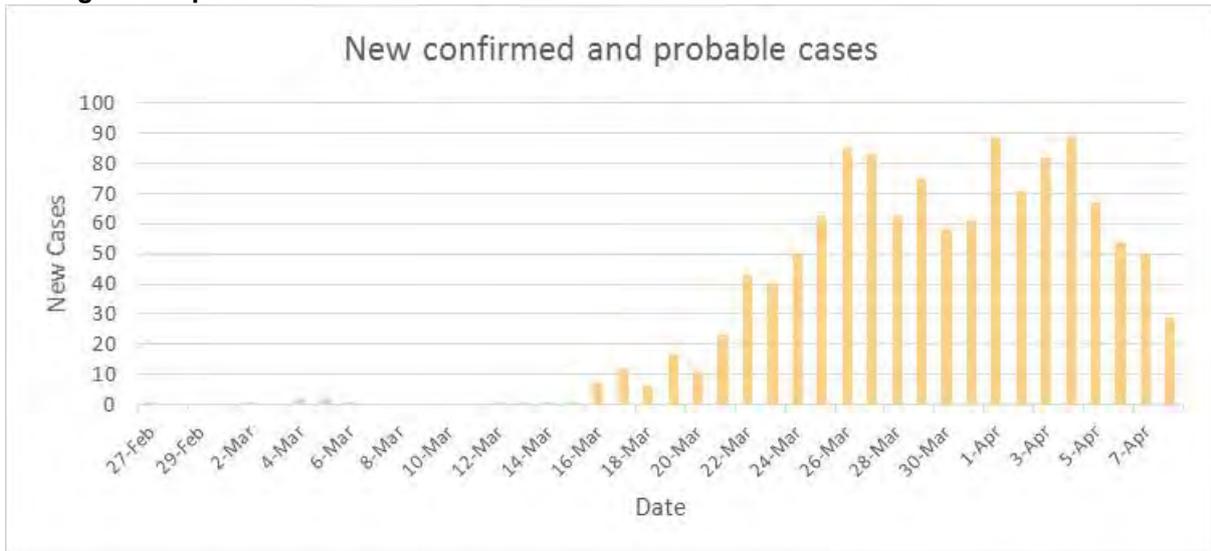
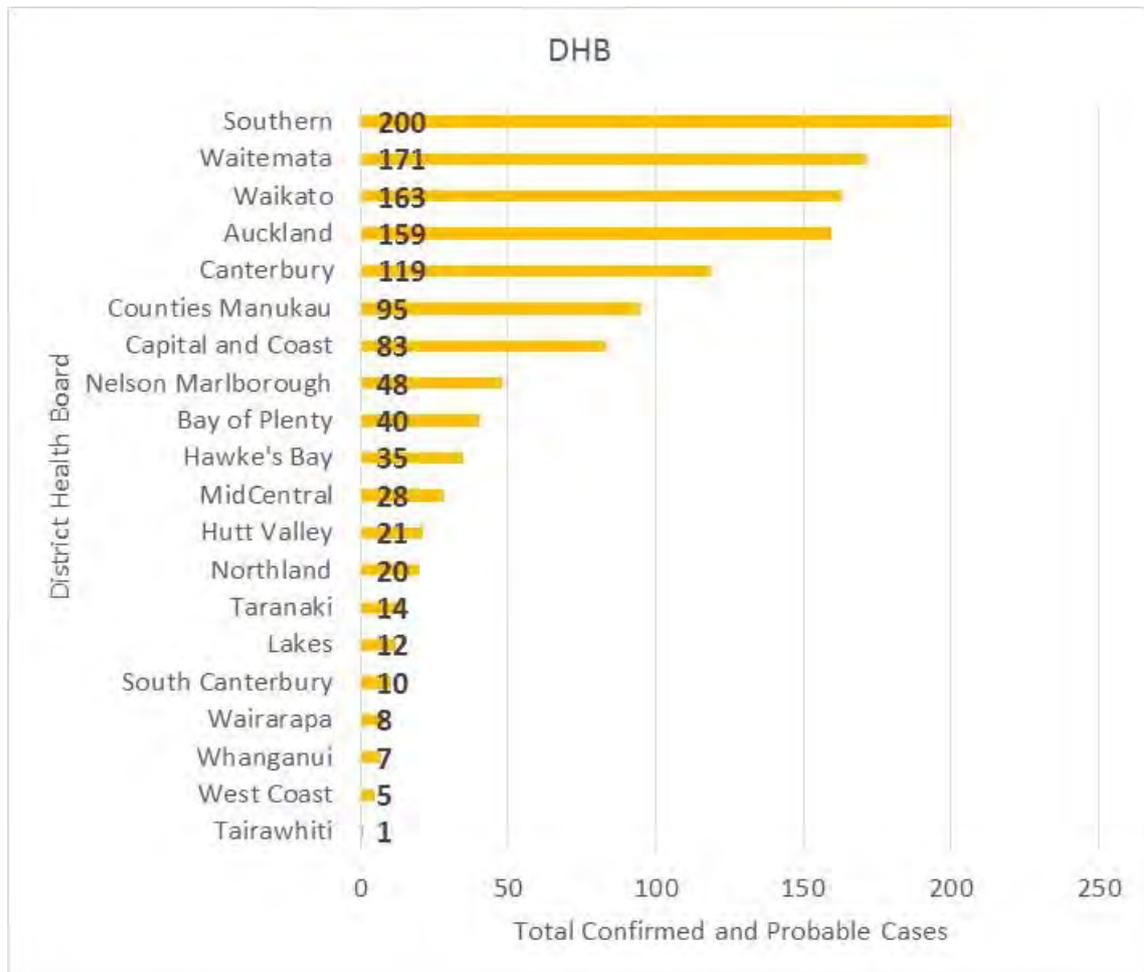


Figure 3: COVID-19 confirmed and probable cases by DHB



21. The average age of the 49 people admitted to hospital was 58 years, with 1 person dying 29 March 2020.

22. As of midnight on 8 April 2020, there were 14 people in hospital with COVID-19, two more than the day before. Of those in hospital, 4 are in intensive care (1 stable on ventilator and 1 stable with no ventilator, and 2 critical on ventilator) and 1 person is deteriorating on the ward.

Table 1: COVID-19 in-patients across all DHBs at midnight 8 April 2020

DHB	Patients	Hospital	Condition & Bed type
Auckland	2	Auckland City	2 stable on ward
Canterbury	1	Christchurch	Stable on ward
Capital & Coast	2	Wellington	1 deteriorating on ward, 1 stable on ICU ventilator
Counties Manukau	2	Middlemore	1 stable on ward 1 stable on ICU no ventilator
South Canterbury	1	Timaru	Stable on ward
Southern	3	Dunedin Lakes District Southland	1 critical on ICU ventilator 1 stable on ward 1 stable on ward
Waikato	1	Waikato	Stable on ward
Waitematā	2	North Shore	1 stable on ward 1 critical on ICU ventilator
Total	14		

23. As at 0900 hours on 9 April 2020, there were 12 clusters (cluster = 10 or more people) under investigation throughout the country with confirmed and probable cases. This is the same number of clusters as the previous day. The largest clusters are in Auckland, Southern and Waikato. All clusters are being investigated by public health officials.

Table 2: COVID-19 Cluster Report (10+ cases)

Cluster	Cluster Name	Overseas	Confirmed & Probable Cases	Cluster Type	Transmission Ongoing?	Last case notified date
Cluster 1, Auckland	Workplace Auckland	Unknown	24 (↓1)	Workplace	Yes	06/04/2020
Cluster 2, Waikato	Hospitality Venue Matamata	Yes	64 (↑2)	Workplace/Event	Yes	08/04/2020
Cluster 3, Southern	Wedding in Bluff	Yes	87	Wedding	Yes	07/04/2020

			(↑6)			
Cluster 7, Auckland	Group travel to USA	Yes	15 (-)	Group travel	Yes	04/04/2020
Cluster 10, Auckland	Marist College	No	84 (-)	School	Yes	08/04/2020
Cluster 11, Southern	World Hereford Conference	Yes	36 (↑3)	Conference	Yes	03/04/2020
Cluster 12, Waikato	Aged Residential Care Facility Hamilton	Yes	13 (-)	Rest Home	Yes	28/03/2020
Cluster 13, Wellington	Group Travel to USA	Yes	19 (-)	Group travel	Yes	04/04/2020
Cluster 14, Wellington	Wedding in Wellington	Yes	13 (-)	Wedding	Yes	28/03/2020
s 6(c)						
Cluster 16, Auckland	Private Function Auckland	Unknown	23 (↑3)	Event	Yes	06/04/2020
Cluster 20, Christchurch	Aged Residential Care Facility Christchurch	Yes	21 (↑1)	Rest home	Yes	07/04/2020

Note: case changes in brackets reflect changes in the past 24 hours. Decrease in case count is due to probable cases being reclassified. *New information is in red text.*

NEW ZEALAND HEALTH SECTOR RESPONSE

24. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

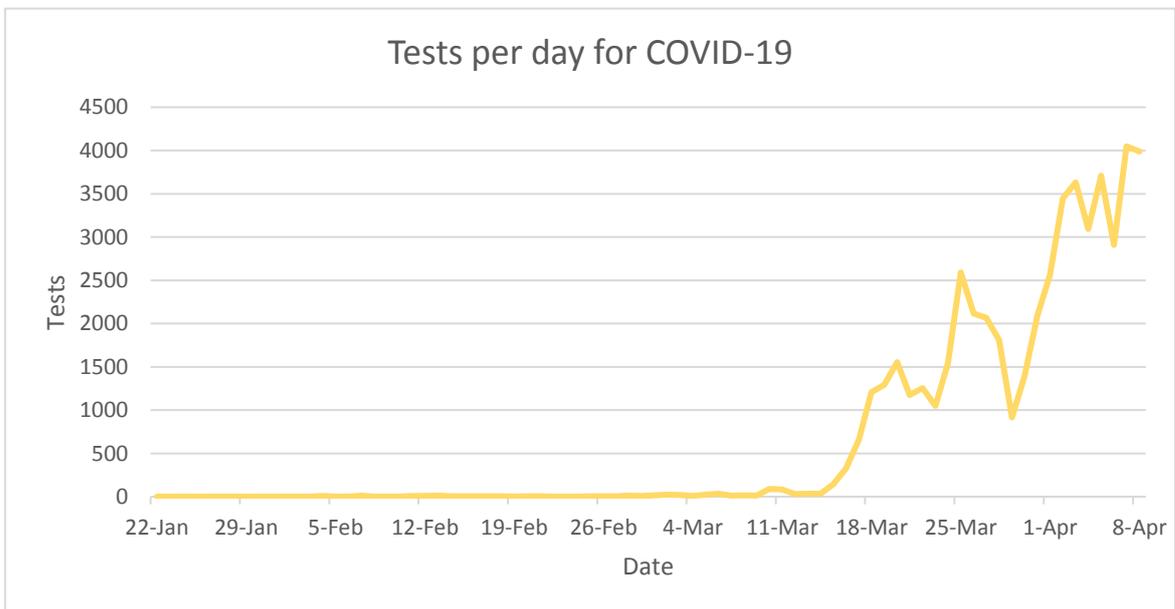
Testing

25. ESR, Canterbury Health Laboratories (CHL), LabPLUS and Middlemore hospital in Auckland, Waikato hospital, and Southern Community Laboratories in Dunedin and Wellington are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
26. On 8 April 2020, a total of 3,990 tests were done. The 7-day rolling average is 3,547 tests. Test capacity for 8 April 2020 is 5,943. See Table 3 for further information on laboratory capacity and the number of people tested.

Table 3: Laboratory tests done and capacity

	Tests	Date
Total tested yesterday	3,990	8 April 2020
7-day rolling average	3,547	2 April to 8 April 2020
Total tested to date	51,165	22 January to 8 April 2020
Test capacity	5,943	9 April 2020
Supplies in stock	47,056	9 April 2020

Table 4: Tests per day for COVID-19



27. As at 0900 hours on 9 April 2020 there are 70 Community Based Assessment Centres (CBACs) active and 55 designated practices/swabbing centres/mobiles.

Contact Tracing — National Close Contact Service (NCCS)

28. **143** close contacts were contacted on **8 April** 2020 and **5,383** since 24 March (when the Ministry picked up contact tracing from individual public health units at DHBs).
29. **The downward trend in the number of close contacts for NCCS tracing continues and workforce adjustments are being made accordingly.**

	Totals to date (from 24th March)	Daily total for 08 April	Daily total for 07 April	Trend from previous day
Close contacts identified	9491	148	237	↓
Close contacts traced (i.e resolved) *	5383	143	97	↑
Attempted calls*	17371	416	316	↑
Close contacts attempted to call	7210	158	131	↑
Call outcome: for referral to police */**	3980	117	166	↓
Non-compliant close contacts	22	0	0	→
Workforce – number in Triage	n/a	17	15	↑
Workforce – number in Call Centre	n/a	41	71	↓

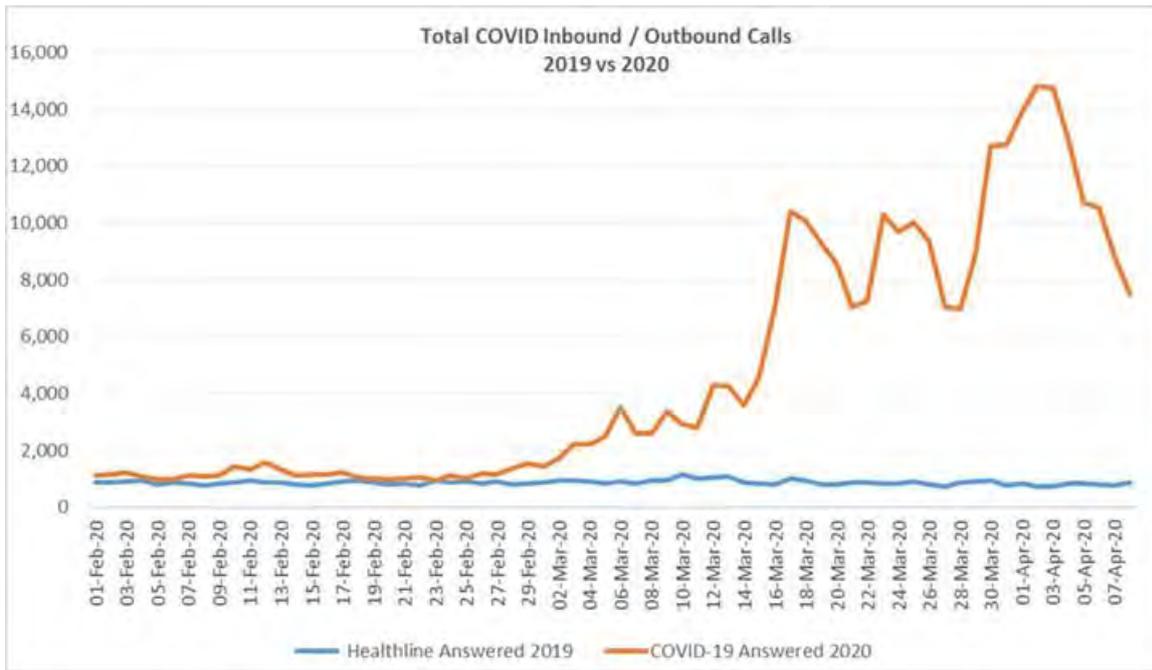
Notes * The Totals to date for these figures have been re-baselined as at 9 April

** Includes the number of people who were uncontactable (tried 6 times with no answer, incorrect number, or phone number not working).

National Telehealth Service update

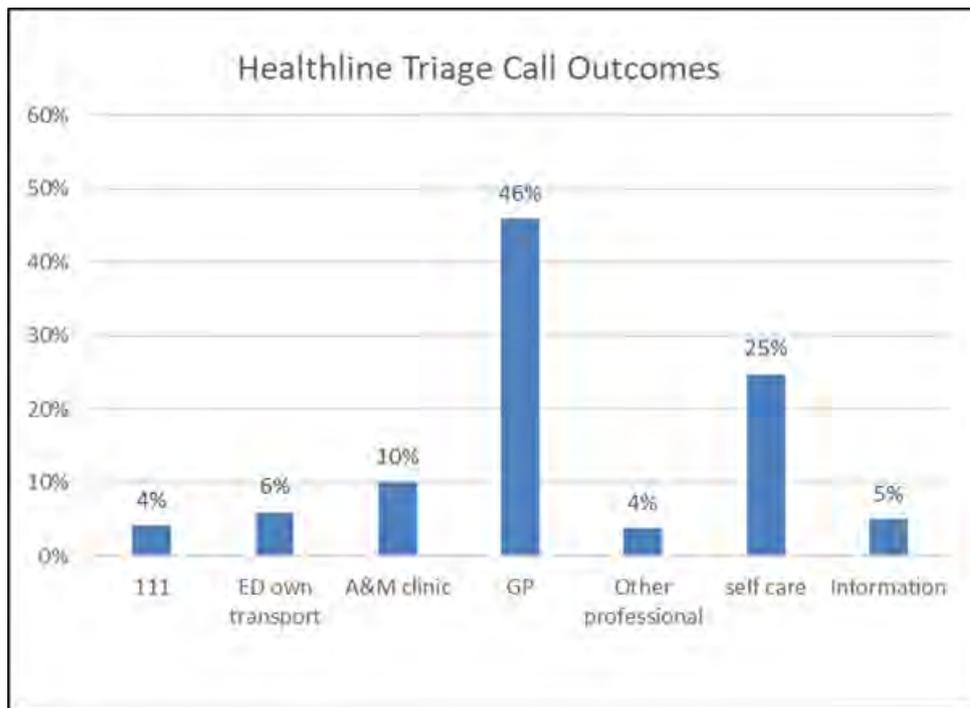
30. On **8 April 2020**, **7,522** calls were answered/outbound calls made (compared to **852** on the same day last year). **2,452** of the calls were outbound calls for self-isolation checks. The graph below compares call volumes today to the same day last year.

Figure 4: Calls to and from Healthline versus the same day last year



31. People are continuing to delay accessing treatment and advice for non-COVID-19 health-related matters, however there has been a reduction in the ED and ambulance transfers since yesterday. The outcomes of Healthline calls on 8 April 2020 are shown in the graph below.

Figure 5: Outcomes of calls



32. On 8 April 2020 there were 74 callers concerned about Coronavirus who expressed severe distress. This is 20.8% of answered calls on Mental Health support lines.
33. Healthline has a change freeze in place for Easter (5pm, 9 April – 9am 14 April), which is a normal public holiday protocol.

New Zealand border response

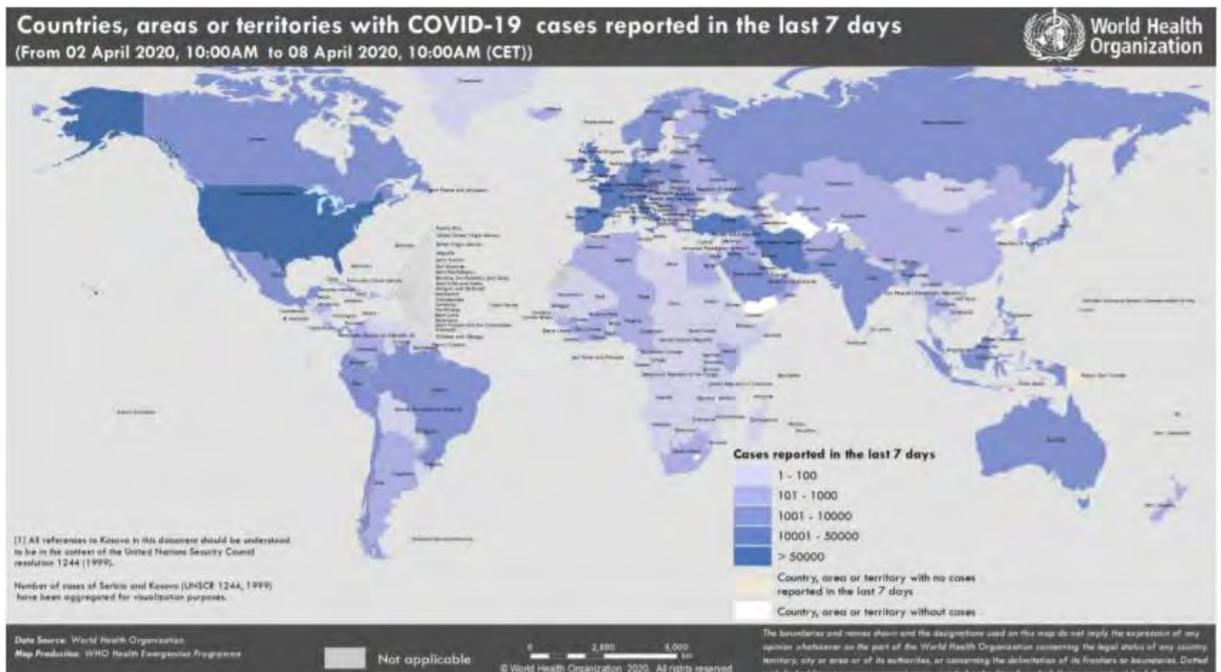
34. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
35. New Zealand Customs data report 40 passengers arrived in New Zealand on 8 April 2020. Everyone permitted to enter New Zealand is screened on arrival. Passengers are disembarked in small groups from their aircraft and met by Government officials at the gate. Officials discuss passengers' self-isolation and transport arrangements, answer questions, and provide assistance. Arrangements are underway to transition from health staff at the border to former Air New Zealand staff, working for the Ministry of Health. This will free health staff to return to health sector work, while providing a workforce for entry and exit measures at airports who are trained to deal with travellers and accustomed to working in airport environments. This will also allow exit and entry airport measure to be escalated as required if border restrictions are eased in coming months.
36. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. Domestic flights are transporting guests to an approved isolation location. Over 3,300 rooms and 1,400 campervans are available nationally for people with no suitable transport or accommodation for self-isolation. Arrangements are being made for people to travel home after their 14-day isolation is completed. Planning for impacts on quarantine and isolation facilities continues in the anticipation of mandatory facility isolation and quarantine for all travellers arriving.
37. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at all airports with flights to Pacific Island nations (Auckland, Wellington and Christchurch). Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway

to consider exit measures that may be required once international travel restrictions are relaxed.

Global situation

38. As reported by the WHO on **8 April 2020**, globally there have been **73,639** confirmed new cases (now **1,353,361** confirmed cases in total) and **6,695** new deaths reported (**79,235** confirmed deaths in total).
39. As reported by WHO on **8 April 2020**, there was **one** new country/territory/area reporting confirmed cases of COVID-19 in the past 24 hours: **Saint Pierre and Miquelon**. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 6: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

40. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
41. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
42. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
43. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
44. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
45. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

46. The WHO's risk assessment of the situation is very high at the global level.
47. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for **populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including**

hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

48. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
49. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
50. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

51. The psychosocial subfunction of the welfare response has now stood up a team.
52. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
53. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
PIM	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1400 hours on 10 April 2020.**

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: James Poskitt, NHCC Response Manager



SITREP 82
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 10 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 10 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 10 April 2020 there are 1,283 combined confirmed and probable cases. There are 44 new combined confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. As at 0900 hours on 10 April 2020 there are 373 recovered cases (up 56 in the last 24 hours).
4. As at 0900 hours on 10 April 2020 there are 12 clusters (cluster = 10 or more people) under investigation by public health officials throughout the country with confirmed and probable cases. This is the same number of clusters as the previous day. The largest clusters are in Auckland, Southern and Waikato DHBs.
5. The average age of the 49 people admitted to hospital was 58 years, with 1 person dying on 29 March 2020. A second death was reported today. The deceased person was a woman from Christchurch.
6. As at midnight on 9 April 2020, there were 16 people in hospital with COVID-19, two more than the day before. Of those in hospital, 4 are in intensive care (1 stable on ventilator and 1 stable with no ventilator, and 2 critical on ventilator) and 1 person is deteriorating on the ward.

KEY MESSAGES

7. We are currently on Alert Level 4.
8. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
9. We know how crucial it is to test people for COVID-19 as we work to understand what level of community transmission there may be and to break the chain of transmission. **For the first time we have over 55,000 complete tests on hand. Capacity continues to build and is at over 5,800 tests today despite it being a public holiday.**
10. There is more PPE on the way to New Zealand and clinical advice is available about recommended use. **Several consignments are expected to arrive over Easter, and our local manufacturer in Whanganui is also producing about 500,000 masks per week.**
11. The Ministry of Health has established contracts with two major third party logistics service providers. **From 15 April 2020 we will begin switching to a system of national distribution for masks, and soon after that, for other PPE.**
12. **An online ordering process for health and non-health essential workers will soon be available on the Ministry of Health Website. It's important that everyone receives the necessary training and follows the guidance on the Ministry's website for using PPE correctly.**
13. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
14. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
15. **The hospital sector has been working hard over the past few weeks to free up capacity. Occupation rates are around 50% around the country, much lower than usual.**
16. **Our intensive care units have put in a huge amount of work in the past week to be prepared to look after people who might need ventilation or intensive care. Examples include:**
 - **Christchurch Hospital fast tracking a new ICU in the Hagley Building**
 - **Hutt Hospital renovating offices to reinstate a former ICU for additional capacity if needed.**
17. **This level of preparedness gives confidence to New Zealanders that the health and disability sector is doing everything possible to ensure they are able to provide the necessary support as cases increase.**

18. The Ministry of Health has announced the start of a range of initiatives to provide support during the COVID-19 response: Getting Through Together is the first initiative to be launched and has been developed by All Right?, a collaboration between Canterbury DHB and the Mental Health Foundation, to provide New Zealanders with a range of information and resources to help give practical advice and support during COVID-19. <https://www.allright.org.nz/campaigns/getting-through-together>

OUTBREAK SITUATION

19. The case definition was amended on 3 April 2020 to de-couple respiratory symptoms from a travel history with testing made available to people with respiratory symptoms suggestive of COVID-19 infection (including the acute onset of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
20. The revised case definition will allow for additional testing and will help to improve the understanding of the extent of community transmission in New Zealand. Our current understanding is that community transmission is at 2%.
21. At 0900 hours on 10 April 2020 there are 1,283 combined confirmed and probable cases. There are 44 new combined confirmed and probable cases reported in the last 24 hours. See the figures below for more detail.
22. As at 0900 hours on 10 April 2020 there are 373 recovered cases (up 56 in the last 24 hours).

Figure 1: Cumulative cases

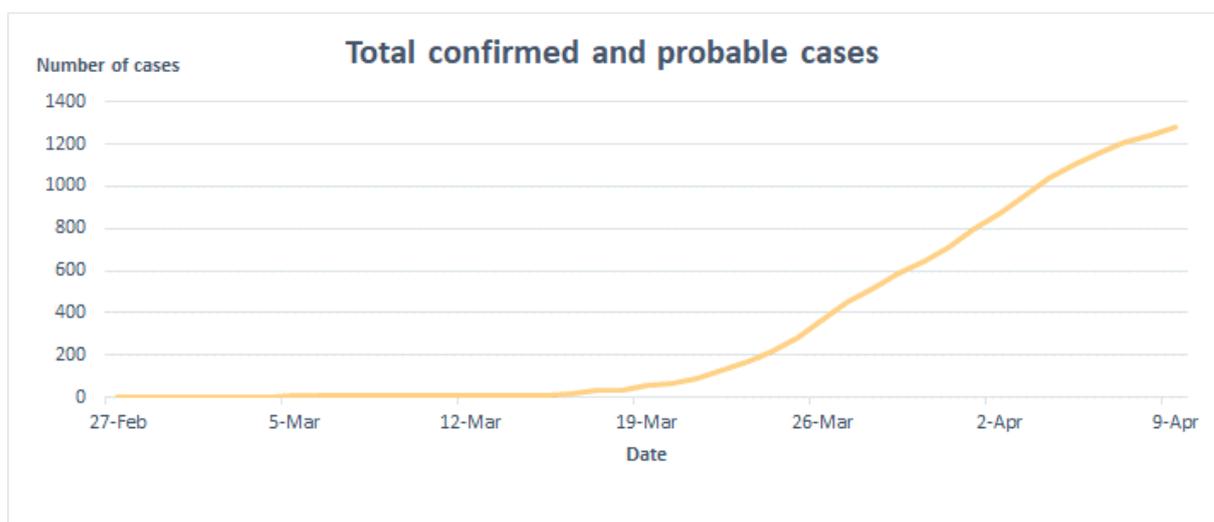
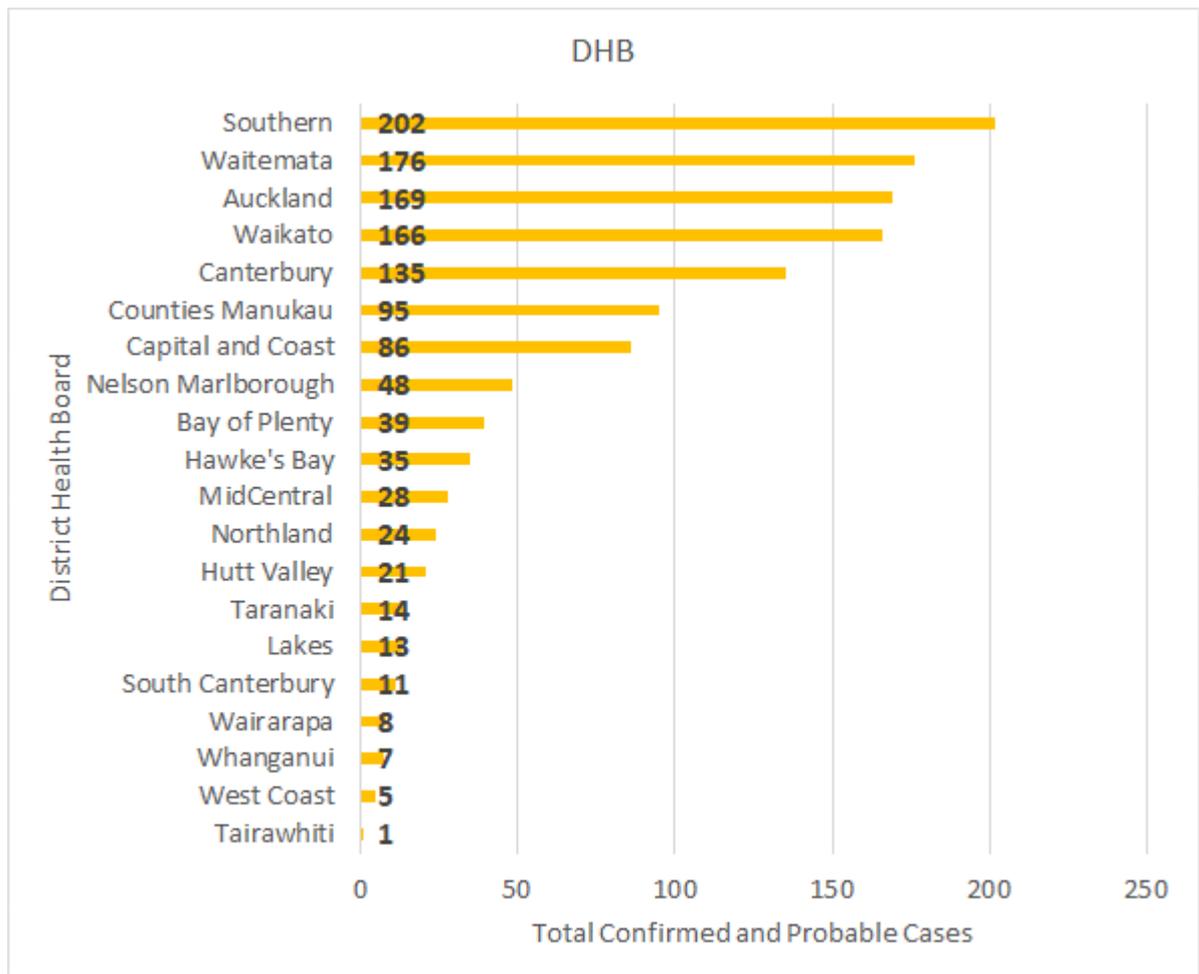


Figure 2: Epidemic curve of new cases



Figure 3: COVID-19 confirmed and probable cases by DHB



23. The average age of the 49 people admitted to hospital was 58 years, with 1 person dying 29 March 2020 and a second death reported today.

24. As of midnight on 9 April 2020, there were 16 people in hospital with COVID-19, two more than the day before. Of those in hospital, 4 are in intensive care (1 stable on ventilator and 1 stable with no ventilator, and 2 critical on ventilator) and 1 person is deteriorating on the ward.

Table 1: COVID-19 in-patients across all DHBs at midnight 9 April 2020

DHB	Patients	Hospital	Condition & Bed type
Auckland	3	Auckland City	3 stable on ward
Canterbury	2	Christchurch	2 stable on ward
Capital & Coast	2	Wellington	1 deteriorating on ward 1 stable on ICU ventilator
Counties Manukau	2	Middlemore	1 stable on ward 1 stable on ICU no ventilator
South Canterbury	1	Timaru	Stable on ward
Southern	2	Dunedin	1 critical on ICU ventilator
		Lakes District	1 stable on ward
Hawke's Bay	1	Hawke's Bay	Stable on ICU
Waikato	1	Waikato	Stable on ward
Waitematā	2	North Shore	1 stable on ward 1 critical on ICU ventilator
Total	16		

25. As at 0900 hours on 10 April 2020, there were 12 clusters (cluster = 10 or more people) under investigation throughout the country with confirmed and probable cases. This is the same number of clusters as the previous day. The largest clusters are in Auckland, Southern and Waikato. All clusters are being investigated by public health officials.

Table 2: COVID-19 Cluster Report (10+ cases)

Cluster	Cluster Name	Overseas	Confirmed & Probable Cases	Cluster Type	Transmission Ongoing?	Date first case notified
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Cluster 2, Waikato	Hospitality Venue Matamata	Yes	69 (↑5)	Workplace/Event	Yes	25/03/2020
Cluster 3, Southern	Wedding in Bluff	Yes	87 (-)	Wedding	Yes	26/03/2020
Cluster 7, Auckland	Group travel to USA	Yes	15 (-)	Group travel	Yes	22/03/2020
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Cluster 12, Waikato	Aged Residential Care Facility Hamilton	Yes	14 (↑1)	Rest Home	Yes	21/03/2020
Cluster 13, Wellington	Group Travel to USA	Yes	16 (↓3)	Group travel	Yes	20/03/2020
Cluster 14, Wellington	Wedding in Wellington	Yes	13 (-)	Wedding	Yes	19/03/2020
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Cluster 16, Auckland	Private Function Auckland	Unknown	34 (↑11)	Event	Yes	24/03/2020
Cluster 20, Christchurch	Aged Residential Care Facility Christchurch	Unknown	28 (↑7)	Rest home	Yes	26/03/2020

Note: case changes in brackets reflect changes in the past 24 hours. Decrease in case count is due to probable cases being reclassified. *New information is in red text.*

NEW ZEALAND HEALTH SECTOR RESPONSE

26. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

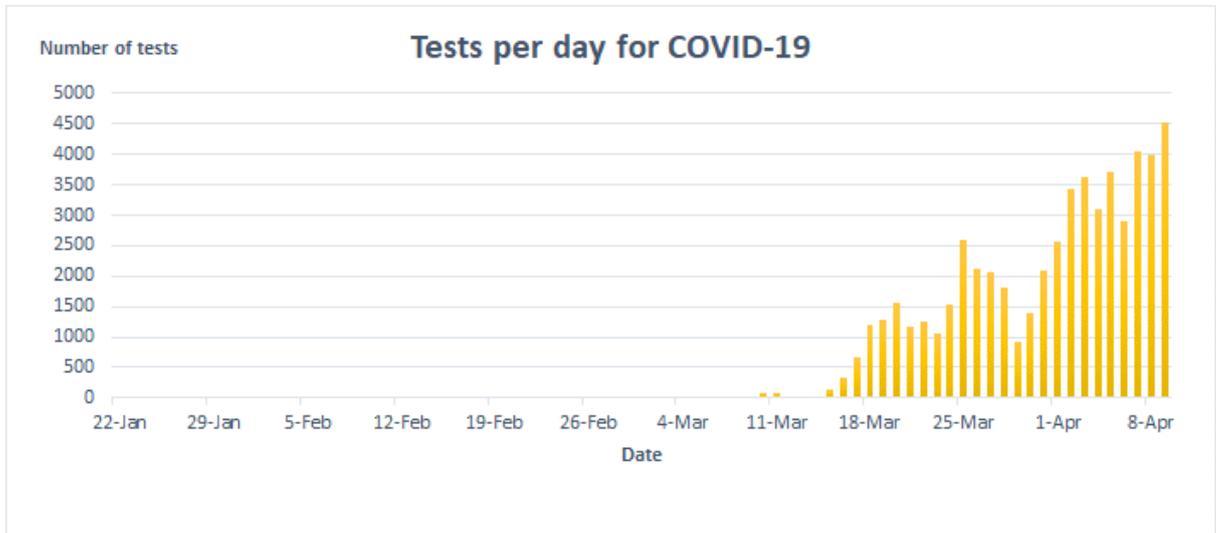
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28. On **9 April 2020**, a total of **4,520** tests were done. The 7-day rolling average is **3,700** tests. Test capacity for **10 April 2020** is **5,838**. See Table 3 for further information on laboratory capacity and the number of people tested.

Table 3: Laboratory tests done and capacity

	Tests	Date
Total tested yesterday	4,520	9 April 2020
7-day rolling average	3,700	3 April to 9 April 2020
Total tested to date	55,685	22 January to 9 April 2020
Test capacity	5,838	10 April 2020
Supplies in stock	51,119	10 April 2020

Table 4: Tests per day for COVID-19



29. As at 0900 hours on **9 April 2020** there are **75** Community Based Assessment Centres (CBACs) active and **53** designated practices/swabbing centres/mobiles.

Contact Tracing — National Close Contact Service (NCCS)

30. **70** close contacts were contacted on **9 April 2020** and **5,453** since 24 March (when the Ministry picked up contact tracing from individual public health units at DHBs).

31. The downward trend in the number of close contacts for NCCS tracing continues and workforce adjustments are being made accordingly.

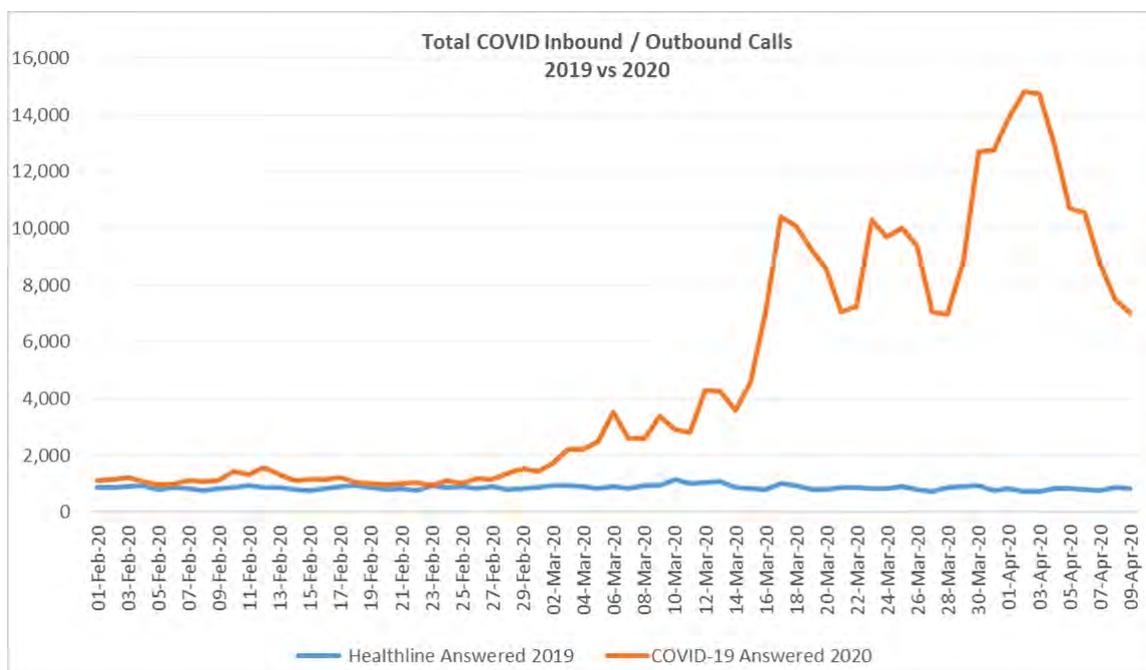
	Totals to date (from 24th March)	Daily total for 09 April	Daily total for 08 April	Trend from previous day
Close contacts identified	9854	363	148	↑
Close contacts traced (i.e resolved) *	5453	70	143	↓
Attempted calls*	17678	307	416	↓
Close contacts attempted to call	7317	107	158	↓
Call outcome: for referral to police */**	4054	74	117	↓
Non-compliant close contacts	22	0	0	→
Workforce – number in Triage	n/a	17	17	→
Workforce – number in Call Centre	n/a	32	41	↓

Notes * The Totals to date for these figures have been re-baselined as at 9 April
 ** Includes the number of people who were uncontactable (tried 6 times with no answer, incorrect number, or phone number not working).

National Telehealth Service update

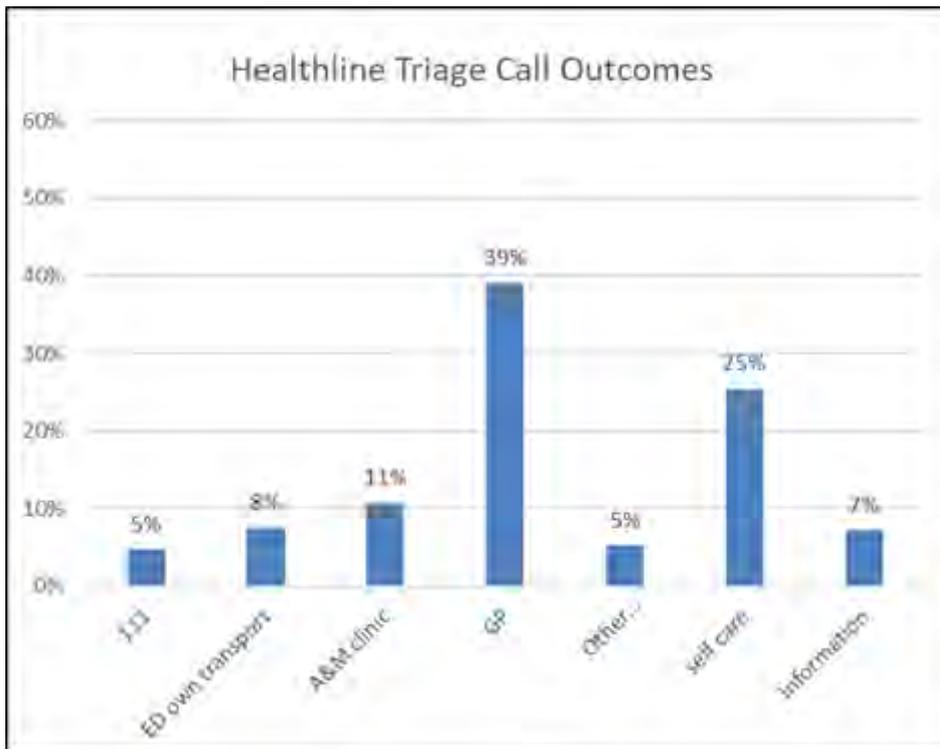
32. On 9 April 2020, 7,025 calls were answered/outbound calls made (compared to 829 on the same day last year). 2,062 of the calls were outbound calls for self-isolation checks. The downturn in calls may reflect a weekday trend and this will be monitored. The graph below compares call volumes today to the same day last year.

Figure 4: Calls to and from Healthline versus the same day last year



33. People are continuing to delay accessing treatment and advice for non-COVID-19 health-related matters, however there has been a reduction in the ED and ambulance transfers since yesterday. The outcomes of Healthline calls on 9 April 2020 are shown in the graph below.

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35. Healthline has a change freeze in place for Easter (5pm, 9 April – 9am 14 April), which is a normal public holiday protocol.

New Zealand border response

36. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
37. Additional border measures came into effect from 2359 Thursday 09 April 2020. These measures apply to persons arriving on aircraft that departed for New Zealand after 2359 Thursday 09 April 2020. These persons will either enter a managed isolation or quarantine facility for a minimum period of 14 days from their time of arrival. All people arriving in New Zealand will be screened for COVID-19 infection or contact on arrival. All passengers will be disembarked in small groups from aircraft and met by Government officials at the gate. There will be officials available at the

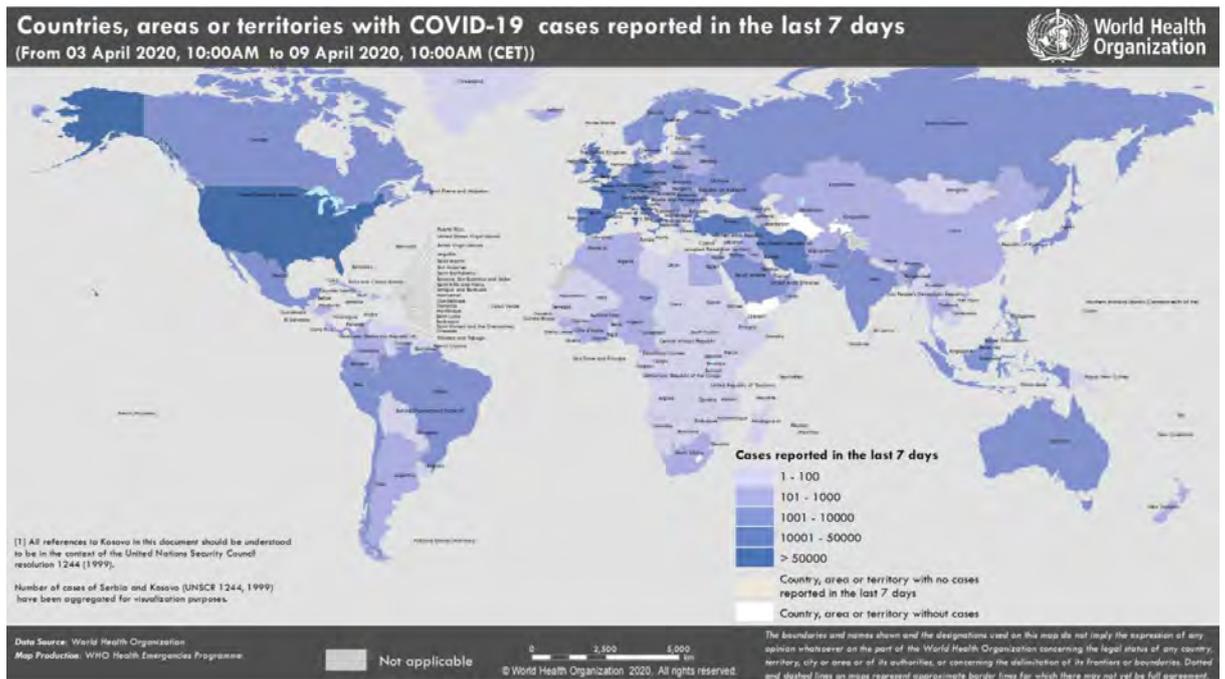
gate to answer any questions and provide assistance. If the passenger has a connected domestic flight, they will not be allowed to connect to that flight.

38. If a passenger has COVID-19 symptoms on arrival, they will be tested for COVID-19 and be placed in an approved quarantine facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they will be transported to a managed Isolation facility where they must stay for at least 14 days. All passengers placed in managed accommodation will have further information provided to them on what will happen post the 14 days isolation period, including transport arrangements to their final destination.
39. A number of managed isolation and quarantine facilities for travellers arriving into New Zealand have been established. Over 3,300 rooms and 1,400 campervans are available nationally for people with no suitable transport or accommodation for self-isolation. Arrangements are being made for people to travel home after their 14-day isolation is completed.
40. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.

Global situation

41. As reported by the WHO on 9 April 2020, globally there have been 82,837 confirmed new cases (now 1,436,198 confirmed cases in total) and 6,287 new deaths reported (85,522 confirmed deaths in total).
42. As reported by WHO on 9 April 2020, there were no new country/territory/area reporting confirmed cases of COVID-19 in the past 24 hours. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 6: Countries, territories or areas with reported confirmed cases of COVID-19



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

43. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
44. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
45. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
46. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
47. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
48. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

49. The WHO's risk assessment of the situation is very high at the global level.
50. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including

hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

51. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
52. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
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54. The psychosocial subfunction of the welfare response has now stood up a team.
55. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
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NHCC Contact Information:

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Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
PIM	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz

The NHCC continues to operate 7 days per week.

Next Report

The next report will be at **1400 hours on 11 April 2020.**

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: Lisa McPhail, NHCC Response Manager



SITREP 83
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 11 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 11 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

SUMMARY

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. See more information about alert levels here: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 11 April 2020 there are 1,312 combined confirmed and probable cases. There are 29 new combined confirmed and probable cases reported in the last 24 hours. For further details please see the Ministry of Health website: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>
3. As at 0900 hours on 11 April 2020 there are 422 recovered cases (up 49 in the last 24 hours).
4. As at 0900 hours on 11 April 2020 there are 13 clusters (cluster = 10 or more people) under investigation by public health officials throughout the country with confirmed and probable cases. There is 1 new cluster which is in Christchurch. The largest clusters are in Auckland, Southern and Waikato DHBs.
5. The average age of the 50 people admitted to hospital is 58 years. There are now 4 deaths, as 2 more were reported today.
6. As at midnight on 10 April 2020, there were 15 people in hospital with COVID-19, one less than the day before. Of those in hospital, 5 are in intensive care (3 stable on ventilator and 1 stable with no ventilator, and 1 critical on ventilator).

KEY MESSAGES

7. We are currently on Alert Level 4.

8. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
9. There is more PPE on the way to New Zealand and clinical advice is available about recommended use. Several consignments are expected to arrive over Easter, and our local manufacturer in Whanganui is also producing about 500,000 masks per week.
10. The Ministry of Health has established contracts with two major third party logistics service providers. From 15 April 2020 we will begin switching to a system of national distribution for masks, and soon after that, for other PPE.
11. An online ordering process for health and non-health essential workers will soon be available on the Ministry of Health Website. It's important that everyone receives the necessary training and follows the guidance on the Ministry's website for using PPE correctly.
12. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
13. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
14. The hospital sector has been working hard over the past few weeks to free up capacity. Occupation rates are around 50% around the country, much lower than usual.
15. Our intensive care units have put in a huge amount of work in the past week to be prepared to look after people who might need ventilation or intensive care. Examples include:
 - Christchurch Hospital fast tracking a new ICU in the Hagley Building
 - Hutt Hospital renovating offices to reinstate a former ICU for additional capacity if needed.
16. This level of preparedness gives confidence to New Zealanders that the health and disability sector is doing everything possible to ensure they are able to provide the necessary support as cases increase.
17. The Ministry of Health has announced the start of a range of initiatives to provide support during the COVID-19 response: Getting Through Together is the first initiative to be launched and has been developed by All Right?, a collaboration between Canterbury DHB and the Mental Health Foundation, to provide New Zealanders with a range of information and resources to help give practical advice and support during COVID-19. <https://www.allright.org.nz/campaigns/getting-through-together>

OUTBREAK SITUATION

18. The case definition was amended on 3 April 2020 to de-couple respiratory symptoms from a travel history with testing made available to people with

respiratory symptoms suggestive of COVID-19 infection (including the acute onset of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see:

<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>

19. The revised case definition will allow for additional testing and will help to improve the understanding of the extent of community transmission in New Zealand. Our current understanding is that community transmission is at 2%.
20. At 0900 hours on **11 April** 2020 there are **1,312** combined confirmed and probable cases. There are **29** new combined confirmed and probable cases reported in the last 24 hours. See the figures below for more detail.
21. As at 0900 hours on **11 April** 2020 there are **422** recovered cases (up **49** in the last 24 hours).

Figure 1: Cumulative cases

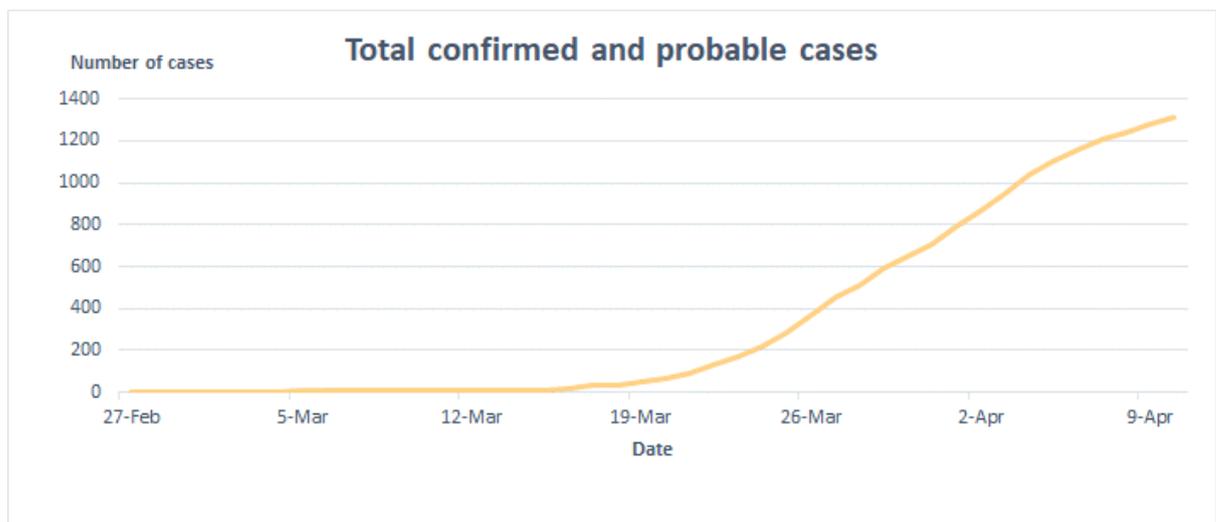


Figure 2: Epidemic curve of new cases

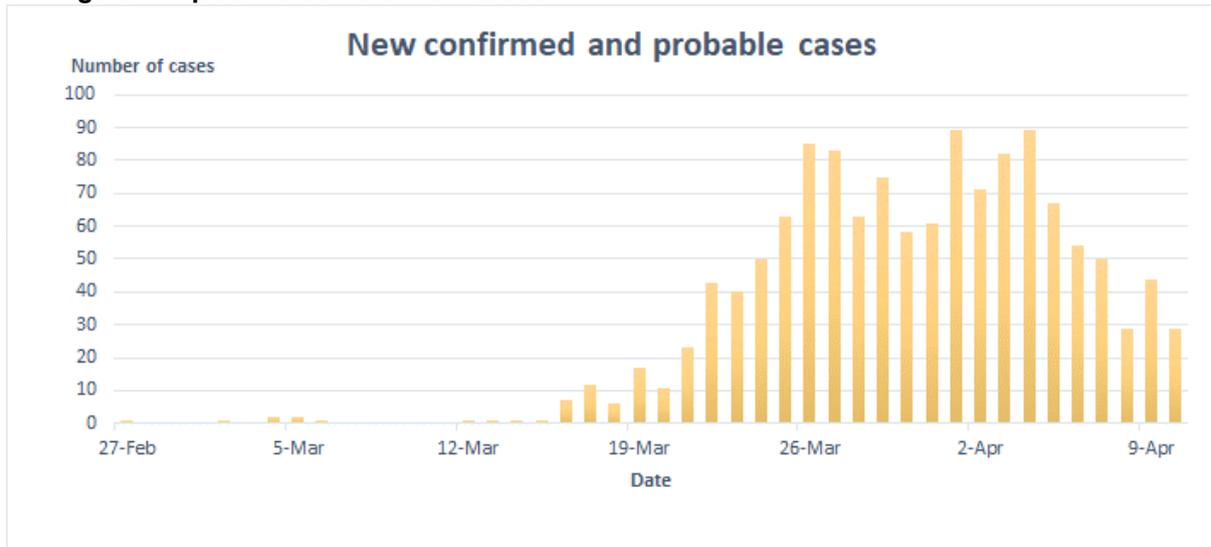
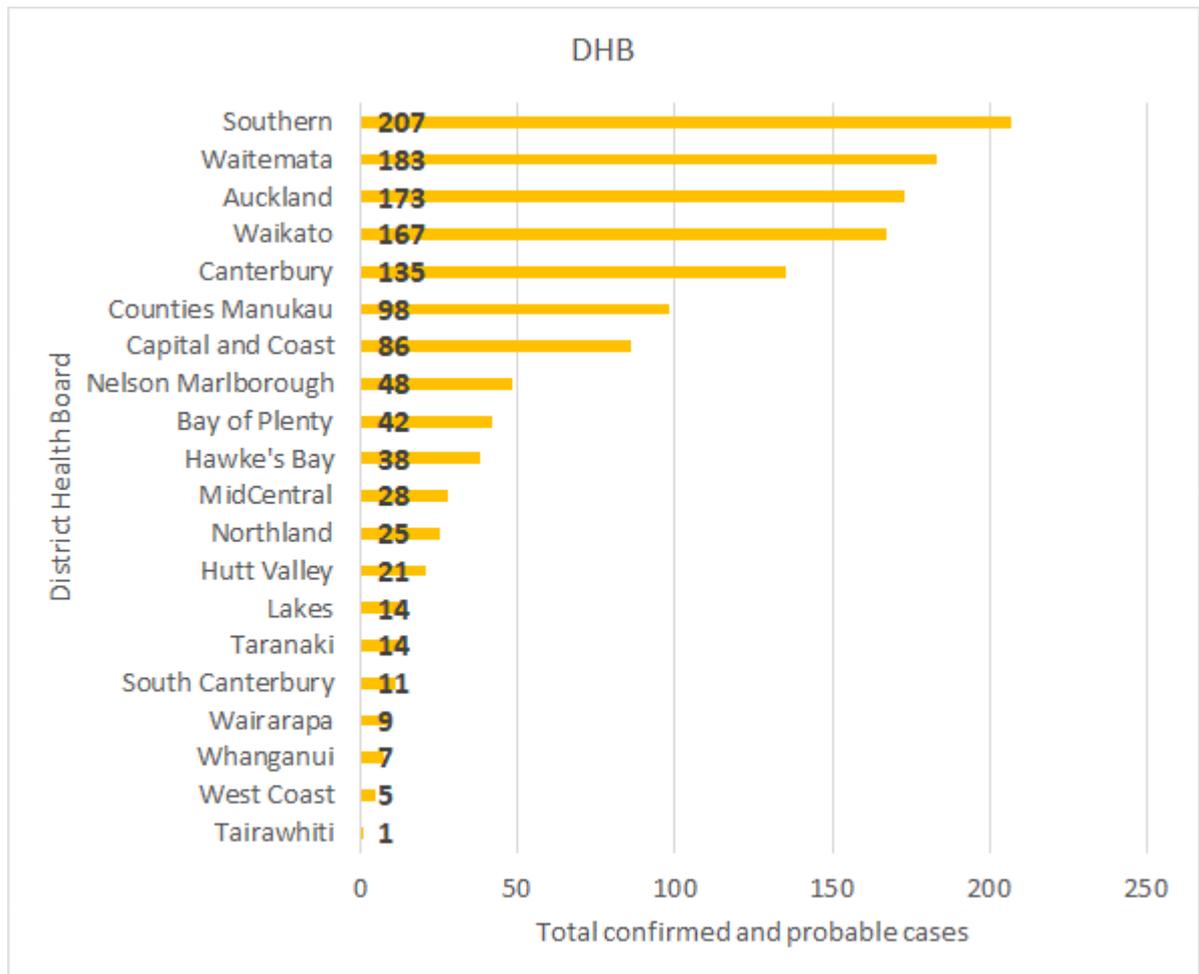


Figure 3: COVID-19 confirmed and probable cases by DHB



22. The average age of the 50 people admitted to hospital is 58 years. There are now 4 deaths, as 2 more were reported today.

23. As at midnight on 10 April 2020, there were 15 people in hospital with COVID-19, one less than the day before. Of those in hospital, 5 are in intensive care (3 stable on ventilator and 1 stable with no ventilator, and 1 critical on ventilator).

Table 1: COVID-19 in-patients across all DHBs at midnight 10 April 2020

DHB	Patients	Hospital	Condition & Bed type
Auckland	3	Auckland City	3 stable on ward
Canterbury	1	Christchurch	Stable on ward
Capital & Coast	1	Wellington	Stable on ICU ventilator
Counties Manukau	2	Middlemore	1 stable on ward 1 stable on ICU ventilator
Hawke's Bay	1	Hawke's Bay	Stable on ICU no ventilator
Nelson Marlborough	1	Wairau	Stable on ward
South Canterbury	1	Timaru	Stable on ward
Southern	2	Dunedin Lakes District	1 critical on ICU ventilator 1 stable on ward
Waikato	1	Waikato	Stable on ward
Waitematā	2	North Shore	1 stable on ward 1 stable on ICU ventilator
Total	15		

24. As at 0900 hours on 11 April 2020, there were 13 clusters (cluster = 10 or more people) under investigation throughout the country with confirmed and probable cases. There is 1 new cluster which is in Christchurch. The largest clusters are in Auckland, Southern and Waikato. All clusters are being investigated by public health officials.

Table 2: COVID-19 Cluster Report (10+ cases)

Cluster	Cluster Name	Overseas	Confirmed & Probable Cases	Cluster Type	Transmission Ongoing?	Date first case notified
Cluster 1, Auckland	Workplace Auckland	Unknown	28 (-)	Workplace	Yes	28/03/2020
Cluster 2, Waikato	Hospitality Venue Matamata	Yes	70 (↑1)	Workplace/ Event	Yes	25/03/2020
Cluster 3, Southern	Wedding in Bluff	Yes	85 (↓2)	Wedding	Yes	26/03/2020
Cluster 7, Auckland	Group travel to USA	Yes	15 (-)	Group travel	Yes	22/03/2020
Cluster 10, Auckland	Marist College	No	85 (↑1)	School	Yes	21/03/2020
Cluster 11, Southern	World Hereford Conference	Yes	33 (-)	Conference	Yes	19/03/2020
Cluster 12, Waikato	Aged Residential Care Facility Hamilton	Yes	14 (-)	Rest Home	Yes	21/03/2020
Cluster 13, Wellington	Group Travel to USA	Yes	16 (-)	Group travel	Yes	20/03/2020
Cluster 14, Wellington	Wedding in Wellington	Yes	13 (-)	Wedding	Yes	19/03/2020
s 6(c)						
Cluster 16, Auckland	Private Function Auckland	Unknown	35 (↑1)	Event	Yes	24/03/2020

Cluster 19, Christchurch	Aged Residential Care Facility 2 Christchurch	Unknown	14	Rest Home	Yes	-
Cluster 20, Christchurch	Aged Residential Care Facility Christchurch	Unknown	30 (↑2)	Rest home	Yes	26/03/2020

Note: case changes in brackets reflect changes in the past 24 hours. Decrease in case count is due to probable cases being reclassified. *New information is in red text.*

NEW ZEALAND HEALTH SECTOR RESPONSE

25. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Testing

26. ESR (Wellington), Canterbury Health Laboratories (CHL), LabPLUS (Auckland), LabTests (Auckland), Middlemore hospital (Auckland), Waikato hospital, Southern Community Laboratories (SCL) in Dunedin and Wellington, **Pathlab (Tauranga) and Waitamata** are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition. <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
27. On **10 April 2020**, a total of **3,061** tests were done. The 7-day rolling average is **3,619** tests. Test capacity for **11 April 2020** is **5,789**. See Table 3 for further information on laboratory capacity and the number of people tested.

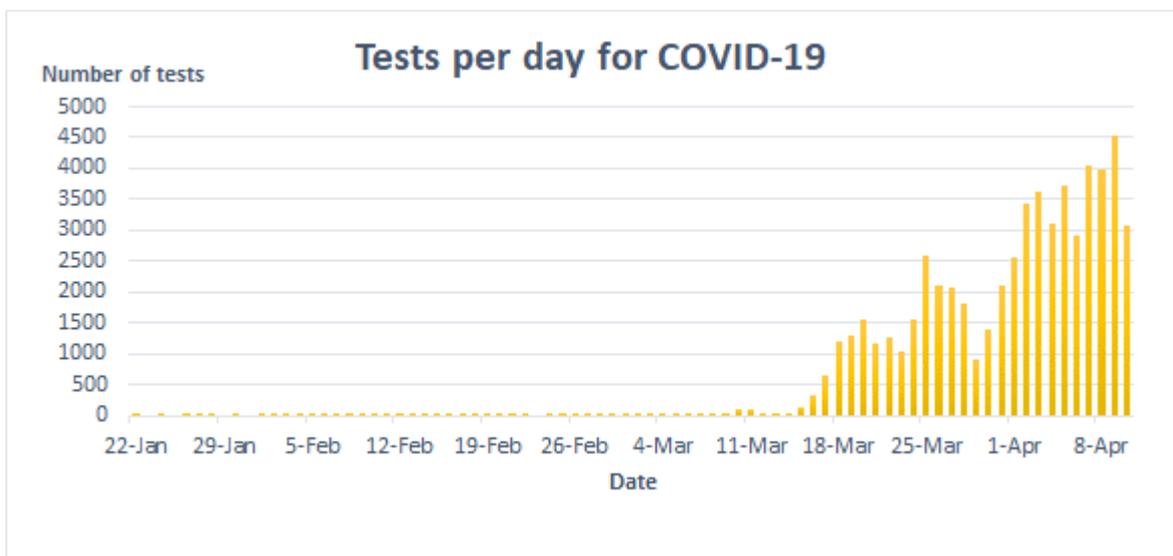
Table 3: Laboratory tests done and capacity

	Tests	Date
Total tested yesterday	3,061	10 April 2020
7-day rolling average	3,619	4 April to 10 April 2020
Total tested to date	58,746	22 January to 10 April 2020
Test capacity	5,789	11 April 2020
Supplies in stock	53,042	11 April 2020

Source: Lab update as at 09:00 11 April 2020

Note: Two sets of cumulative test data have been reconciled to give cumulative total from 22 January 2020 when testing began.

Table 4: Tests per day for COVID-19



28. As at 0900 hours on **11 April 2020** there are **77** Community Based Assessment Centres (CBACs) active and **53** designated practices/swabbing centres/mobiles.

Contact Tracing — National Close Contact Service (NCCS)

29. **114** close contacts were contacted on **10 April 2020** and **5,567** since 24 March (when the Ministry picked up contact tracing from individual public health units at DHBs).

30. The downward trend in the number of close contacts for NCCS tracing continues and workforce adjustments are being made accordingly.

	Totals to date (from 24th March)	Daily total for 10 April	Daily total for 09 April	Trend from previous day
Close contacts identified	10093	239	363	↓
Close contacts traced (i.e resolved) *	5567	114	70	↑
Attempted calls*	17953	275	307	↓
Close contacts attempted to call	7492	175	107	↑
Call outcome: for referral to police */**	4164	110	74	↑
Non-compliant close contacts	22	0	0	→
Workforce – number in Triage	n/a	15	17	↓
Workforce – number in Call Centre	n/a	14	32	↓

Notes

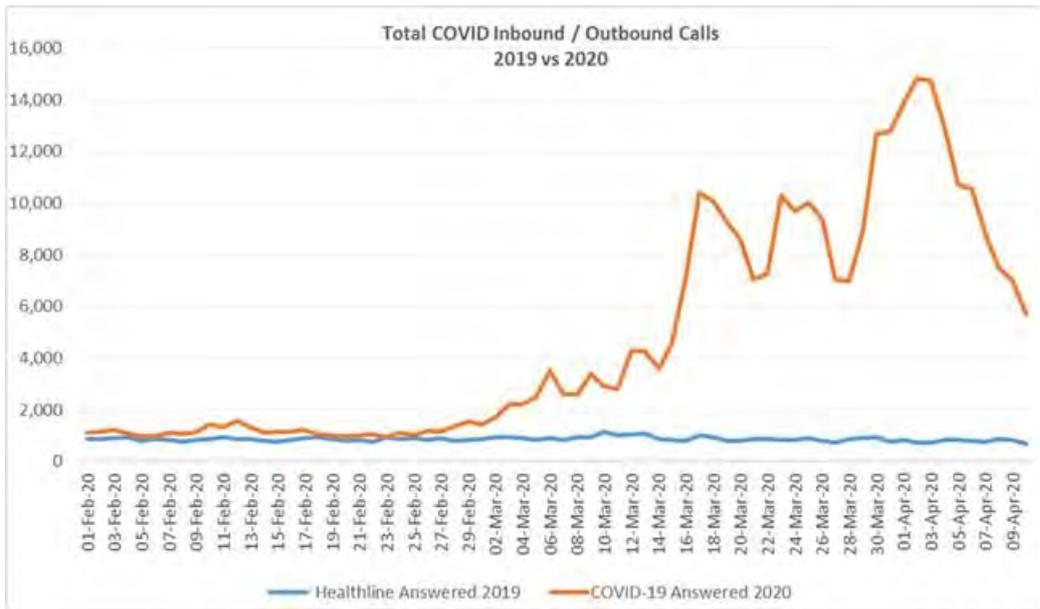
* The Totals to date for these figures have been re-baselined as at 9 April

** Includes the number of people who were uncontactable (tried 6 times with no answer, incorrect number, or phone number not working).

National Telehealth Service update

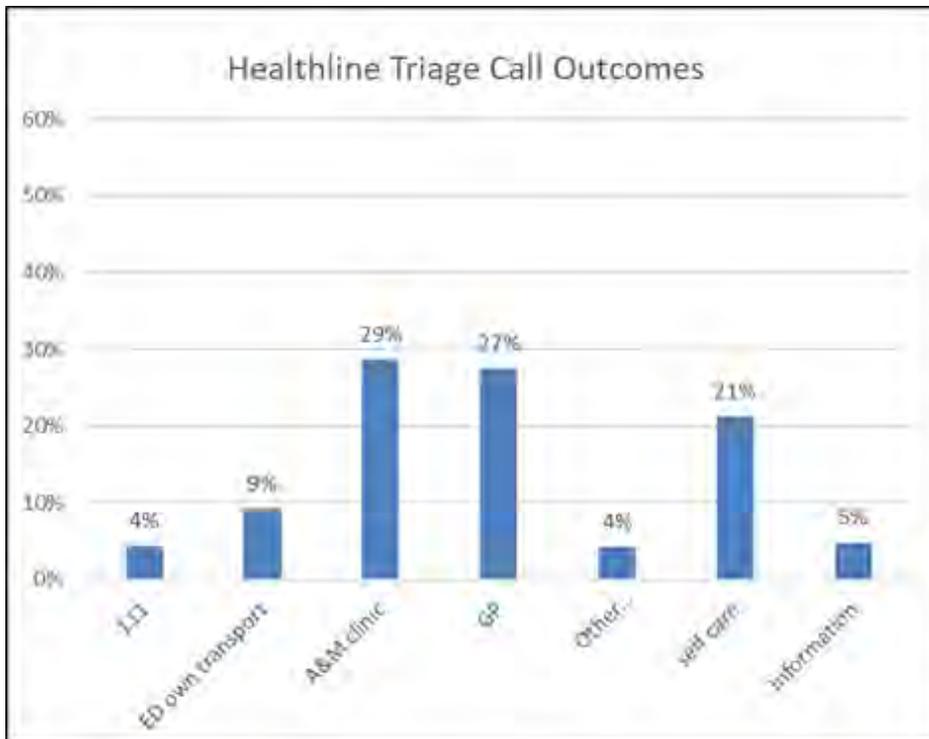
31. On 10 April 2020, 5,690 calls were answered/outbound calls made (compared to 697 on the same day last year). 1,052 of the calls were outbound calls for self-isolation checks. The downturn in calls may reflect it being Good Friday. The graph below compares call volumes today to the same day last year.

Figure 4: Calls to and from Healthline versus the same day last year



32. People are continuing to delay accessing treatment and advice for urgent non-COVID-19 health-related matters. The outcomes of Healthline calls on 10 April 2020 are shown in the graph below.

Figure 5: Outcomes of calls



33. On **10 April** 2020 there were **61** callers concerned about Coronavirus who expressed severe distress. This is **16.8%** of answered calls on Mental Health support lines.
34. Healthline has a change freeze in place for Easter (5pm, 9 April – 9am 14 April), which is a normal public holiday protocol.

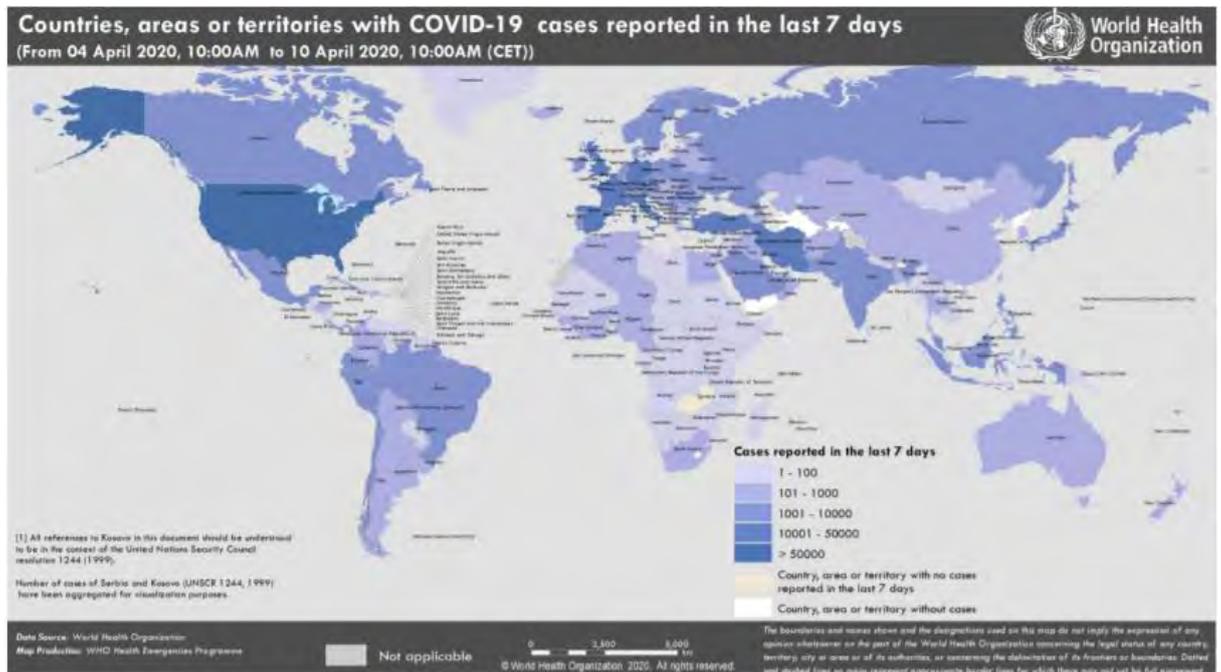
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Global situation

38. As reported by the WHO on **10 April** 2020, globally there have been **85,054** confirmed new cases (now **1,521,252** confirmed cases in total) and **7,277** new deaths reported (**92,798** confirmed deaths in total).
39. As reported by WHO on **10 April** 2020, there were no new country/territory/area reporting confirmed cases of COVID-19 in the past 24 hours. See Figure 5 below for further information from WHO. To see the numbers by international location, see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports>

Figure 6: Countries, territories or areas with COVID-19 confirmed cases in last 7 days



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hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

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The NHCC continues to operate 7 days per week.

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Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: Lisa McPhail, NHCC Response Manager



SITREP 84
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 12 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 12 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

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2. At 0900 hours on 12 April 2020 there are 1,330 combined confirmed and probable cases. There are 18 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 12 April 2020 there are 471 recovered cases (up 49 in the last 24 hours), and 4 deaths (no change in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

4. We are currently on Alert Level 4.
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7. The Ministry of Health has established contracts with two major third party logistics service providers. From 15 April 2020 we will begin switching to a system of national distribution for masks, and soon after that, for other PPE.

8. An online ordering process for health and non-health essential workers will soon be available on the Ministry of Health Website. It's important that everyone receives the necessary training and follows the guidance on the Ministry's website for using PPE correctly.
9. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
10. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization (WHO) to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
11. The hospital sector has been working hard over the past few weeks to free up capacity. Occupation rates are around 50% around the country, much lower than usual.
12. Our intensive care units have put in a huge amount of work in the past week to be prepared to look after people who might need ventilation or intensive care.
13. This level of preparedness gives confidence to New Zealanders that the health and disability sector is doing everything possible to ensure they are able to provide the necessary support as cases increase.
14. The Ministry of Health has announced the start of a range of initiatives to provide support during the COVID-19 response: Getting Through Together is the first initiative to be launched and has been developed by All Right?, a collaboration between Canterbury DHB and the Mental Health Foundation, to provide New Zealanders with a range of information and resources to help give practical advice and support during COVID-19. For further details see: <https://www.allright.org.nz/campaigns/getting-through-together>

Outbreak situation

15. The case definition was amended on 3 April 2020 to de-couple respiratory symptoms from a travel history with testing made available to people with respiratory symptoms suggestive of COVID-19 infection (including the acute onset of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
16. The revised case definition will allow for additional testing and will help to improve the understanding of the extent of community transmission in New Zealand. Our current understanding is that community transmission is at 2%.

17. As at 0900 hours on **12 April 2020** there are 13 significant clusters of 10 or more confirmed and probable cases (**no change** in the last 24 hours) under investigation by public health officials throughout the country with confirmed and probable cases.
18. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>
19. The average age of the **52** people admitted to hospital is **58** years.
20. As at midnight on **12 April 2020**, there were **14** people in hospital with COVID-19, **one less than** the day before. Of those in hospital, **5 are in intensive care (ICU) (3 stable on ventilator and 1 stable with no ventilator, and 1 critical on ventilator)**.

Health sector response

21. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

22. ESR (Wellington), Canterbury Health Laboratories (CHL), LabPLUS (Auckland), LabTests (Auckland), Middlemore hospital (Auckland), Waikato hospital, Southern Community Laboratories (SCL) in Dunedin and Wellington, Pathlab (Tauranga) and Waitematā are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
23. On **11 April 2020**, a total of **2,421** tests were done. The 7-day rolling average on tests completed is **3,523** tests. The testing capacity in labs for **12 April 2020** is **6,061**. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>
24. As at 0900 hours on **12 April 2020** there are **77** Community Based Assessment Centres (CBACs) active and **53** designated practices/swabbing centres/mobiles.

National Close Contact Service (NCCS) contact tracing

25. **253** close contacts were contacted on **11 April 2020** and there are **5,820** close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs).

National Telehealth service

26. On **11 April 2020**, **5,450** calls were answered/outbound calls made (compared to **820** on the same day last year). **1,588** of the calls were outbound calls for self-isolation checks.

27. People are continuing to delay accessing treatment and advice for urgent non-COVID-19 health-related matters. **However, delaying access to Primary Care continues to decline.**
28. On **11 April 2020** there were **46** callers concerned about Coronavirus who expressed severe distress. This is **17%** of answered calls on Mental Health support lines.
29. Healthline has a change freeze in place for Easter (1700 hours 09 April 2020 – 0900 hours 14 April 2020), which is a normal public holiday protocol.

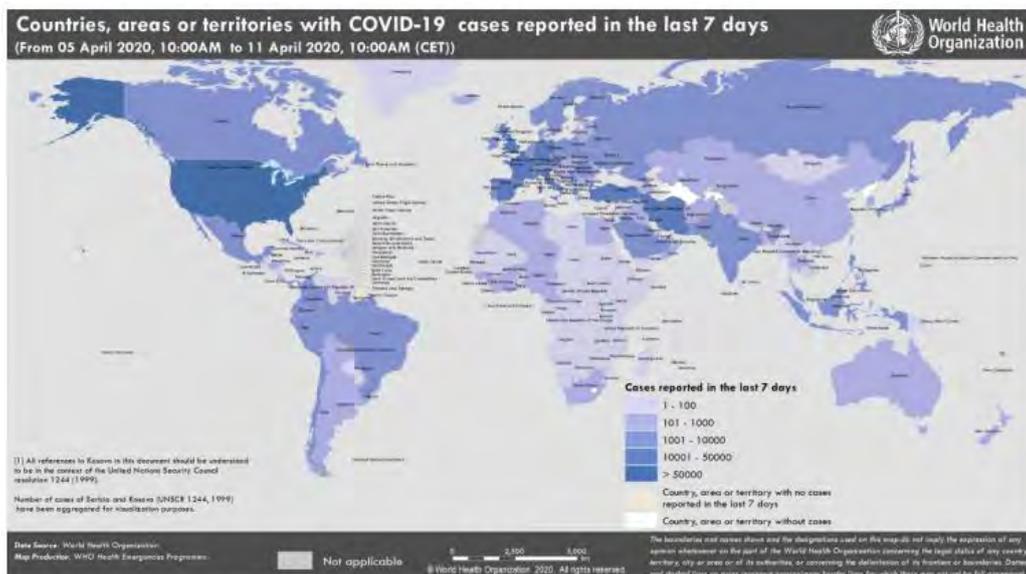
New Zealand border response

30. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
31. Additional border measures came into effect from 2359 hours 09 April 2020. All people arriving in New Zealand are screened for COVID-19 infection or contact on arrival. All passengers are disembarked in small groups from aircraft and met by Government officials at the gate. If a passenger has COVID-19 symptoms on arrival, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
32. **A number of New Zealanders are due to return from cruise vessels which experienced COVID-19 cases or outbreaks. Where significant outbreaks have occurred, the passengers will be treated as potential cases, tested and placed in isolation. Passengers from cruise vessels with only low numbers of cases will also be tested and isolated if ill. If the tests are negative, the passenger will be moved to a quarantine facility. Passengers displaying no symptoms will be quarantined but also closely monitored. They will have swabs taken if symptoms develop and will be moved to an isolation facility or separated from others in quarantine until the results available.**
33. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Work is underway to consider exit measures that may be required once international travel restrictions are relaxed.

Global situation

34. As reported by the WHO on **11 April 2020**, globally there have been **89,657** confirmed new cases (now **1,610,909** confirmed cases in total) and **6,892** new deaths reported (**99,690** confirmed deaths in total).
35. As reported by WHO on **11 April 2020**, there was **one** new country/territory/area reporting confirmed cases of COVID-19 in the past 24 hours (**Yemen**). See Figure 1 below for further information from WHO. Further details on international numbers see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19 in the last 7 days



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

36. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
37. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
38. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
39. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
40. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
41. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

42. The WHO's risk assessment of the situation is very high at the global level.
43. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including

hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

44. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
45. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
46. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

47. The psychosocial subfunction of the welfare response has now stood up a team.
48. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
49. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
PIM	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at **1400 hours on 13 April 2020.**

Prepared by: Li-Chia Yeh and Maria Turley, NHCC Intelligence

Approved by: Johnny Mulheron, NHCC Response Manager



SITREP 85
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 13 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 13 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 13 April 2020 there are 1,349 combined confirmed and probable cases. There are 19 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 13 April 2020 there are 546 recovered cases (up 75 in the last 24 hours), and 5 deaths (an increase of 1 in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

4. We are currently on Alert Level 4.
5. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
6. There is more PPE on the way to New Zealand and clinical advice is available about recommended use. Several consignments are expected to arrive over Easter, and our local manufacturer in Whanganui is also producing about 500,000 masks per week.
7. The Ministry of Health has established contracts with two major third party logistics service providers. From 15 April 2020 we will begin switching to a system of national distribution for masks, and soon after that, for other PPE.

8. An online ordering process for health and non-health essential workers will soon be available on the Ministry of Health Website. It's important that everyone receives the necessary training and follows the guidance on the Ministry's website for using PPE correctly.
9. Keeping individuals, families and our communities safe and healthy in the current global environment requires a team effort and that's what we're seeing across New Zealand.
10. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization (WHO) to limit the risk of spread in the community and ensure that they receive early support should they become unwell.
11. The hospital sector has been working hard over the past few weeks to free up capacity. Occupation rates are around 50% around the country, much lower than usual.
12. Our intensive care units have put in a huge amount of work in the past week to be prepared to look after people who might need ventilation or intensive care.
13. This level of preparedness gives confidence to New Zealanders that the health and disability sector is doing everything possible to ensure they are able to provide the necessary support as cases increase.
14. The Ministry of Health has announced the start of a range of initiatives to provide support during the COVID-19 response: Getting Through Together is the first initiative to be launched and has been developed by All Right?, a collaboration between Canterbury DHB and the Mental Health Foundation, to provide New Zealanders with a range of information and resources to help give practical advice and support during COVID-19. For further details see:
<https://www.allright.org.nz/campaigns/getting-through-together>

Outbreak situation

15. The case definition was amended on 3 April 2020 to de-couple respiratory symptoms from a travel history with testing made available to people with respiratory symptoms suggestive of COVID-19 infection (including the acute onset of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see:
<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>
16. The revised case definition will allow for additional testing and will help to improve the understanding of the extent of community transmission in New Zealand. Our current understanding is that community transmission is at 2%.

17. At 0900 hours on 13 April 2020 there are
- 1,349 combined confirmed and probable cases (up 19 in the last 24 hours)
 - 546 recovered cases (up 75 in the last 24 hours)
 - 5 deaths (up 1 in the last 24 hours).
18. At 0900 hours on 13 April 2020 there are 101 cases (7% of all confirmed and probable cases) are health care workers. Of these, 18% cases have recovered.
19. As at 0900 hours on 13 April 2020 there are 15 significant clusters of 10 or more confirmed and probable cases (up 2 in the last 24 hours) under investigation by public health officials throughout the country with confirmed and probable cases.
20. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>
21. As at midnight on 12 April 2020, there were 15 people in hospital with COVID-19, one more than the day before. Of those in hospital, 4 are in intensive care (ICU) (3 stable on ventilator and 1 critical on ventilator).

Health sector response

22. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

23. ESR (Wellington), Canterbury Health Laboratories (CHL), LabPLUS (Auckland), LabTests (Auckland), Middlemore hospital (Auckland), Waikato hospital, Southern Community Laboratories (SCL) in Dunedin and Wellington, Pathlab (Tauranga) and Waitematā are providing a novel coronavirus diagnostic test. The laboratories accept respiratory samples from suspected cases that meet the current Ministry of Health case definition.
24. As at 0900 hours on 13 April 2020 there are 77 Community Based Assessment Centres (CBACs) active and 54 designated practices/swabbing centres/mobiles.
25. On 12 April 2020, a total of 1,660 tests were done. The 7-day rolling average on tests completed is 3,230 tests. The testing capacity in labs for 13 April 2020 is 6,075. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

26. 348 close contacts were contacted on 12 April 2020 and there are 6,168 close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs).

National Telehealth service

27. On 12 April 2020, 4,679 calls were answered/outbound calls made (compared to 733 on the same day last year). 489 of the calls were outbound calls for self-isolation checks.
28. People are continuing to delay accessing treatment and advice for urgent non-COVID-19 health-related matters. However, delaying access to Primary Care continues to decline.
29. On 12 April 2020 there were 93 callers concerned about Coronavirus who expressed severe distress. This is 26% of answered calls on Mental Health support lines.
30. Healthline has a change freeze in place for Easter (1700 hours 09 April 2020 – 0900 hours 14 April 2020), which is a normal public holiday protocol.

New Zealand border response

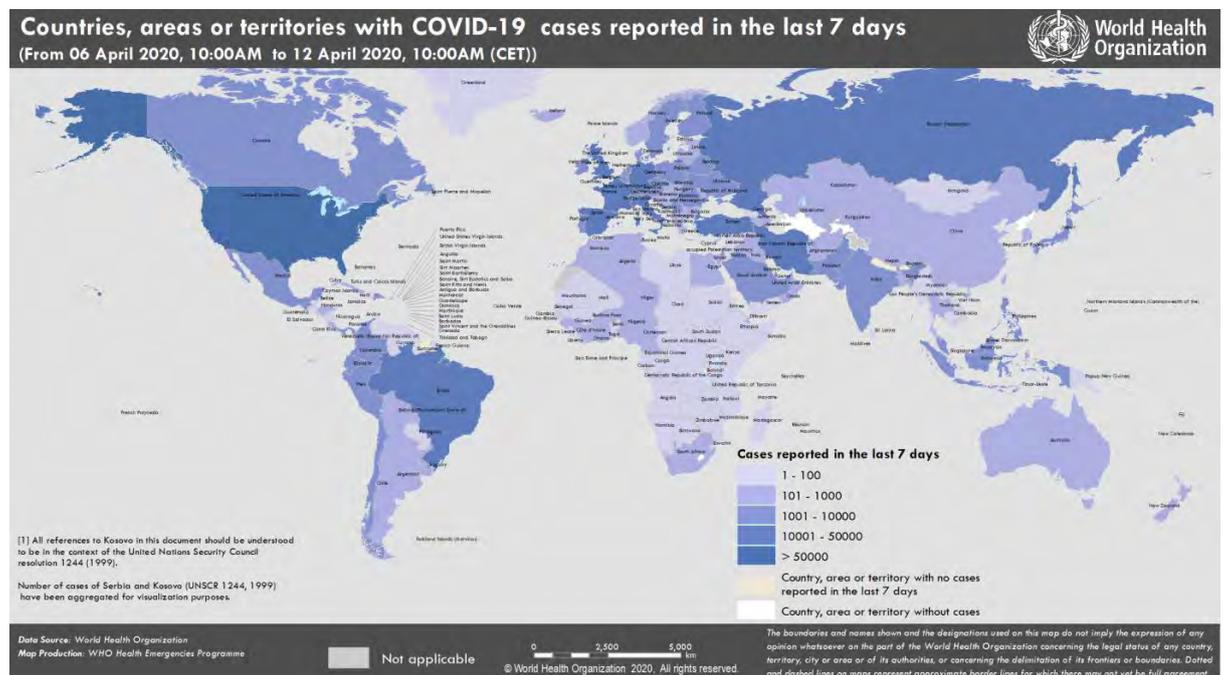
31. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
32. Additional border measures came into effect from 2359 hours 09 April 2020. All people arriving in New Zealand are screened for COVID-19 infection or contact on arrival. All passengers are disembarked in small groups from aircraft and met by Government officials at the gate. If a passenger has COVID-19 symptoms on arrival, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
33. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international

travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries. It is anticipated this will be required for the medium and longer term, including once international travel restrictions are relaxed. Former Air NZ staff are being offered contracts to deliver entry and exit measures and could be in place before the end of April 2020. Clinical oversight will be provided, but this will free health staff to return to the health sector.

Global situation

34. As reported by the WHO on 12 April 2020, globally there have been 85,679 confirmed new cases (now 1,696,588 confirmed cases in total) and 6,262 new deaths reported (105,952 deaths in total).
35. As reported by WHO on 12 April 2020, there was no new country/territory/area reporting confirmed cases of COVID-19 in the past 24 hours. See Figure 1 below for further information from WHO. Further details on international numbers see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

Figure 1: Countries, territories or areas with reported confirmed cases of COVID-19 in the last 7 days



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

36. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
37. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
38. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
39. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
40. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
41. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

42. The WHO's risk assessment of the situation is very high at the global level.
43. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including

hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

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44. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
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Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at **1400 hours on 14 April 2020.**

Prepared by: Maria Turley and Li-Chia Yeh, NHCC Intelligence

Approved by: Lisa McPhail, NHCC Response Manager



SITREP 86
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 14 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 14 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 14 April 2020 there are 1,366 combined confirmed and probable cases. There are 17 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 14 April 2020 there are 628 recovered cases (up 82 in the last 24 hours), and 9 deaths (an increase of 4 in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

4. We are currently on Alert Level 4.
5. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
6. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization (WHO) to limit the risk of spread in the community and ensure that they receive early support should they become unwell.

Outbreak situation

7. The case definition was amended on 8 April 2020 to de-couple respiratory symptoms from a travel history with testing made available to people with respiratory symptoms suggestive of COVID-19 infection (including the acute onset

of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see:

<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>

8. The revised case definition will allow for additional testing and will help to improve the understanding of the extent of community transmission in New Zealand. Our current understanding is that community transmission is at 2%.
9. At 0900 hours on **14 April 2020** there are
 - **1,366** combined confirmed and probable cases (up **17** in the last 24 hours)
 - **628** recovered cases (up **82** in the last 24 hours)
 - **9** deaths (up **4** in the last 24 hours).
10. At 0900 hours on **14 April 2020** there are **107** cases (**8%** of all confirmed and probable cases) who are health care workers. Of these, **23%** of cases have recovered.
11. As at 0900 hours on **14 April 2020** there are 15 significant clusters of 10 or more confirmed and probable cases (**no change in the last 24 hours**) under investigation by public health officials throughout the country.
12. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>
13. As at midnight on **13 April 2020**, there were **15** people in hospital with COVID-19, **the same number as** the day before. Of those in hospital, **3 are in intensive care (ICU) (2 stable on ventilator and 1 critical on ventilator)**.

Health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

15. As at 0900 hours on **14 April 2020** there are **78** Community Based Assessment Centres (CBACs) active and **55** designated practices/swabbing centres/mobiles.
16. On **13 April 2020**, a total of **1,572** tests were done. The 7-day rolling average on tests completed is **3,039** tests. The testing capacity in labs for **14 April 2020** is **6,275**. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

17. 379 close contacts were contacted on 13 April 2020 and there are 6,547 close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs).

National Telehealth service

18. On 13 April 2020, 6,185 calls were answered/outbound calls made (compared to 777 on the same day last year). 436 of the calls were outbound calls for self-isolation checks.
19. People are continuing to delay accessing treatment and advice for urgent non-COVID-19 health-related matters. However, delaying access to Primary Care continues to decline.
20. On 13 April 2020 there were 100 callers concerned about Coronavirus who expressed severe distress. This is 26.6% of answered calls on Mental Health support lines. The level of complex mental health needs presenting in first time users of mental health services continues. More resource was deployed yesterday on 13 April 2020 and this will continue today.

New Zealand border response

21. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
22. New Zealand Customs data showed that 292 passengers arrived in New Zealand on 13 April 2020, 60 percent from Australia. All people arriving in New Zealand are screened for COVID-19 infection or contact on arrival. All passengers are disembarked in small groups from aircraft and met by Government officials at the gate. If a passenger has COVID-19 symptoms on arrival, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
23. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international

travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

24. As reported by the WHO on **13 April 2020**, globally there have been **76,498** confirmed new cases (now **1,773,084** confirmed cases in total) and **5,702** new deaths reported (**111,652** deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

25. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
26. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
27. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
28. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
29. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
30. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

31. The WHO's risk assessment of the situation is very high at the global level.
32. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including

hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

33. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
34. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
35. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

36. The psychosocial subfunction of the welfare response has now stood up a team.
37. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
38. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at **1400 hours on 15 April 2020.**

Prepared by: Kirsten Forrest and Bridget Murphy, NHCC Intelligence

Approved by: Johnny Mulheron, NHCC Response Manager



SITREP 87
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 15 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 15 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 15 April 2020 there are 1,386 combined confirmed and probable cases. There are 20 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 15 April 2020 there are 728 recovered cases (up 100 in the last 24 hours), and 9 deaths (no increase in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

4. We are currently on Alert Level 4.
5. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
6. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization (WHO) to limit the risk of spread in the community and ensure that they receive early support should they become unwell.

Outbreak situation

7. The case definition was amended on 8 April 2020 to de-couple respiratory symptoms from a travel history with testing made available to people with respiratory symptoms suggestive of COVID-19 infection (including the acute onset

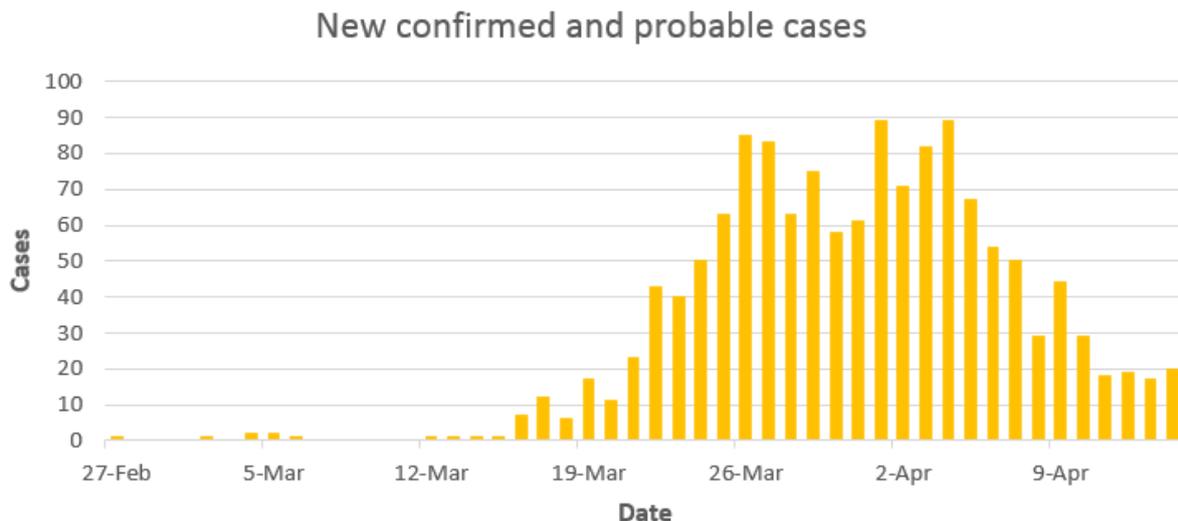
of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see:

<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>

8. The revised case definition will allow for additional testing and will help to improve the understanding of the extent of community transmission in New Zealand. Our current understanding is that community transmission is at 2%.

9. At 0900 hours on 15 April 2020 there are

- 1,386 combined confirmed and probable cases (up 20 in the last 24 hours)
- 728 recovered cases (up 100 in the last 24 hours)
- 9 deaths (no change in the last 24 hours).
- See the figure below for more detail.



10. At 0900 hours on 15 April 2020 there are 115 cases (8% of all confirmed and probable cases) who are health care workers. Of these, 29% of cases have recovered.

11. As at 0900 hours on 15 April 2020 there are 16 significant clusters of 10 or more confirmed and probable cases (1 new in the last 24 hours) under investigation by public health officials throughout the country.

12. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>

13. As at midnight on 14 April 2020, there were 13 people in hospital with COVID-19, 2 fewer than the day before. Of those in hospital, 3 are in intensive care (ICU) (1 stable on ventilator and 2 critical on ventilator).

Health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

15. As at 0900 hours on 15 April 2020 there are 78 Community Based Assessment Centres (CBACs) active and 54 designated practices/swabbing centres/mobiles.
16. On 14 April 2020, a total of 2,100 tests were done. The 7-day rolling average on tests completed is 2,761 tests. The testing capacity in labs for 15 April 2020 is 6,380. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

17. 225 close contacts were contacted on 14 April 2020 and there are 6,772 close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs). This number is relatively high given the low number of confirmed and probable cases recently. This is partly because the NCCS is currently working through a backlog of close contacts for whom contact details were not previously available. Recent integration of NHI data into the NCTS has successfully yielded contact details for some of these people.

National Telehealth service

18. On 14 April 2020, 6,019 calls were answered/outbound calls made (compared to 821 on the same day last year). 247 of the calls were outbound calls for self-isolation checks.
19. The overall acuity of the case mix dropped yesterday, indicating people are less likely to delay accessing treatment and advice for urgent non-COVID-19 health-related matters than last week.
20. On 14 April 2020 there were 101 callers concerned about Coronavirus who expressed severe distress. This is 26.6% of answered calls on Mental Health support lines. Relationship troubles in bubbles is a strong emerging theme. More resource was deployed yesterday for mental health calls.

Health and Wellbeing Survey results

21. Between 30 March and 12 April, 3,534 people who had previously been interviewed as part of the New Zealand Health Survey were interviewed in the new Health and Wellbeing Survey. The survey found no evidence of an increase in anxiety or depression symptoms or decrease in self-reported overall health for the population over the first two weeks of the survey. In week one, 97% of respondents said that the rules for the current Alert Level were clear, and 98%

said following the rules was easy. The entire country has been on Level 4 for the entire duration of the survey. Note, that these survey results have not been weighted to represent the whole New Zealand population.

New Zealand border response

22. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
23. New Zealand Customs data showed that 74 passengers arrived in New Zealand on 14 April 2020. All people arriving in New Zealand are screened for COVID-19 infection or contact on arrival. All passengers are disembarked in small groups from aircraft and met by Government officials at the gate. If a passenger has COVID-19 symptoms on arrival, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
24. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

25. As reported by the WHO on 14 April 2020, globally there have been 71,779 new confirmed cases (now 1,844,863 confirmed cases in total) and 5,369 new deaths reported (117,021 deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

Countries, areas or territories with COVID-19 cases reported in the last 7 days
 (From 08 April 2020, 10:00AM to 14 April 2020, 10:00AM (CET))



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

26. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
27. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
28. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
29. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
30. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
31. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

32. The WHO's risk assessment of the situation is very high at the global level.
33. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including

hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

34. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
35. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
36. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

37. The psychosocial subfunction of the welfare response has now stood up a team.
38. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
39. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at **1400 hours on 16 April 2020.**

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: Johnny Mulheron, NHCC Response Manager



SITREP 88
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 16 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 16 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 16 April 2020 there are 1,401 combined confirmed and probable cases. There are 15 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 16 April 2020 there are 770 recovered cases (up 42 in the last 24 hours), and 9 deaths (no increase in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

4. We are currently on Alert Level 4.
5. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
6. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization (WHO) to limit the risk of spread in the community and ensure that they receive early support should they become unwell.

Outbreak situation

7. The case definition was amended on 8 April 2020 to de-couple respiratory symptoms from a travel history with testing made available to people with respiratory symptoms suggestive of COVID-19 infection (including the acute onset

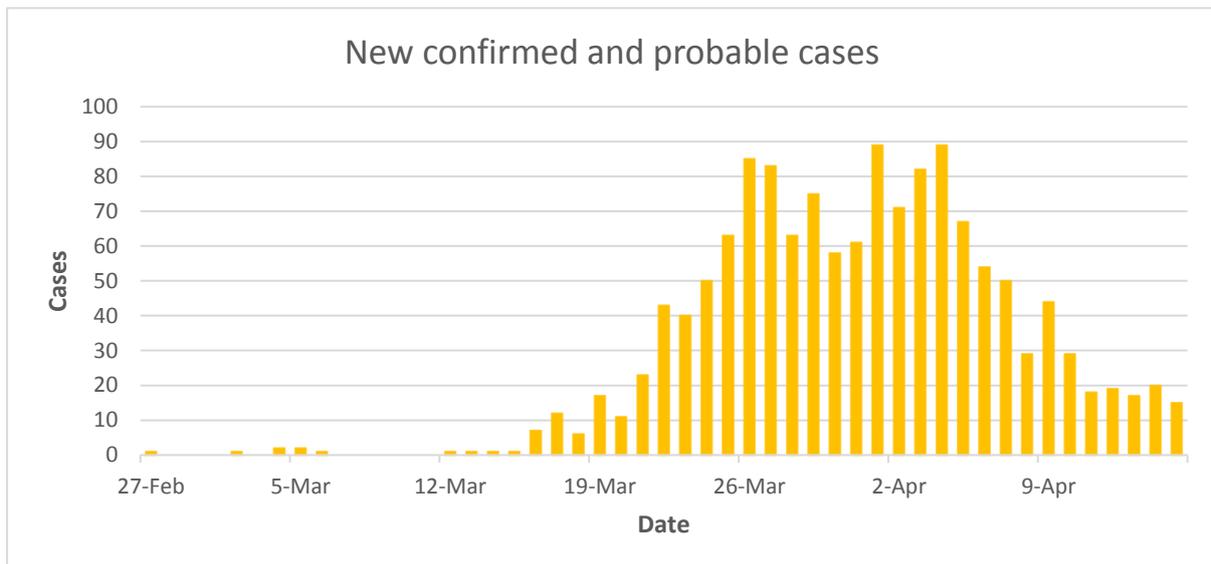
of cough with or without fever) regardless of travel history or known contact with a confirmed or probable case of COVID-19. For the definitions see:

<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19-novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection>

8. The revised case definition will allow for additional testing and will help to improve the understanding of the extent of community transmission in New Zealand. Our current understanding is that community transmission is at 2%.

9. At 0900 hours on 16 April 2020 there are

- 1,401 combined confirmed and probable cases (up 15 in the last 24 hours)
- 770 recovered cases (up 42 in the last 24 hours)
- 9 deaths (no change in the last 24 hours).
- See the figure below for more detail.



10. At 0900 hours on 16 April 2020 there are 118 cases (8% of all confirmed and probable cases) who are health care workers. Of these, 34% of cases have recovered.

11. As at 0900 hours on 16 April 2020 there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country.

12. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>

13. As at midnight on 15 April 2020, there were 12 people in hospital with COVID-19, 1 fewer than the day before. Of those in hospital, 3 are in intensive care (ICU) (1 stable on ventilator and 2 critical on ventilator).

Health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

15. As at 0900 hours on 16 April 2020 there are 79 Community Based Assessment Centres (CBACs) active and 54 designated practices/swabbing centres/mobiles.
16. On 15 April 2020, a total of 3,661 tests were done which is back up to pre-Easter levels. The 7-day rolling average on tests completed is 2,714 tests. The testing capacity in labs for 16 April 2020 is 6,775. Two new labs started testing on 15 April 2020: Medlab Central (Palmerston North) and Nelson Marlborough. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

17. 230 close contacts were contacted on 15 April 2020 and there are 7,002 close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs). This number is relatively high given the low number of confirmed and probable cases recently. This is partly because the NCCS is currently working through a backlog of close contacts for whom contact details were not previously available. Recent integration of NHI data into the NCTS has successfully yielded contact details for some of these people.

National Telehealth service

18. On 15 April 2020, 5,743 calls were answered/outbound calls made (compared to 750 on the same day last year).
19. The overall acuity of the case mix has dropped, indicating people are less likely to delay accessing treatment and advice for urgent non-COVID-19 health-related matters than last week.
20. Volume trends match mid-March levels for COVID-19 Healthline calls and it may be that volumes rise again when levels change.
21. On 15 April 2020 there were 54 callers concerned about Coronavirus who expressed severe distress. This is 16.1% of answered calls on Mental Health support lines.
22. Relationship troubles in bubbles continues to be a strong emerging theme. More resource was deployed on 14 April 2020 for mental health calls.
23. People continue to express calm and understanding about the current lockdown but at the same time are anxious to get back to "normal" and are worried about employment.

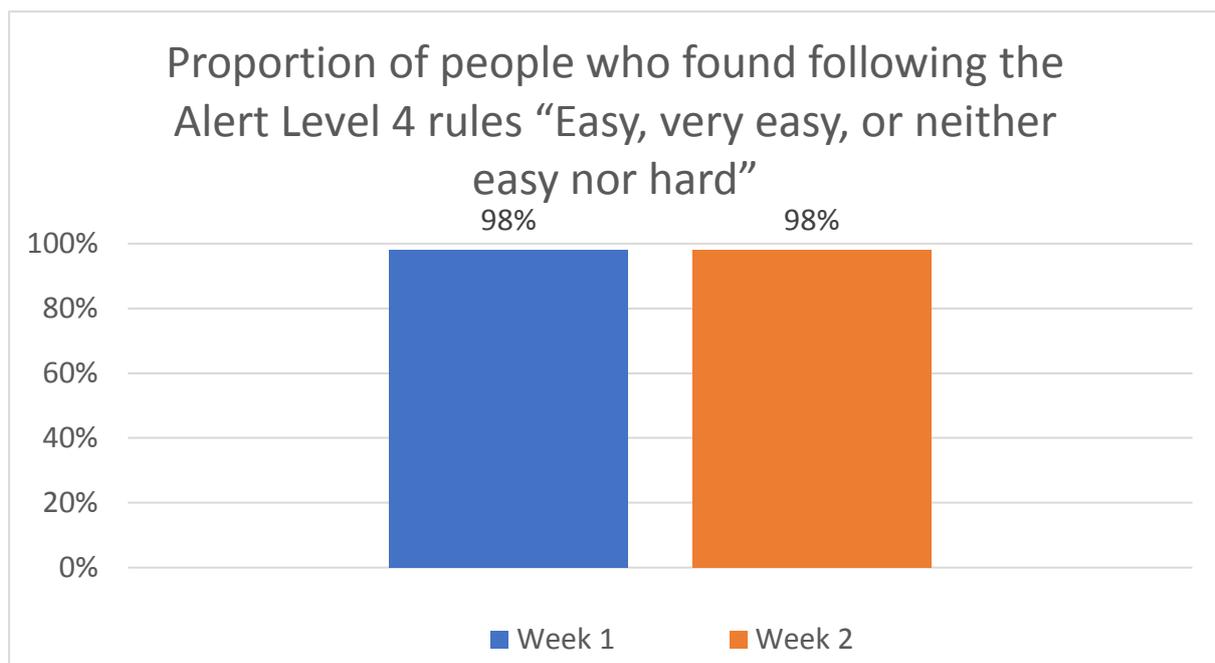
24. There is a general sense that the health system could do more (for example, vaccines, contact tracing, border restrictions) and, there is some confusion amongst the broader public about what happens at the border when people arrive. It could be useful to clarify with the public that people cannot go straight home to self-isolate.

Health and Wellbeing Survey results

25. Between 30 March and 12 April, 3,534 people who had previously been interviewed as part of the New Zealand Health Survey were interviewed in a new COVID-19 Health and Wellbeing Survey. This new survey collects information about how New Zealanders are being impacted by COVID-19. New Zealand has been on Level 4 for the duration of this survey.

26. Survey responders have a 10-minute phone interview with a trained interviewer. About 300 people aged 15 years+ have been interviewed each day since 30 March.

27. Results will be used to understand what support and information New Zealanders need in relation to COVID-19. The **survey results in the figure below** have not yet been weighted to represent all the New Zealand population.



New Zealand border response

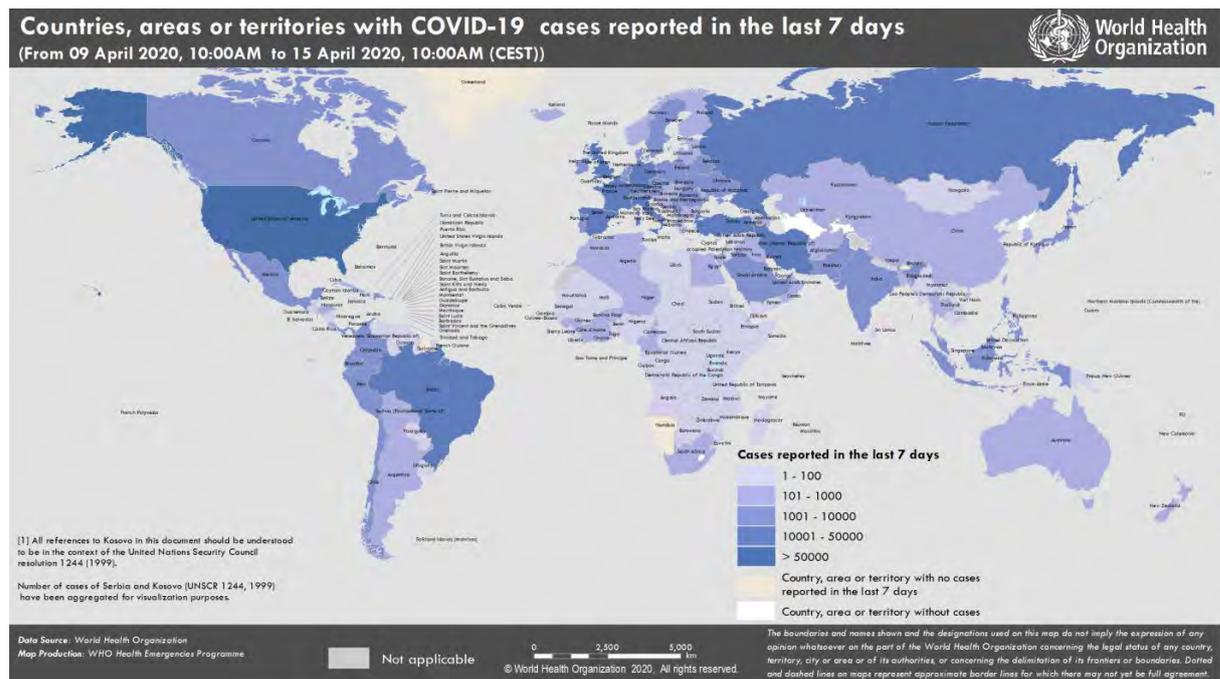
28. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand’s territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures

are exempt to keep air and sea routes open for imports and exports, including essential supplies.

29. New Zealand Customs data showed that 291 passengers arrived in New Zealand on 15 April 2020. All people arriving in New Zealand are screened for COVID-19 infection or contact on arrival. All passengers are disembarked in small groups from aircraft and met by Government officials at the gate. If a passenger has COVID-19 symptoms on arrival, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
30. Ministry of Health is working closely with Ministry of Foreign Affairs and Trade on planning and support for repatriation flights for New Zealand nationals.
31. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

32. As reported by the WHO on 15 April 2020, globally there have been 70,082 new confirmed cases (now 1,914,916 confirmed cases in total) and 5,989 new deaths reported (123,010 deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

33. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
34. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
35. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
36. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.

37. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
38. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

39. The WHO's risk assessment of the situation is very high at the global level.
40. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
- The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).
 - The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
 - The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
 - For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

41. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
42. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
43. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

44. The psychosocial subfunction of the welfare response has now stood up a team.
45. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
46. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at **1400 hours on 17 April 2020.**

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: **Johnny Mulheron**, NHCC Response Manager



SITREP 89
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 17 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 17 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 17 April 2020 there are 1,409 combined confirmed and probable cases. There are 8 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 17 April 2020 there are 816 recovered cases (up 46 in the last 24 hours), and 11 deaths (an increase of 2 deaths in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

4. We are currently on Alert Level 4.
5. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
6. Close contacts of cases are continuing to be contacted, provided with advice and monitored in self-isolation as recommended by the World Health Organization (WHO) to limit the risk of spread in the community and ensure that they receive early support should they become unwell.

Outbreak situation

7. The case definition was amended on 8 April 2020. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-novel-coronavirus-information-specific-audiences/covid-19->

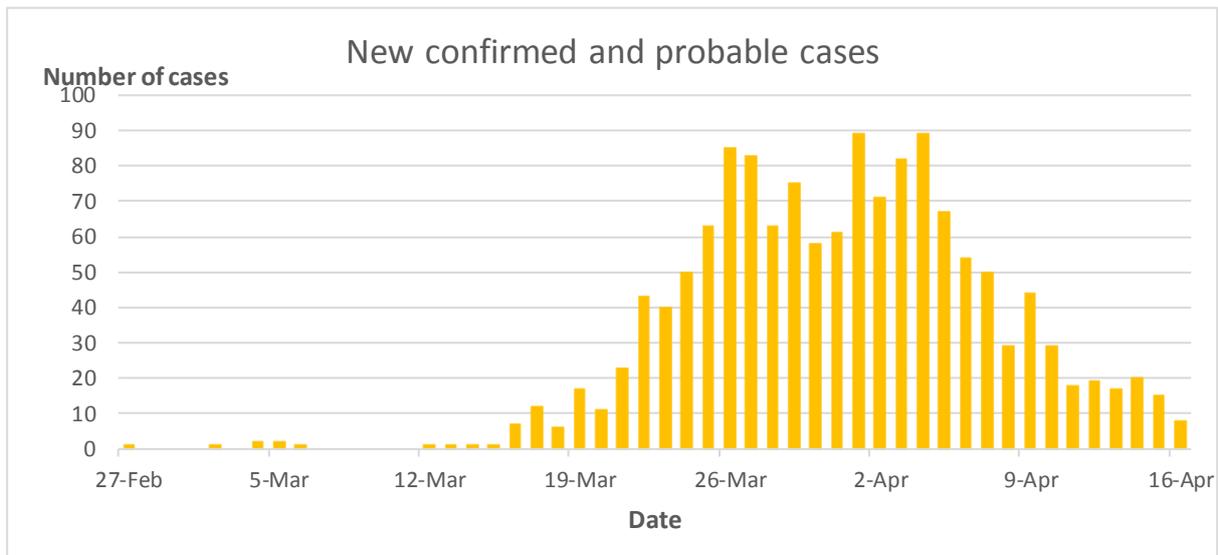
[novel-coronavirus-resources-health-professionals/case-definition-covid-19-infection](#)

8. The sources of transmission for all confirmed and probable cases are:

- Local acquired - contact with known case: 49%
- Overseas acquired: 39%
- Community transmission (i.e. local contact with unknown case): 3%
- Source under investigation: 8%

9. At 0900 hours on 17 April 2020 there are

- 1,409 combined confirmed and probable cases (up 8 in the last 24 hours)
- 816 recovered cases (up 46 in the last 24 hours)
- 11 deaths (up 2 in the last 24 hours).
- See the figure below for more detail on new confirmed and probable cases.



10. At 0900 hours on 17 April 2020 there are 128 cases (9% of all confirmed and probable cases) who are health care workers. Of these, 37% of cases have recovered.

11. As at 0900 hours on 17 April 2020 there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country.

12. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>

13. As at midnight on 16 April 2020, there were 14 people in hospital with COVID-19, 2 more than the day before. Of those in hospital, 3 are in intensive care (ICU) (1 stable on ventilator and 2 critical on ventilator).

Health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

15. As at 0900 hours on 17 April 2020 there are 80 Community Based Assessment Centres (CBACs) active and 55 designated practices/swabbing centres/mobiles.
16. On 16 April 2020, a total of 4,421 tests were done. This is the second highest daily volume so far. This volume included some of the sentinel testing undertaken and the remainder will appear in tomorrow's numbers. The 7-day rolling average on tests completed is 2,674 tests. The testing capacity in labs for 17 April 2020 is 6,593. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>
17. Of the tests conducted on 16 April, 0.19% were positive.

National Close Contact Service (NCCS) contact tracing

18. 144 close contacts were contacted on 16 April 2020 and 7,146 close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs). This number is relatively high given the low number of confirmed and probable cases recently. This is partly because the NCCS is currently working through a backlog of close contacts for whom contact details were not previously available. Recent integration of NHI data into the NCTS has successfully yielded contact details for some of these people.

National Telehealth service

19. On 16 April 2020, 5,354 calls were answered/outbound calls made (compared to 716 on the same day last year).
20. The National Telehealth Service reported that the public are confused and anxious that the process for new arrivals at the border is not secure enough.
21. Load on 1737 and other mental health services was 36% higher than normal. Mental Health call lengths remain high and additional resource has been deployed.
22. On 16 April 2020 there were 60 callers concerned about COVID-19 who expressed severe distress. This is 20.2% of answered calls on Mental Health support lines.
23. Key themes from 16 April 2020:
 - Relationship troubles in bubbles and anxiety.

- There was good progress on people reaching out for urgent care earlier in the week, but this has slipped again in the last 24 hours.
- People continue to express calm and understanding of the current lock down however are anxious to get back to 'normal' and are worried about employment.

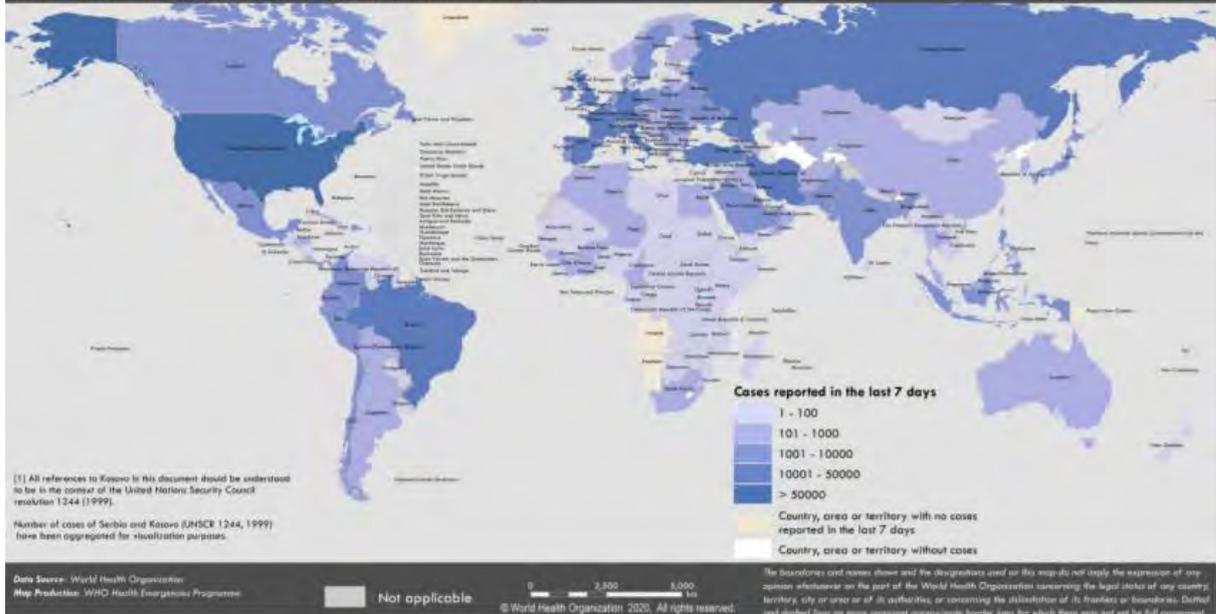
New Zealand border response

24. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
25. New Zealand Customs data showed that **179** passengers arrived in New Zealand on **16 April** 2020. All people arriving in New Zealand are screened for COVID-19 infection or contact on arrival. All passengers are disembarked in small groups from aircraft and met by Government officials at the gate. If a passenger has COVID-19 symptoms on arrival, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
26. Ministry of Health is working closely with Ministry of Foreign Affairs and Trade on planning and support for repatriation flights for New Zealand nationals.
27. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

28. As reported by the WHO on **16 April 2020**, globally there have been **76,647** new confirmed cases (now **1,991,562** confirmed cases in total) and **7,875** new deaths reported (**130,885** deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

Countries, areas or territories with COVID-19 cases reported in the last 7 days
 (From 10 April 2020, 10:00AM to 16 April 2020, 10:00AM (CEST))



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

29. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
30. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
31. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
32. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
33. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
34. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

35. The WHO's risk assessment of the situation is very high at the global level.
36. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including

hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

37. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
38. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
39. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

40. The psychosocial subfunction of the welfare response has now stood up a team.
41. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
42. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
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Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at **1400 hours on 18 April 2020.**

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: Bruce Mackay, NHCC Response Manager



SITREP 90
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 18 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 18 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 18 April 2020 there are 1,422 combined confirmed and probable cases. There are 13 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 18 April 2020 there are 867 recovered cases (up 51 in the last 24 hours), and 11 deaths (no change in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

4. We are currently on Alert Level 4.
5. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.
6. Close contacts of cases are continuing to be contacted, provided with advice and monitored in quarantine and self-isolation as recommended by the World Health Organization (WHO) to limit the risk of spread in the community and ensure that they receive early support should they become unwell. Widespread testing continues to be done.

Outbreak situation

7. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the definitions see:

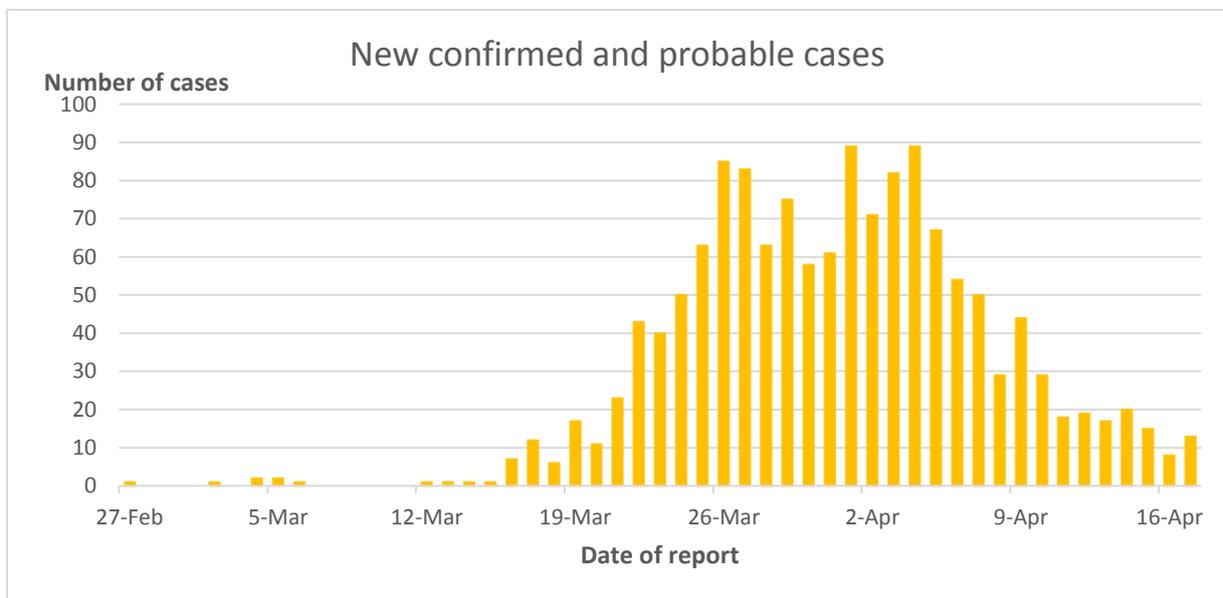
<https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection>

8. The sources of transmission for all confirmed and probable cases are:

- Local acquired - contact with known case: **54%**
- Overseas acquired: **38%**
- Community transmission (i.e. local contact with unknown case): **4%**
- Source under investigation: **3%**

9. At 0900 hours on **18 April 2020** there are

- **1,422** combined confirmed and probable cases (up **13** in the last 24 hours)
- **867** recovered cases (up **51** in the last 24 hours)
- 11 deaths (**no change** in the last 24 hours).
- See the figure below for more detail on new confirmed and probable cases.



10. At 0900 hours on **18 April 2020** there are **129** cases (**9%** of all confirmed and probable cases) who are health care workers. Of these, **40%** of cases have recovered.

11. As at 0900 hours on **18 April 2020** there are 16 significant clusters of 10 or more confirmed and probable cases (**no change** in the last 24 hours) under investigation by public health officials throughout the country.

12. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>

13. As at midnight on **17 April 2020**, there were **20** people in hospital with COVID-19, **6 more than** the day before. Of those in hospital, 3 are in intensive care (ICU) (1 stable on ventilator and 2 critical on ventilator).

Health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

15. As at 0900 hours on 18 April 2020 there are 79 Community Based Assessment Centres (CBACs) active and 56 designated practices/swabbing centres/mobiles.
16. On 17 April 2020, a total of 4,677 tests were done. This is the highest daily volume so far. This volume included the numbers of sentinel testing done across Queenstown, Canterbury and Waikato. The 7-day rolling average on tests completed is 2,905 tests. The testing capacity in labs for 18 April 2020 is 6,405. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

17. 175 close contacts were contacted on 17 April 2020 and 7,321 close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs). This number is relatively high given the low number of confirmed and probable cases recently. This is partly because the NCCS is currently working through a backlog of close contacts for whom contact details were not previously available. Recent integration of NHI data into the NCTS has successfully yielded contact details for some of these people.

National Telehealth service

18. On 17 April 2020, 4,962 calls were answered/outbound calls made (compared to 793 on the same day last year).
19. Load on 1737 and other mental health services was 37% higher than normal on 17 April 2020. Mental Health call lengths remain high and an additional 334 hours of additional resource has been deployed for the week ahead.
20. On 17 April 2020 there were 57 callers concerned about COVID-19 who expressed severe distress. This is 21.2% of answered calls on Mental Health support lines.
21. Key themes from 17 April 2020:
 - The volume of 1737 calls over the past three weeks is greater than after the Canterbury Terror Attacks.
 - Relationship troubles in bubbles and anxiety.
 - There was good progress on people reaching out for urgent care earlier in the week, but this has slipped again in the last 48 hours.

- Many people are concerned about moving out of Level 4 and that people arriving into the country may still be a source of infection in the community.

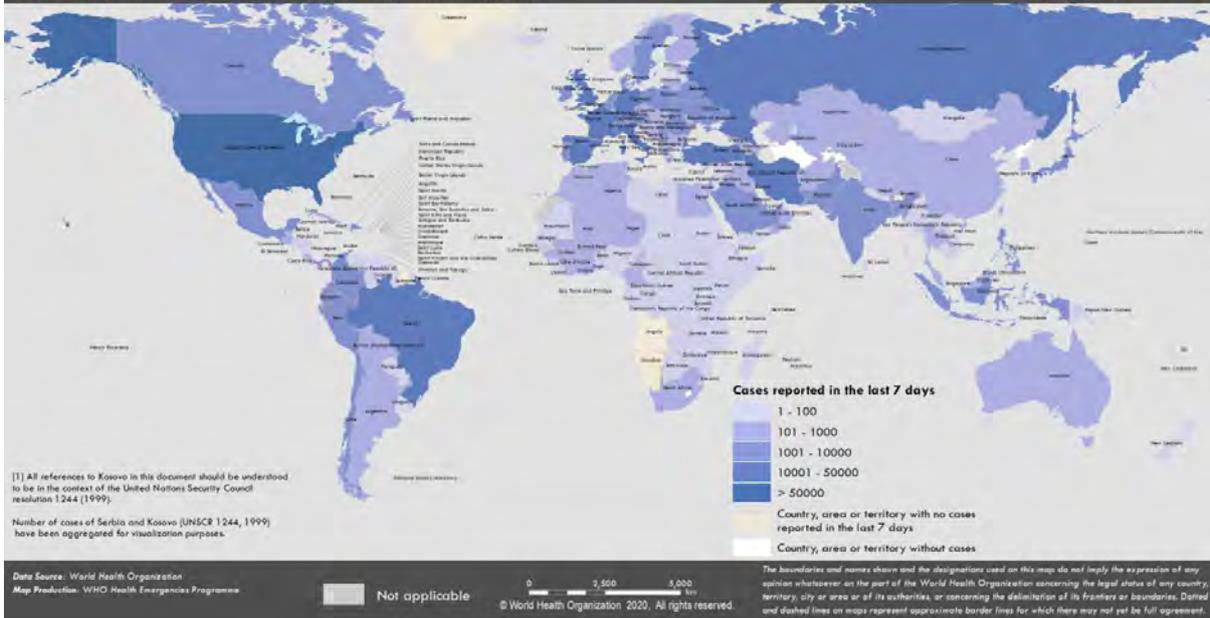
New Zealand border response

22. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
23. All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
24. The Ministry of Health is working closely with the Ministry of Foreign Affairs and Trade on planning and support for repatriation flights for New Zealand nationals.
25. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

26. As reported by the WHO on 17 April 2020, globally there have been 82,967 new confirmed cases (now 2,074,529 confirmed cases in total) and 8,493 new deaths reported (139,378 deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

Countries, areas or territories with COVID-19 cases reported in the last 7 days
 (From 11 April 2020, 10:00AM to 17 April 2020, 10:00AM (CEST))



APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

27. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
28. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
29. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
30. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
31. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
32. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

33. The WHO's risk assessment of the situation is very high at the global level.
34. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

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37. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

38. The psychosocial subfunction of the welfare response has now stood up a team.
39. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
40. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

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Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at **1400 hours on 19 April 2020.**

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: James Poskitt, NHCC Response Manager



SITREP 91
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 19 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 19 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 19 April 2020 there are 1,431 combined confirmed and probable cases. There are 9 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 19 April 2020 there are 912 recovered cases (up 45 in the last 24 hours), and 12 deaths (up 1 in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

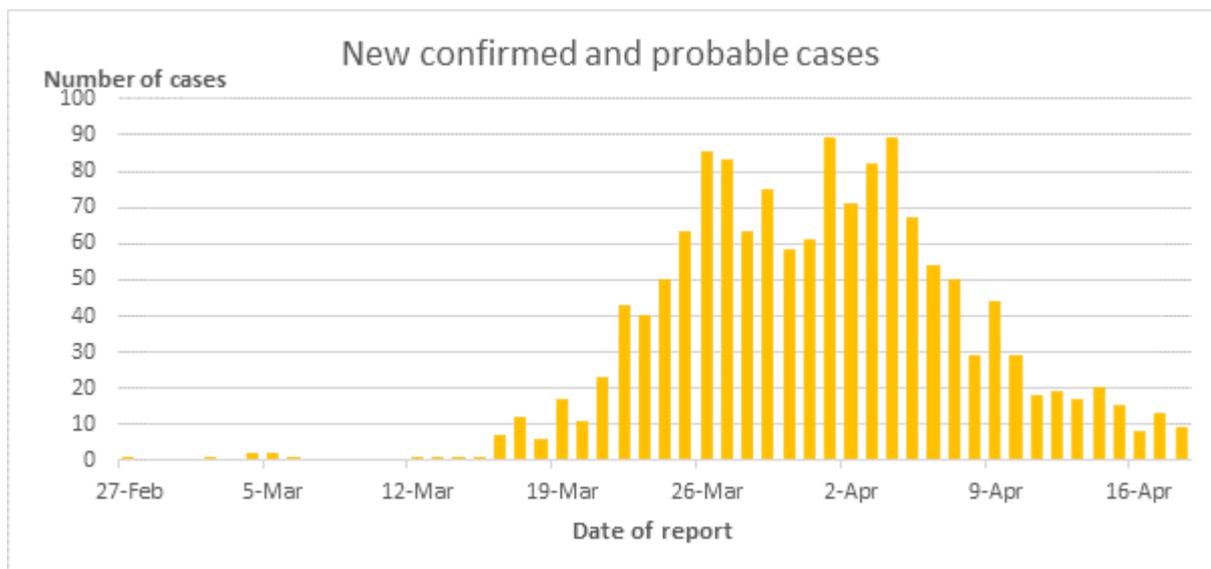
Key messages

4. We are currently on Alert Level 4.
5. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

Outbreak situation

6. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection>

7. The sources of transmission for all confirmed and probable cases are mainly due to contact with known case (54%) or recent overseas travel (39%). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#transmission>
8. At 0900 hours on 19 April 2020 there are
- 1,431 combined confirmed and probable cases (up 9 in the last 24 hours)
 - 912 recovered cases (up 45 in the last 24 hours)
 - 12 deaths (up 1 in the last 24 hours).
 - See the figure below for more detail on new confirmed and probable cases.



9. At 0900 hours on 19 April 2020 there are 131 cases (9% of all confirmed and probable cases) who are health care workers. Of these, 43% of cases have recovered.
10. As at 0900 hours on 19 April 2020 there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country.
11. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>
12. As at midnight on 18 April 2020, there were 18 people in hospital with COVID-19, 2 fewer than the day before. Of those in hospital, 3 are in intensive care unit (ICU) (1 stable on ventilator and 2 critical on ventilator).

Health sector response

13. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

14. As at 0900 hours on **19 April 2020** there are 79 Community Based Assessment Centres (CBACs) active and 56 designated practices/swabbing centres/mobiles.
15. A total of **4,146** tests were done on **18 April 2020**. **This is the first time weekend daily testing has been over 4,000**. This volume included the numbers of sentinel testing done across Queenstown, Canterbury and Waikato. The 7-day rolling average on tests completed is **3,151** tests. The testing capacity in labs for **19 April 2020** is **6,349**. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

16. **116** close contacts were contacted on **18 April 2020** and **7,437** close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs). This number is relatively high given the low number of confirmed and probable cases recently. This is partly because the NCCS is currently working through a backlog of close contacts for whom contact details were not previously available. Recent integration of NHI data into the NCTS has successfully yielded contact details for some of these people.

National Telehealth service

17. On **18 April 2020**, **5,284** calls were answered/outbound calls made (compared to **798** on the same day last year).
18. The levels of volume to 1737 over the last three weeks is greater than seen after the Canterbury Terror Attacks. The load on 1737 and other mental health services was **50%** higher than normal on **18 April 2020**.
19. Mental Health call lengths remain high and an additional resource has been deployed. **Mental health needs presenting in first time users of mental health services is continuing – relationship troubles in bubbles and anxiety is a strong emerging theme. Financial distress is increasing.**
20. On **18 April 2020** there were **39** callers concerned about COVID-19 who expressed severe distress. This is **17%** of answered calls on Mental Health support lines.

New Zealand border response

21. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies.
22. **New Zealand Customs data recorded 205 people arriving in New Zealand on 17 April 2020 and 442 passengers on 18 April 2020.** All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
23. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

24. As reported by the WHO on **18 April 2020**, globally there have been **85,678** new confirmed cases (**2,160,207** confirmed cases in total) and **6,710** new deaths reported (**146,088** deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

25. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
26. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
27. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
28. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
29. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
30. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

31. The WHO's risk assessment of the situation is very high at the global level.
32. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including

hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

33. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
34. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
35. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

36. The psychosocial subfunction of the welfare response has now stood up a team.
37. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
38. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at **1400 hours on 20 April 2020.**

Prepared by: Li-Chia Yeh and Maria Turley, NHCC Intelligence

Approved by: James Poskitt, NHCC Response Manager



SITREP 92
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 20 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 20 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 20 April 2020 there are 1,440 combined confirmed and probable cases. There are 9 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 20 April 2020 there are 974 recovered cases (up 62 in the last 24 hours), and 12 deaths (no change in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

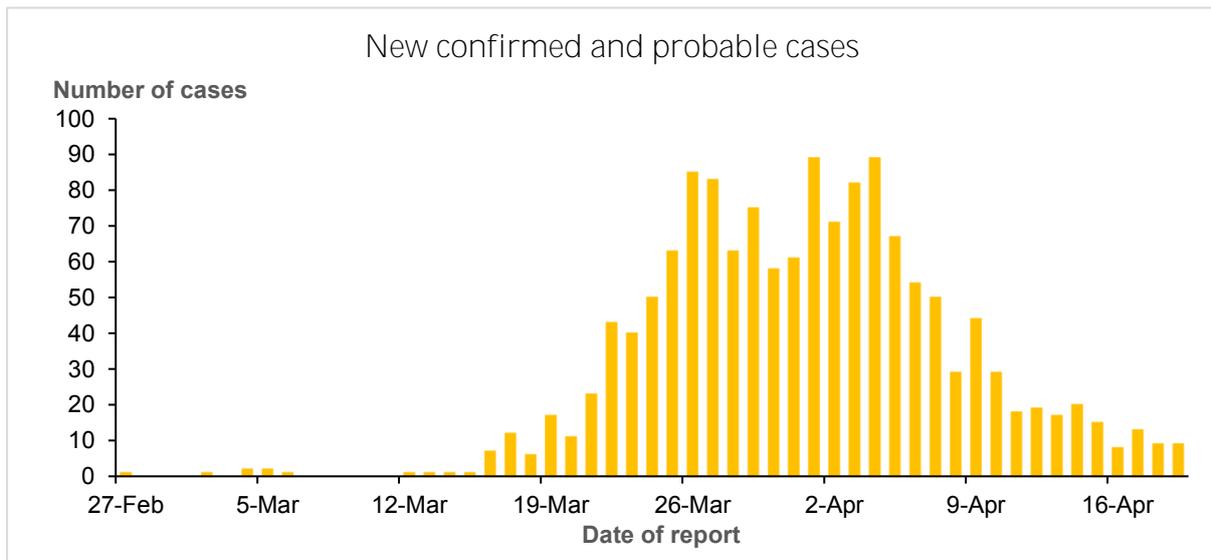
Key messages

4. We are currently on Alert Level 4.
5. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

Outbreak situation

6. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection>

7. The sources of transmission for all confirmed and probable cases are mainly due to contact with known case (54%) or recent overseas travel (39%). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#transmission>
8. At 0900 hours on 20 April 2020 there are:
- 1,440 combined confirmed and probable cases (up 9 in the last 24 hours)
 - 974 recovered cases (up 62 in the last 24 hours)
 - 12 deaths (no change in the last 24 hours).
 - See the figure below for more detail on new confirmed and probable cases.



9. At 0900 hours on 20 April 2020 there are 132 cases (9% of all confirmed and probable cases) who are health care workers. Of these, 48% have recovered.
10. As at 0900 hours on 20 April 2020 there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country.
11. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>
12. As at midnight on 19 April 2020, there were 14 people in hospital with COVID-19, 4 fewer than the day before. Of those in hospital, 3 are in intensive care unit (ICU) (1 stable on ventilator and 2 critical on ventilator).

Health sector response

13. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

14. As at 0900 hours on **20 April 2020** there are 79 Community Based Assessment Centres (CBACs) active and **58** designated practices/swabbing centres/mobiles.
15. A total of **3,081** tests were done on **19 April 2020**. The 7-day rolling average on tests completed is **3,354** tests. The testing capacity in labs for **20 April 2020** is **6,638**. Labs have stock for **88,535** tests, which is enough for **26** days based on the **current 7-day average**. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

16. **82** close contacts were contacted on **19 April 2020** and **7,519** close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs). This number is relatively high given the low number of confirmed and probable cases recently. This is partly because the NCCS is currently working through a backlog of close contacts for whom contact details were not previously available. Recent integration of NHI data into the NCTS has successfully yielded contact details for some of these people.

National Telehealth service

17. On **19 April 2020**, **6,129** calls were answered/outbound calls made (compared to **828** on the same day last year).
18. The levels of volume to 1737 over the last three weeks is greater than seen after the Canterbury Terror Attacks. The load on 1737 and other mental health services was **39%** higher than normal on **19 April 2020**.

New Zealand border response

19. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. **Health officials are working with Air New Zealand to review the risks from aircrew coming to New Zealand and will use this to inform a review of the advice for air crew as appropriate.**
20. New Zealand Customs data recorded **172 people arriving in New Zealand on 19 April 2020**. All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation

facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.

21. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

22. As reported by the WHO on **19 April 2020**, globally there have been **81,153** new confirmed cases (**2,241,359** confirmed cases in total) and **6,463** new deaths reported (**152,551** deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

23. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
24. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
25. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
26. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
27. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
28. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

29. The WHO's risk assessment of the situation is very high at the global level.
30. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including

hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

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31. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
32. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
33. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

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35. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
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Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at 1400 hours on **21 April 2020**.

Prepared by: Maria Turley and Li-Chia Yeh, NHCC Intelligence

Approved by: Bruce Mackay, NHCC Response Manager



SITREP 93
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 21 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 21 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 21 April 2020 there are 1,445 combined confirmed and probable cases. There are 5 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 21 April 2020 there are 1,006 recovered cases (up 32 in the last 24 hours), and 13 deaths (1 more in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

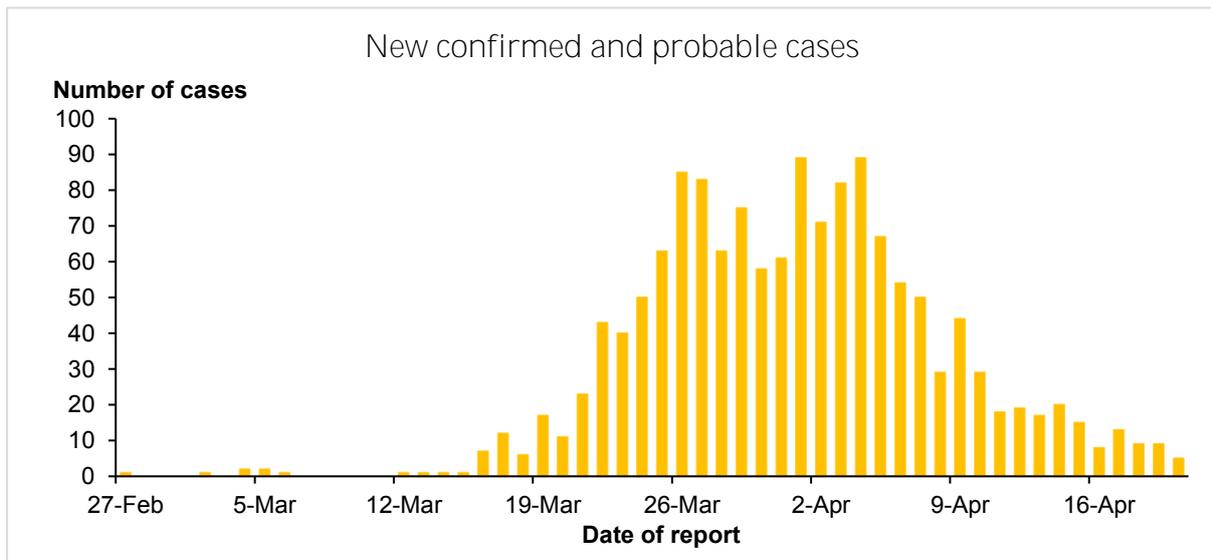
Key messages

4. We are currently on Alert Level 4.
5. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

Outbreak situation

6. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection>

7. The sources of transmission for all confirmed and probable cases are mainly due to contact with a known case (55%) or recent overseas travel (39%). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#transmission>
8. At 0900 hours on 21 April 2020 there are:
- 1,445 combined confirmed and probable cases (up 5 in the last 24 hours)
 - 1,006 recovered cases (up 32 in the last 24 hours)
 - 13 deaths (1 more in the last 24 hours).
 - See the figure below for more detail on new confirmed and probable cases.



9. At 0900 hours on 21 April 2020 there are 133 cases (9% of all confirmed and probable cases) who are health care workers. Of these, 50% have recovered.
10. As at 0900 hours on 21 April 2020 there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country.
11. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>
12. As at midnight on 20 April 2020, there were 12 people in hospital with COVID-19, 2 fewer than the day before. Of those in hospital, 3 are in intensive care unit (ICU) (1 stable on ventilator and 2 stable with no ventilator).

Health sector response

13. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

14. As at 0900 hours on **21 April 2020** there are 79 Community Based Assessment Centres (CBACs) active and **60** designated practices/swabbing centres/mobiles.
15. A total of **3,203** tests were done on **20 April 2020**. The 7-day rolling average on tests completed is **3,587** tests. The testing capacity in labs for **21 April 2020** is **7783**. **Labs have stock for 83,001 tests**. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

16. **81** close contacts were contacted on **20 April 2020** and **7,600** close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs). This number is relatively high given the low number of confirmed and probable cases recently. This is partly because the NCCS is currently working through a backlog of close contacts for whom contact details were not previously available. Recent integration of NHI data into the NCTS has successfully yielded contact details for some of these people.

National Telehealth service

17. On **20 April 2020**, **6,839** calls were answered/outbound calls made (compared to **825** on the same day last year). It appears **people have been delaying access to care again as the overall case mix acuity has increased**.
18. **The demand on 1737 and other mental health services was 48% higher than last year. Additional capacity has been deployed up to 22 April 2020, in an attempt to meet some of the demand.**
19. The top themes were:
 - **asymptomatic people wanting to get tested as part of the surveillance testing**
 - **people with very minor symptoms (eg a blocked nose) calling to get referred for testing and believing that they have COVID**
 - **concern from people that as soon as Alert Level 3 comes in the border opens because there is a lack of understanding relating to people crossing the border. People don't understand that people crossing the border go into managed isolation.**

HorizonPoll: listening to New Zealand

20. **1,267** members of the HorizonPoll National Panel, representing the New Zealand population 18+, responded to the survey between 7 and 14 April 2020.

21. Horizon asked: “At this time, how much do you trust the Ministry of Health and Government to manage the COVID-19 pandemic in a way which best protects you and other New Zealanders?” Results:

- 88% trust the threat will be managed in the best way (33% totally, 40% mostly, 15% somewhat trust).
- 13% are distrustful (3% totally) while 1% are not sure.

22. For more information, see: <https://www.horizonpoll.co.nz/>

New Zealand border response

23. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand’s territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. Health officials are working with Air New Zealand to review the risks from aircrew coming to New Zealand and will use this to inform a review of the advice for air crew as appropriate.

24. New Zealand Customs data recorded **352 people arriving in New Zealand on 20 April 2020. This includes 204 travellers arriving on a repatriation flight from the Philippines.** All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.

25. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

26. As reported by the WHO on **20 April 2020**, globally there have been **72,846** new confirmed cases (**2,314,621** confirmed cases in total) and **5,296** new deaths

reported (157,847 deaths in total). For further details see:

<https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

27. WHO published an updated strategy to help guide the public health response to COVID-19 on 14 April. This document is intended to help guide the public health response to COVID-19 at national and subnational levels, and to update the global strategy to respond to the COVID-19 pandemic. It includes six key criteria for transitioning to and maintaining a steady state of low-level or no transmission.

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

28. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
29. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
30. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
31. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
32. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
33. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

34. The WHO's risk assessment of the situation is very high at the global level.
35. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including

hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

36. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
37. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
38. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

39. The psychosocial subfunction of the welfare response has now stood up a team.
40. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
41. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz
National isolation team public email	MI_Exemptions@health.govt.nz
National isolation team	NHCC_National_Isolation@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at 1400 hours on **22 April 2020**.

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: Bruce Mackay, NHCC Response Manager



SITREP 94
NOVEL CORONAVIRUS COVID-19
ISSUED: 1400 hours 22 April 2020
IN CONFIDENCE

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 22 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 22 April 2020 there are 1,451 combined confirmed and probable cases. There are 6 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 22 April 2020 there are 1,036 recovered cases (up 30 in the last 24 hours), and 14 deaths (1 more in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

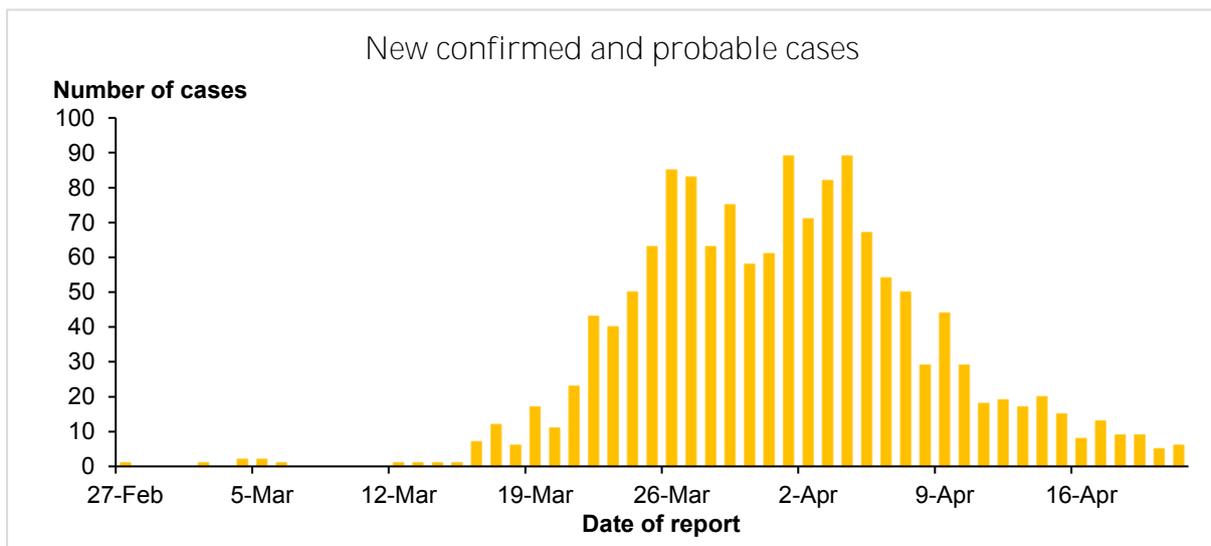
Key messages

4. We are currently on Alert Level 4.
5. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

Outbreak situation

6. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection>

7. The sources of transmission for all confirmed and probable cases are mainly due to contact with a known case (55%) or recent overseas travel (39%). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#transmission>
8. At 0900 hours on **22 April 2020** there are:
- **1,451** combined confirmed and probable cases (up **6** in the last 24 hours)
 - **1,036** recovered cases (up **30** in the last 24 hours)
 - **14** deaths (**1 more** in the last 24 hours).
 - See the figure below for more detail on new confirmed and probable cases.



9. At 0900 hours on **22 April 2020** there are 133 cases (9% of all confirmed and probable cases) who are health care workers. Of these, **54%** have recovered.
10. As at 0900 hours on **22 April 2020** there are 16 significant clusters of 10 or more confirmed and probable cases (**no change** in the last 24 hours) under investigation by public health officials throughout the country.
11. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>
12. As at midnight on **21 April 2020**, there were **11** people in hospital with COVID-19, **1** fewer than the day before. Of those in hospital, **2** are in an intensive care unit (ICU) and stable on ventilators.

Health sector response

13. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

14. As at 0900 hours on **22 April 2020** there are 79 Community Based Assessment Centres (CBACs) active and **61** designated practices/swabbing centres/mobiles.
15. A total of **5,289** tests were done on **21 April 2020**. This number is a new daily high and the first time that labs have tested over 5,000 tests in one day. The increase in daily number of tests reflects the sentinel testing that began on 16 April 2020. The 7-day rolling average on tests completed is **4,043** tests. This is the first time the 7-day average has been over 4,000.
16. The testing capacity in labs for **22 April 2020** is **8,105**. Labs have stock for **87,701** tests. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

17. **74** close contacts were contacted on **21 April 2020** and **7,674** close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs). This number is relatively high given the low number of confirmed and probable cases recently. This is partly because the NCCS is currently working through a backlog of close contacts for whom contact details were not previously available. Recent integration of NHI data into the NCTS has successfully yielded contact details for some of these people.

National Telehealth service

18. On **21 April 2020**, **6,625** calls were answered/outbound calls made (compared to **796** on the same day last year). The National Telehealth service believes the trend upwards is related to announcements regarding increased community testing and a subsequent desire for people to get tested.
19. The top themes were:
 - Asymptomatic people wanting to get tested as part of the surveillance testing.
 - People with very minor symptoms (eg. a blocked nose) are calling to get referred for testing and believe they have COVID-19.
 - Concern from people that the border will open as soon as Level 3 takes effect. There is a lack of understanding in relation to people crossing the border – many people do not understand that those who cross the border go into managed isolation.
 - People are saying that they are holding off accessing healthcare until level 3 comes in.
 - Demand on 1737 and other mental health services continues to be higher than last year.

New Zealand border response

20. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. Health officials are working with Air New Zealand to review the risks from aircrew coming to New Zealand and will use this to inform a review of the advice for air crew as appropriate.
21. New Zealand Customs data recorded **49** people arriving in New Zealand on **21 April 2020**. All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
22. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

23. As reported by the WHO on **21 April 2020**, globally there have been **83,006** new confirmed cases (**2,397,216** confirmed cases in total) and **5,109** new deaths reported (**162,956** deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>
24. **WHO has published 'International Guidelines for Certification and Classification (Coding) of COVID-19 as Cause of Death'.**

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

25. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
26. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
27. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
28. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
29. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
30. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

31. The WHO's risk assessment of the situation is very high at the global level.
32. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that is, over 65 years of age and in those with defined risk factors including hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

33. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
34. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
35. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

36. The psychosocial subfunction of the welfare response has now stood up a team.
37. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
38. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	<u>NHCC_Psychosocial@health.govt.nz</u>
National isolation team public email	<u>MI_Exemptions@health.govt.nz</u>
National isolation team	NHCC_National_Isolation@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at 1400 hours on **23 April 2020**.

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: Johnny Mulheron, NHCC Response Manager



SITREP 95
NOVEL CORONAVIRUS 2019-nCoV
Issued: 1400 hrs 23 April 2020

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 23 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 23 April 2020 there are 1,451 combined confirmed and probable cases. There are 5 new combined confirmed and probable cases reported in the last 24 hours. However, the total number of confirmed and probable cases remains the same as yesterday (see para 9 under 'outbreak situation' section below).
3. As at 0900 hours on 23 April 2020 there are 1,065 recovered cases (up 16 in the last 24 hours), and 16 deaths (2 more in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

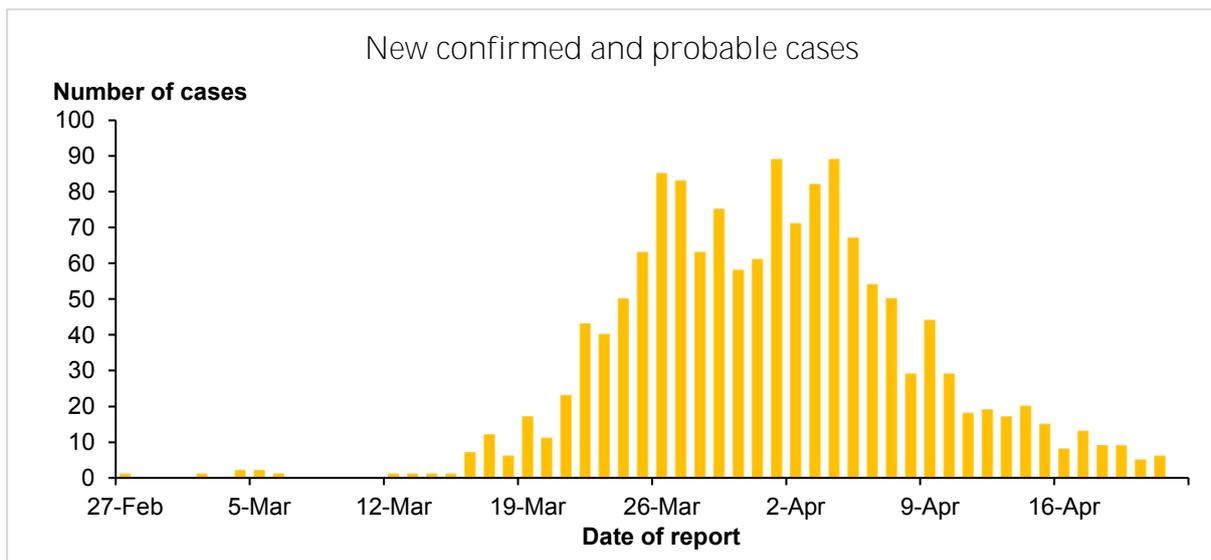
Key messages

4. We are currently on Alert Level 4.
5. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

Outbreak situation

6. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection>

7. The sources of transmission for all confirmed and probable cases are
 - imported cases (reported history of international travel within 14 days of onset): 39%;
 - import related cases: 33%;
 - locally acquired cases, epidemiologically linked: 23%;
 - locally acquired cases, unknown source: 4%
 - source of infection remains under investigation: 2%.
8. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#transmission>
9. At 0900 hours on 23 April 2020 there are:
 - 1,451 combined confirmed and probable cases. There were 5 new combined confirmed and probable cases reported in the last 24 hours. However, the total number of confirmed and probable cases remains the same as yesterday. That is because three confirmed cases reported yesterday have been reclassified as 'under investigation' to allow for checks on whether they were counted in Uruguay's case total before their arrival in New Zealand to prevent double counting by the World Health Organization. Additionally, there has been some movement in the number of probable cases as a probable case can change to either 'confirmed case' or 'not a case'.
 - 1,065 recovered cases (up 29 in the last 24 hours)
 - 16 deaths (2 more in the last 24 hours).
 - See the figure below for more detail on new confirmed and probable cases.



10. At 0900 hours on 23 April 2020 there are 138 cases (9% of all confirmed and probable cases) who are health care workers. Of these, 58% have recovered.
11. As at 0900 hours on 23 April 2020 there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country.
12. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid->

[19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters](#)

13. As at midnight on **22 April 2020**, there were **8** people in hospital with COVID-19, **3** fewer than the day before. Of those in hospital, **1 is in an intensive care unit (ICU)** and is stable on a ventilator.

Health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

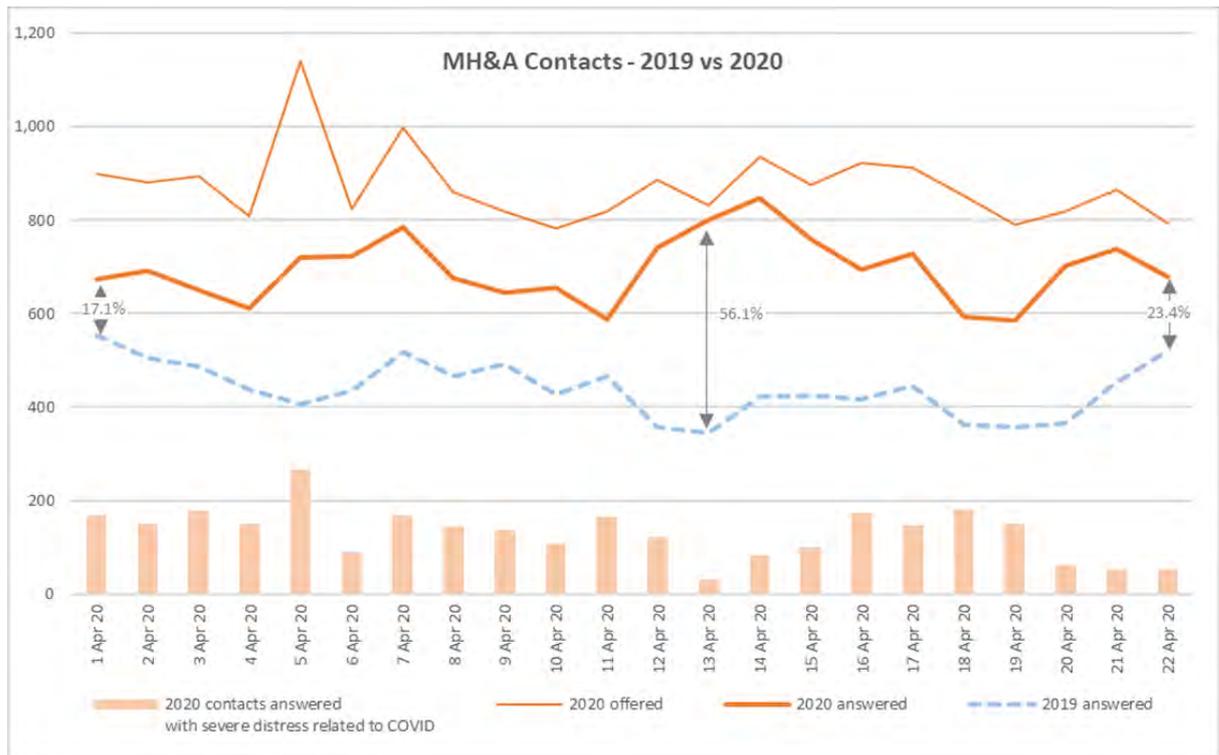
15. As at 0900 hours on **23 April 2020** there are 79 Community Based Assessment Centres (CBACs) active and **62** designated practices/swabbing centres/mobiles.
16. **Total tests completed has hit 100,000 (now 101,277)**. A total of **6,480** tests were done on **22 April 2020**; **the first time over 6,000 tests were completed in a day**. The 7-day rolling average on tests completed is **4,445** tests and **19 days stock is in hand at this level**. The testing capacity in labs for **23 April 2020** is **8,431**. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

17. **64** close contacts were contacted on **22 April 2020** and **7,738** close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs).
18. **The Ministry is developing a monitoring framework that aligns with the critical indicators recommended in Dr Ayesha Verrall's Rapid Audit of Contact Tracing for COVID-19 in New Zealand.**

National Telehealth service

19. On **22 April 2020**, **6,444** calls were answered/outbound calls made (compared to **748** on the same day last year).
20. **The demand on 1737 and other mental health services remains higher than last year. See figure:**



21. The top themes were:

- asymptomatic people wanting to get tested as part of the surveillance testing;
- people with very minor symptoms (eg a blocked nose) calling to get referred for testing and believing that they have COVID-19;
- people are still concerned about border control measures when Alert Level 3 comes in;
- people are continuing to delay access to care as evidenced by the high overall case mix acuity and by people saying that they are holding off until Alert Level 3;
- people are distressed that the Alert Level 3 restrictions (bubbles, business opening) are tighter than the media originally portrayed.

Health and Wellbeing Survey

22. Between the 30 March and 19 April, 5,1612 people who had previously been interviewed as part of the New Zealand Health Survey were interviewed in a new COVID-19 Health and Wellbeing Survey. New Zealand has been on Level 4 for the duration of this survey.
23. 37% of New Zealanders felt lonely to some extent in the past week (third week of survey), up from 31% in the first week of the survey.
24. Most New Zealanders (98%) are still finding the Alert Level 4 rules easy to follow.

25. Data has not been weighted to be representative of the New Zealand population. There will be some sample biases.

New Zealand border response

26. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. Health officials are working with Air New Zealand to review the risks from aircrew coming to New Zealand and will use this to inform a review of the advice for air crew as appropriate.
27. New Zealand Customs data recorded **no people arriving in New Zealand on 22 April 2020**. All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
28. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

29. As reported by the WHO on **22 April 2020**, globally there have been **73,920** new confirmed cases (**2,471,136** confirmed cases in total) and **6,058** new deaths reported (**169,006** deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

30. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travelers, due to high rates of infection worldwide.
31. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
32. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
33. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
34. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
35. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

36. The WHO's risk assessment of the situation is very high at the global level.
37. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that

is, over 65 years of age and in those with defined risk factors including hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

38. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
39. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
40. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

41. The psychosocial subfunction of the welfare response has now stood up a team.
42. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
43. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz
National isolation team public email	MI_Exemptions@health.govt.nz
National isolation team	NHCC_National_Isolation@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at 1400 hours on **24 April 2020**.

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: Johnny Mulheron, NHCC Response Manager



SITREP 96
NOVEL CORONAVIRUS 2019-nCoV
Issued: 1400 hrs 24 April 2020

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 24 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 24 April 2020 there are 1,456 combined confirmed and probable cases. There are 5 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 24 April 2020 there are 1,095 recovered cases (up 30 in the last 24 hours), and 17 deaths (1 death in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

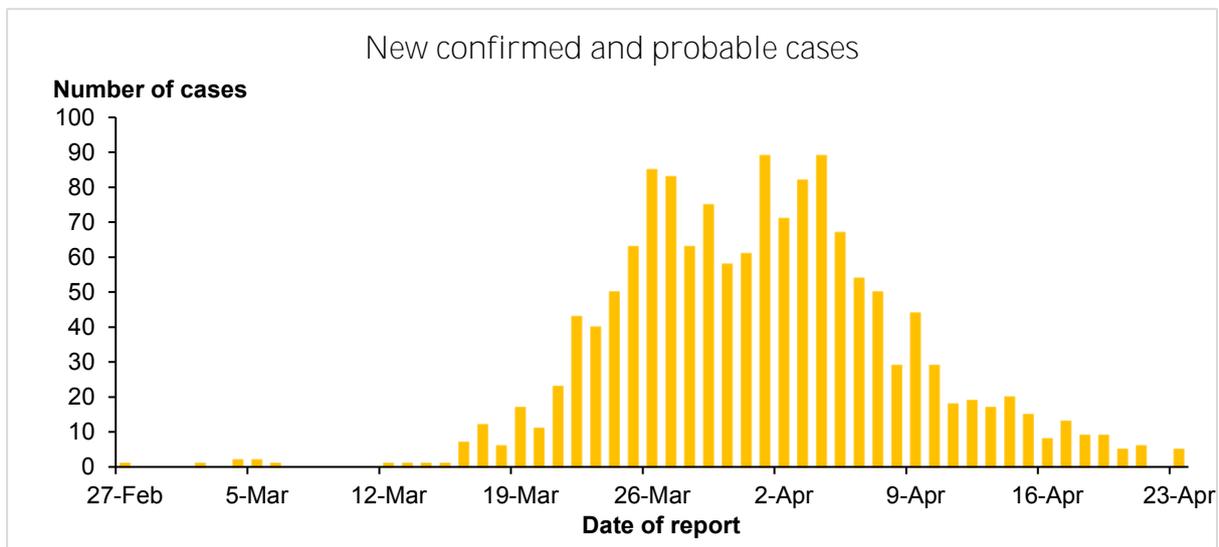
Key messages

4. We are currently on Alert Level 4.
5. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

Outbreak situation

6. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection>

7. The sources of transmission for all confirmed and probable cases are
 - imported cases (reported history of international travel within 14 days of onset): 39%;
 - import related cases: 41%;
 - locally acquired cases, epidemiologically linked: 14%;
 - locally acquired cases, unknown source: 4%;
 - source of infection remains under investigation: 2%.
8. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#transmission>
9. At 0900 hours on 24 April 2020 there are:
 - 1,456 combined confirmed and probable cases. There were 5 new combined confirmed and probable cases reported in the last 24 hours.
 - 1,095 recovered cases (up 30 in the last 24 hours)
 - 17 deaths (1 death in the last 24 hours).
 - See the figure below for more detail on new confirmed and probable cases.



10. At 0900 hours on 24 April 2020 there are 142 cases (10% of all confirmed and probable cases) who are health care workers. Of these, 60% have recovered.
11. As at 0900 hours on 24 April 2020 there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country.
12. The largest clusters are in Auckland, Southern and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>
13. As at midnight on 23 April 2020, there were 8 people in hospital with COVID-19, no change from the day before. Of those in hospital, 1 is in an intensive care unit (ICU) on a ventilator.

Health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

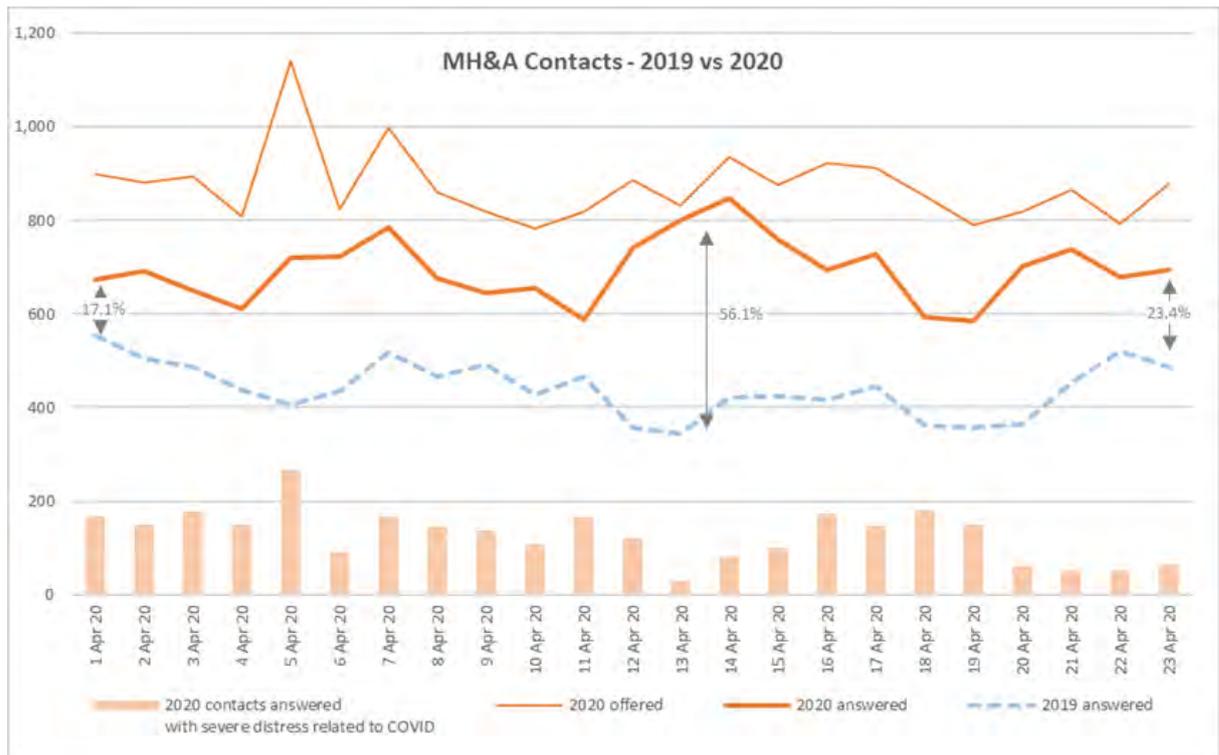
15. As at 0900 hours on **24 April 2020** there are 79 Community Based Assessment Centres (CBACs) active and **77** designated practices/swabbing centres/mobiles.
16. A total of **6,961** tests were done on **23 April 2020**, **another new daily high**. The 7-day rolling average on tests completed is **4,834** tests. The testing capacity in labs for **24 April 2020** is **8,601**. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

17. **57** close contacts were contacted on **23 April 2020** and **7,795** close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs).

National Telehealth service (NTS)

18. On **23 April 2020**, **5,534** calls were answered/outbound calls made (compared to **853** on the same day last year).
19. The demand on 1737 and other mental health services remains higher than last year. **The NTS notes it is seeing levels of risk at greater proportions than it normally would**. See figure:



20. The top themes were:

- the need to reinforce that Healthline will be open this ANZAC weekend operating at its usual hours (24/7);
- people are continuing to delay access to care for non COVID-19 related illness;
- people are very confused about what they can and can't do at level 3; mostly in relation to local and regional travel;
- businesses are starting to call Healthline for advice on reopening and there is a need to direct such queries away from Healthline;
- the level of mental health needs presenting in first-time users of mental health services continues;
- people with very minor symptoms (eg a blocked nose) are calling to get referred for testing and believe they have COVID-19;
- ongoing concern from people that the border will reopen as soon as level 3 takes effect.

New Zealand border response

21. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand.

There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. Health officials are working with Air New Zealand to review the risks from aircrew coming to New Zealand and will use this to inform a review of the advice for air crew as appropriate.

22. New Zealand Customs data recorded **230 people arriving in New Zealand on 23 April 2020**. All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
23. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.
24. **A Border Advisory was sent to public health and border sector stakeholders today with an update on COVID-19. The Border Advisory confirmed that the change from level 4 to level 3 does not relax current border restrictions. Information has been included advising that all superyachts, yachts and other pleasure craft wishing to come to New Zealand during the current border restrictions will be assessed by border agencies on a case-by-case basis. Vessels given approval to arrive will be required to provide information about the health of those on board and potential exposures to COVID-19. If the craft arrives within 14 days of departure from the last port of call health officers will meet the craft on arrival, along with other border agencies. The persons on board will complete 14 days of self-isolation on board the craft either at anchor or a secure berth.**

Global situation

25. As reported by the WHO on **23 April 2020**, globally there have been **73,657** new confirmed cases (**2,544,792** confirmed cases in total) and **6,689** new deaths reported (**175,694** deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>
26. **WHO has published guidance 'Addressing Human Rights as a Key to the COVID-19 Response'**. The guidance document highlights the importance of integrating a

human rights-based approach to the COVID-19 response and highlights key considerations in relation to addressing stigma and discrimination, prevention of violence against women, support for vulnerable populations, quarantine and restrictive measures, and shortages of supplies and equipment.

27. All available evidence for COVID-19 suggests that SARS-CoV-2 has a zoonotic source. Many researchers have been able to look at the genomic features of SARS-CoV-2 and have found that evidence does not support that SARS-CoV-2 is a laboratory construct. A constructed virus would show a mix of known elements within genomic sequences – this is not the case. For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

28. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travellers, due to high rates of infection worldwide.
29. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
30. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
31. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
32. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
33. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

34. The WHO's risk assessment of the situation is very high at the global level.
35. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 8 April 2020 which considers:
 - The risk of severe disease associated with COVID-19 for people in the EU/EEA and UK is currently considered **moderate** for the general population and **very high** for populations with defined risk factors associated with elevated risk (that

is, over 65 years of age and in those with defined risk factors including hypertension, diabetes, cardiovascular disease, chronic respiratory disease, compromised immune status, cancer and obesity).

- The risk of occurrence of widespread national community transmission of COVID-19 in the EU/EEA and the UK in the coming weeks is **moderate** if effective mitigation measures are in place, and **very high** if insufficient mitigation measures are in place.
- The risk that the capacity of health and social care systems in the EU/EEA and the UK will be exceeded in the coming weeks, is considered high with mitigation measures in place and very high if insufficient mitigation measures are in place.
- For an explanation of the factors underlying this risk assessment see: <https://www.ecdc.europa.eu/en/current-risk-assessment-novel-coronavirus-situation>

APPENDIX 2: WELFARE

36. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
37. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
38. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

39. The psychosocial subfunction of the welfare response has now stood up a team.
40. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
41. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

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Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz
National isolation team public email	MI_Exemptions@health.govt.nz
National isolation team	NHCC_National_Isolation@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at 1400 hours on **25 April 2020**.

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: Johnny Mulheron, NHCC Response Manager



SITREP 97

NOVEL CORONAVIRUS 2019-nCoV

Issued: **1400 hrs 25 April 2020**

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on **25 April 2020**.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on **25 April 2020** there are **1,461** combined confirmed and probable cases. There are **5** new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on **25 April 2020** there are **1,118** recovered cases (up **23** in the last 24 hours), and **18** deaths (**1 death** in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

4. We are currently on Alert Level 4. **Alert Level 4 began at 11:59pm on 25 March, and it means that New Zealanders not working in essential services must stay at home and not interact with others outside their household (ie nationwide lockdown).**
5. **New Zealand will step down to Alert Level 3 at 11.59pm on Monday, 27 April for two weeks, before a further review and Alert Level decision on May 11.**
6. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

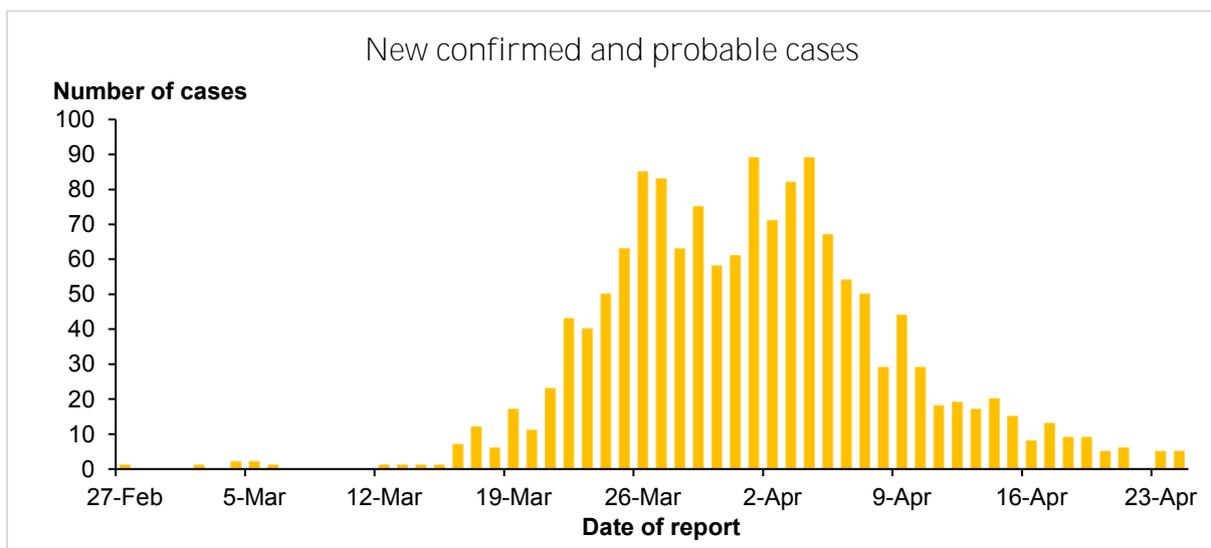
Outbreak situation

7. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the case definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection>

8. The sources of transmission for all confirmed and probable cases are
 - imported cases (reported history of international travel within 14 days of onset): 39%;
 - import related cases: 41%;
 - locally acquired cases, epidemiologically linked: 15%;
 - locally acquired cases, unknown source: 3%;
 - source of infection remains under investigation: 2%.
9. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#transmission>

10. At 0900 hours on 25 April 2020 there are:

- 1,461 combined confirmed and probable cases. There were 5 new combined confirmed and probable cases reported in the last 24 hours.
- 1,118 recovered cases (up 23 in the last 24 hours)
- 18 deaths (1 death in the last 24 hours).
- See the figure below for the epidemic curve of daily confirmed and probable cases by date of report, sourced from EpiSurv (ESR).



11. At 0900 hours on 25 April 2020 there are 147 cases (10% of all confirmed and probable cases) who are health care workers. Of these, 64% have recovered.
12. As at 0900 hours on 25 April 2020 there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country. One of the significant clusters has passed 28 days since the last reported case and transmission for that cluster may be considered dormant.
13. The largest clusters are in Auckland, Southern, and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>

14. As at midnight on **24 April 2020**, there were **7** people in hospital with COVID-19, **1 fewer than** the day before. Of those in hospital, **1 is in an intensive care unit (ICU) on a ventilator**. For further details, see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#dhhbosp>

Health sector response

15. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

16. **Some DHBs are arranging for teams to undertake targeted testing to provide further information on community transmission in these regions. This additional testing and targeted testing will add to the total pool of tests done, provide us with increased confidence in our data, and our overall picture of COVID-19 in New Zealand. We are currently testing selected groups, including healthcare workers, essential workers, and Māori and Pacific communities.**
17. As at 0900 hours on **25 April 2020** there are 79 Community Based Assessment Centres (CBACs) active and **85** designated practices/swabbing centres/mobiles.
18. A total of **6,777** tests were done on **24 April 2020**. The 7-day rolling average on tests completed is **5,134** tests, **and we have 15 days stock on hand at this level**. The testing capacity in labs for **25 April 2020** is **8,111**. **Volumes are expected to lower over the next 3 days as a result of long weekend hours at testing stations**. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

19. **23** close contacts were contacted on **24 April 2020** and **7,818** close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs).

National Telehealth service (NTS)

20. On **24 April 2020**, **5,096** calls were answered/outbound calls made (compared to **875** on the same day last year). **Healthline calls have stabilised with between 5,000 - 6,000 calls a day**.
21. **Healthline are concerned about people delaying accessing care and expect this could continue over the long weekend. Healthline have worked on proactive messaging to try and counter this.**
22. The demand on 1737 and other mental health services remains higher than last year.

23. The top themes were:

- the need to reinforce that Healthline will be open this ANZAC weekend operating at its usual hours (24/7);
- people are continuing to delay access to care for non COVID-19 related illness;
- people are very confused about what they can and can't do at level 3;
- businesses are calling Healthline for advice on reopening and there is a need to direct such queries away from Healthline.

New Zealand border response

24. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. **Health officials have reviewed the risks from aircrew coming to New Zealand. Consultation with the border sector, airline and airport representatives on revised exemptions for airline crew will be initiated this weekend.**

25. New Zealand Customs data recorded **240 people arriving in New Zealand on 24 April 2020**. All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.

26. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

27. As reported by the WHO on 24 April 2020, globally there have been 81,529 new confirmed cases (2,626,321 confirmed cases in total) and 6,260 new deaths reported (181,938 deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

28. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travellers, due to high rates of infection worldwide.
29. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
30. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
31. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
32. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
33. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

34. The WHO's risk assessment of the situation is very high at the global level.
35. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on **23 April 2020**:
 - The risk of severe disease in the EU/EEA and UK is currently considered **low** for the general population in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced and/or maintained at low levels.

- The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for the general population in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing
- The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced or maintained at low levels.
- The risk of severe disease in the EU/EEA and UK is currently considered **very high** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing.
- For the detailed risk assessment see: <https://www.ecdc.europa.eu/en/threats-and-outbreaks/reports-and-data/risk-assessments>

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36. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
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41. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations (Border)	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	NHCC_Psychosocial@health.govt.nz
National isolation team public email	MI_Exemptions@health.govt.nz
National isolation team	NHCC_National_Isolation@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at 1400 hours on **26 April 2020**.

Prepared by: Bridget Murphy and Kirsten Forrest, NHCC Intelligence

Approved by: Bruce Mackay, NHCC Response Manager



SITREP 98
Coronavirus disease 2019 (COVID-19)
Issued: 1400 hours 26 April 2020

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 26 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 26 April 2020 there are 1,470 combined confirmed and probable cases. There are 9 new combined confirmed and probable cases reported in the last 24 hours.
3. As at 0900 hours on 26 April 2020 there are 1,142 recovered cases (up 24 in the last 24 hours), and 18 deaths (no death in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

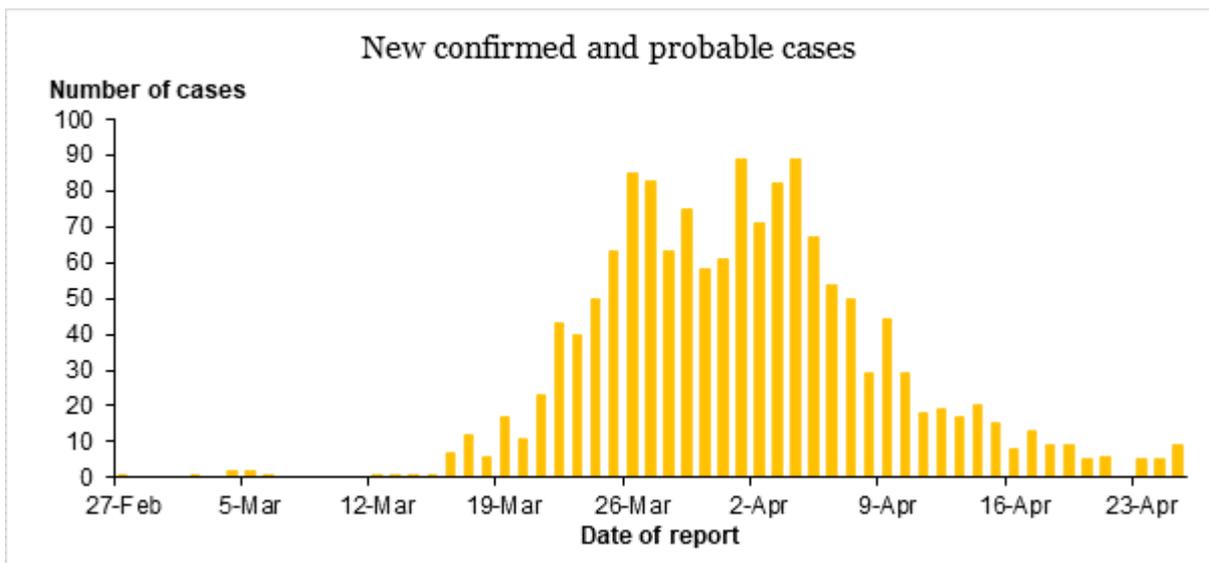
4. We are currently on Alert Level 4.
5. Alert Level 4 began at 2359 hours on 25 March 2020. New Zealand will step down to Alert Level 3 at 2359 hours on 27 April 2020. A further review and Alert Level decision will be made on 11 May 2020.
6. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

Outbreak situation

7. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the case definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection>

8. At 0900 hours on **26 April 2020**, the sources of transmission for all confirmed and probable cases are:
 - 39% are imported cases (cases reported a history of international travel within 14 days of onset);
 - 41% are import related cases (cases reported a link to an imported/overseas acquired case);
 - 15% are locally acquired cases, epidemiologically linked (cases reported a link to a locally acquired case with unknown source);
 - 3% are locally acquired cases, unknown source (cases reported no history of international travel within 14 days of onset and no epidemiological link to a source case);
 - 2% with source of infection that remains under investigation.

9. At 0900 hours on **26 April 2020** there are:
 - **1,470** combined confirmed and probable cases. There were **9** new combined confirmed and probable cases reported in the last 24 hours;
 - **1,142** recovered cases (up **24** in the last 24 hours);
 - 18 deaths (**no death** in the last 24 hours);
 - **The daily number of new combined and probable cases remained under 10 for the past 7 days.** See the figure below for the epidemic curve of daily confirmed and probable cases by date of report, sourced from EpiSurv (ESR).



10. At 0900 hours on **26 April 2020** there are **153** cases (**10%** of all confirmed and probable cases) who are health care workers. Of these, **65%** have recovered.

11. As at 0900 hours on **26 April 2020** there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country. One of the significant clusters has passed 28 days since the last reported case and transmission for that cluster may be considered dormant.

12. The largest clusters are in Auckland, Southern, and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>

13. As at midnight on **25 April 2020**, there were **7** people in hospital with COVID-19, **no change** from the day before. Of those in hospital, **1 is in an intensive care unit (ICU) on a ventilator**. For further details, see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#dhhbosp>

Health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

15. As at 0900 hours on **26 April 2020** there are 79 Community Based Assessment Centres (CBACs) active and 85 designated practices/swabbing centres/mobiles.
16. A total of **5,966** tests were done on **25 April 2020**. The 7-day rolling average on tests completed is **5,394** tests, and we have **14** days stock on hand at this level. The testing capacity in labs for **26 April 2020** is **8,011**. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

17. **40** close contacts were contacted on **25 April 2020** and **7,858** close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs).

National Telehealth service (NTS)

18. On **25 April 2020**, **4,779** calls were answered/outbound calls made (compared to **847** on the same day last year). Healthline calls have stabilised with between 5,000–6,000 calls a day.
19. Healthline are concerned about people delaying accessing care and expect this could continue over the long weekend. Healthline have worked on proactive messaging to try and counter this. The demand on 1737 and other mental health services remains higher than last year.
20. The top themes were:
- **people believing that care was not available as it was ANZAC day;**
 - **the overall call mix changed with far more people needing clinical advice (both COVID-19 and non COVID-19) than forecast resulting in some longer than forecast delays for clinical advice;**
 - **in Mental Health services we saw a number of people distressed and saddened due to ANZAC day;**
 - **people remain confused about what they can and can't do at Alert Level 3.**

New Zealand border response

21. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. Health officials have reviewed the risks from aircrew coming to New Zealand. Consultation with the border sector, airline and airport representatives on revised exemptions for airline crew will be initiated this weekend.
22. New Zealand Customs data recorded **272 people** arriving in New Zealand on **25 April 2020**. All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
23. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

24. As reported by the WHO on **25 April 2020**, globally there have been **93,716** new confirmed cases (**2,719,897** confirmed cases in total) and **5,767** new deaths reported (**187,705** deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

25. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travellers, due to high rates of infection worldwide.
26. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
27. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
28. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
29. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
30. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

31. The WHO's risk assessment of the situation is very high at the global level.
32. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 23 April 2020:
 - The risk of severe disease in the EU/EEA and UK is currently considered **low** for the general population in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced and/or maintained at low levels.

- The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for the general population in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing
- The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced or maintained at low levels.
- The risk of severe disease in the EU/EEA and UK is currently considered **very high** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing.
- For the detailed risk assessment see:
<https://www.ecdc.europa.eu/en/threats-and-outbreaks/reports-and-data/risk-assessments>

APPENDIX 2: WELFARE

33. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
34. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
35. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

36. The psychosocial subfunction of the welfare response has now stood up a team.
37. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
38. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations Border	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	<u>NHCC_Psychosocial@health.govt.nz</u>
National isolation team public email	<u>MI_Exemptions@health.govt.nz</u>
National isolation team	NHCC_National_Isolation@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at 1400 hours on **27 April 2020**.

Prepared by: Li-Chia Yeh and Maria Turley, NHCC Intelligence

Approved by: Bruce Mackay, NHCC Response Manager



SITREP 99

Coronavirus disease 2019 (COVID-19)

Issued: 1400 hours 27 April 2020

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 27 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 4: Eliminate. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 27 April 2020 there are 1,469 combined confirmed and probable cases. Five new combined confirmed and probable cases have been reported in the last 24 hours, however six probable cases from yesterday have been reclassified as under investigation so the total number of cases has decreased by one.
3. As at 0900 hours on 27 April 2020 there are 1,180 recovered cases (up 38 in the last 24 hours), and 19 deaths (one death in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

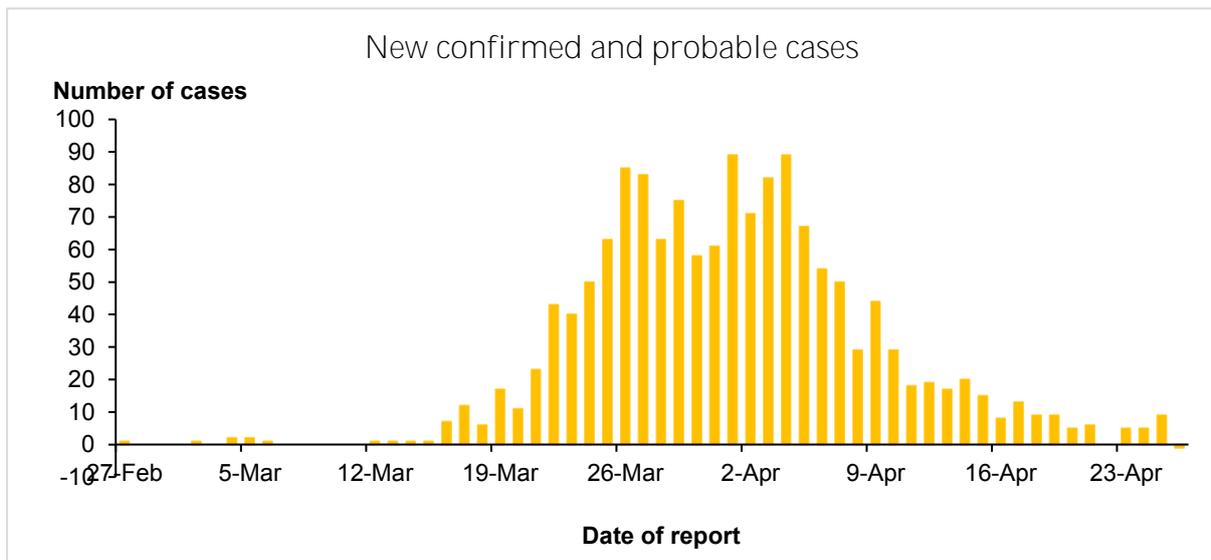
4. We are currently on Alert Level 4.
5. Alert Level 4 began at 2359 hours on 25 March 2020. New Zealand will step down to Alert Level 3 at 2359 hours on 27 April 2020. A further review and Alert Level decision will be made on 11 May 2020.
6. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

Outbreak situation

7. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the case definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection>

8. At 0900 hours on **27 April 2020**, the sources of transmission for all confirmed and probable cases are:
 - 39% are imported cases (cases reported a history of international travel within 14 days of onset);
 - **33%** are import related cases (cases reported a link to an imported/overseas acquired case);
 - **23%** are locally acquired cases, epidemiologically linked (cases reported a link to a locally acquired case with unknown source);
 - 3% are locally acquired cases, unknown source (cases reported no history of international travel within 14 days of onset and no epidemiological link to a source case);
 - 2% with source of infection that remains under investigation.

9. At 0900 hours on **27 April 2020** there are:
 - **1,469** combined confirmed and probable cases. There were **five** new combined confirmed and probable cases reported in the last 24 hours, **but six probable cases were reclassified as under investigation so the total has reduced by one**;
 - **1,180** recovered cases (up **38** in the last 24 hours);
 - **19** deaths (**one** death in the last 24 hours);
 - See the figure below for the epidemic curve of daily confirmed and probable cases by date of report, sourced from EpiSurv (ESR).



10. At 0900 hours on **27 April 2020** there are **154** cases (**10%** of all confirmed and probable cases) who are health care workers. Of these, **66%** have recovered.

11. As at 0900 hours on **27 April 2020** there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country. One of the significant clusters has passed 28 days since the last reported case and transmission for that cluster may be considered dormant.

12. The largest clusters are in Auckland, Southern, and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid->

[19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters](https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-current-situation/covid-19-current-cases/covid-19-clusters)

13. As at midnight on **26 April 2020**, there were seven people in hospital with COVID-19, no change from the day before. Of those in hospital, one is in an intensive care unit (ICU) on a ventilator. For further details, see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#dhbhosp>

Health sector response

14. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

15. As at 0900 hours on **27 April 2020** there are 79 Community Based Assessment Centres (CBACs) active and 85 designated practices/swabbing centres/mobiles.
16. A total of **2,939** tests were done on **26 April 2020**. The 7-day rolling average on tests completed is **5,374** tests, and we have **13** days stock on hand at this level. The testing capacity in labs for **27 April 2020** is **8,011**. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>

National Close Contact Service (NCCS) contact tracing

17. **22** close contacts were contacted on **26 April 2020** and **7,880** close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs).

National Telehealth service (NTS)

18. On **26 April 2020**, **4,950** calls were answered/outbound calls made (compared to **851** on the same day last year). Healthline calls have stabilised at about 5,000 calls a day.
19. Healthline are concerned about people delaying accessing care and expect this could continue over the long weekend. Healthline have worked on proactive messaging to try and counter this.
20. The demand on 1737 and other mental health services was higher than the same day last year by **35%**.

21. The top themes were:

- Outbound welfare checks to those in managed isolation are finding that people are generally coping OK. However, there is an emerging theme relating to the quantity of food been served and frustration that people cannot have food delivered. Specific feedback is being pulled together by facility to inform the managed isolation team today.
- The overall call mix changed again yesterday with far more people needing clinical advice (both COVID-19 and non-COVID-19) than forecast resulting in some longer than forecast delays for clinical advice.
- People remain confused about what they can and can't do at level three.

22. On 26 April 2020, 2,876 registered (people or households) and currently in isolation. The table below shows the number of people in isolation by DHBs.

DHB 26/4/2020	Active Self Isolation
Unknown	1,588
Auckland	797
Counties Manukau	242
Waitemata	57
Lakes	33
Waikato	30
Southern	29
Canterbury	28
Capital and Coast	16
Bay of Plenty	15
Taranaki	10
Hutt Valley	8
Northland	6
Hawkes Bay	3
MidCentral	3
Nelson Marlborough	3
South Canterbury	3
Wairarapa	2
Whanganui	2
West Coast	1

New Zealand border response

23. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. Health officials have reviewed the risks from aircrew coming to New Zealand. Consultation with the border sector, airline and airport

representatives on revised exemptions for airline crew will be initiated this weekend.

24. New Zealand Customs data recorded **107** people arriving in New Zealand on **26 April 2020**. All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
25. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

26. As reported by the WHO on **26 April 2020**, globally there have been **84,900** new confirmed cases (**2,804,796** confirmed cases in total) and **6,006** new deaths reported (**193,710** deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

27. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travellers, due to high rates of infection worldwide.
28. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
29. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
30. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
31. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
32. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

33. The WHO's risk assessment of the situation is very high at the global level.
34. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 23 April 2020:
 - The risk of severe disease in the EU/EEA and UK is currently considered **low** for the general population in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced and/or maintained at low levels.

- The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for the general population in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing
- The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced or maintained at low levels.
- The risk of severe disease in the EU/EEA and UK is currently considered **very high** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing.
- For the detailed risk assessment see:
<https://www.ecdc.europa.eu/en/threats-and-outbreaks/reports-and-data/risk-assessments>

APPENDIX 2: WELFARE

35. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
36. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
37. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

38. The psychosocial subfunction of the welfare response has now stood up a team.
39. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
40. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

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Operations Border	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
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National isolation team	NHCC_National_Isolation@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at 1400 hours on **28 April 2020**.

Prepared by: Maria Turley and Li-Chia Yeh, NHCC Intelligence

Approved by: Bruce Mackay, NHCC Response Manager



SITREP 100
Coronavirus disease 2019 (COVID-19)
Issued: 1400 hours 28 April 2020

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 28 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. **We are currently on Level 3: Restrict.** For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 28 April 2020 there are 1,472 combined confirmed and probable cases. **Three** new combined confirmed and probable cases have been reported in the last 24 hours. **Two confirmed cases had contact with known cases and, one probable case has an unknown source of infection and is under investigation.**
3. As at 0900 hours on 28 April 2020 there are 1,214 recovered cases (up 34 in the last 24 hours), and 19 deaths (**no change** in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

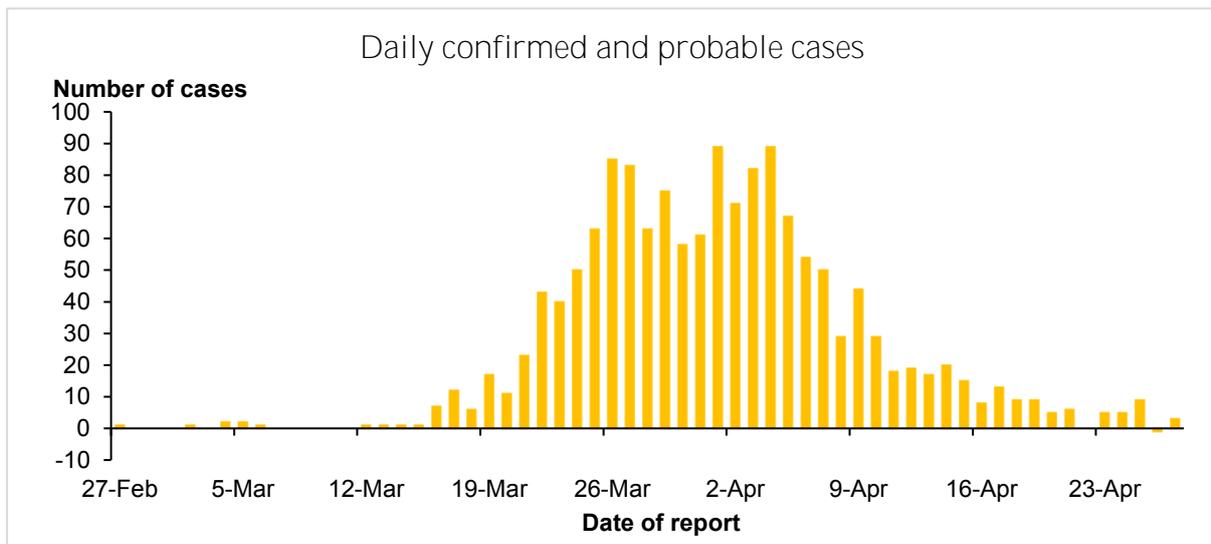
4. **Alert Level 3 allows businesses to carry out necessary work to prepare their workplaces. The health sector continues significant testing of selected groups and developing a visitor policy for people visiting their loved ones in hospital. At Alert Level 3 we will need to be even more vigilant because more people will be circulating in our communities.**
5. A further review and Alert Level decision will be made on 11 May 2020.
6. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

Outbreak situation

7. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the case definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel->

[coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection](#)

8. At 0900 hours on **28 April 2020**, the sources of transmission for all confirmed and probable cases are:
- 39% are imported cases (cases reported a history of international travel within 14 days of onset);
 - 33% are import related cases (cases reported a link to an imported/overseas acquired case);
 - 23% are locally acquired cases, epidemiologically linked (cases reported a link to a locally acquired case with unknown source);
 - **4%** are locally acquired cases, unknown source (cases reported no history of international travel within 14 days of onset and no epidemiological link to a source case);
 - 2% with source of infection that remains under investigation.
9. At 0900 hours on **28 April 2020** there are:
- **1,472** combined confirmed and probable cases. There were **three** new combined confirmed and probable cases reported in the last 24 hours.
 - **1,214** recovered cases (up **34** in the last 24 hours);
 - **19** deaths (**no change** in the last 24 hours);
 - See the figure below for the epidemic curve of daily confirmed and probable cases by date of report, sourced from EpiSurv (ESR).



10. At 0900 hours on **28 April 2020** there are **155** cases (**11%** of all confirmed and probable cases) who are health care workers. Of these, **68%** have recovered.
11. As at 0900 hours on **28 April 2020** there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country. One of the significant clusters has passed 28 days since the last reported case and transmission for that cluster may be considered dormant.
12. The largest clusters are in Auckland, Southern, and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid->

[19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters](https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters)

13. As at midnight on **27 April 2020**, there were **nine** people in hospital with COVID-19, **two more than the day before**. Of those in hospital, one is in an intensive care unit (ICU) on a ventilator. For further details, see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#dhhbosp>
14. **As at 08:30, 28 April 2020 there are 153 ICU beds occupied nationally and 30 ventilators in use.**

Health sector response

15. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.

Lab testing

16. As at 0900 hours on **28 April 2020** there are **78** Community Based Assessment Centres (CBACs) active and **87** designated practices/swabbing centres/mobiles.
17. A total of **2,146** tests were done on **27 April 2020**. **The lower volume was expected due to the long weekend**. The 7-day rolling average on tests completed is **5,223** tests, and we have **13** days stock on hand at this level. The testing capacity in labs for **28 April 2020** is **8,483**. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>
18. **70,000 swabs arrived in New Zealand over the weekend but the flight they were on was diverted to Christchurch and, as a result, there will be a 24 hour-delay in distributing the swabs nationally. Last week the bulk supply was largely exhausted as the country was stocked in preparation for the long weekend but there are 130,000 unused swabs in the network, and they will be redistributed locally over the next two days. An additional arrival of 200,000 swabs is expected by the end of this week.**

National Close Contact Service (NCCS) contact tracing

19. **0** close contacts were contacted on **27 April 2020** and **7,913** close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs).

National Telehealth service (NTS)

20. On **27 April 2020**, **6,341** calls were answered/outbound calls made (compared to **855** on the same day last year). **The day was busier than expected and core Healthline was twice the volume anticipated.**
21. **People continue to delay access to care.**

22. The demand on 1737 and other mental health services was higher than the same day last year. **The comparison period was already high because it fell at the time the Christchurch Terror Attacks occurred.**
23. The top themes were
- Outbound welfare checks to those in managed isolation are finding that people are generally coping okay. However, there is an emerging theme relating to the quantity of food being served and frustration that people cannot have food delivered. **Specific examples have now been relayed to the Ministry of Health managed isolation team.**
 - The overall call mix changed again yesterday with far more people needing clinical advice (both COVID-19 and non-COVID-19) than forecast resulting in some longer than forecast delays for clinical advice.
 - **Some businesses remain confused about Level 3 rules.**
24. On **27 April 2020**, **2,698** registered (people or households) are currently in isolation. The table below shows the number of people in isolation by DHB.

DHB 27/4/20	Active in Self Isolation
Unknown	1,461
Auckland	837
Counties Manukau	240
Waitemata	39
Lakes	23
Canterbury	22
Southern	19
Waikato	15
Capital and Coast	11
Bay of Plenty	8
Hutt Valley	6
Taranaki	6
Northland	4
Nelson Marlborough	3
South Canterbury	2
Mid Central	1
Whanganui	1

New Zealand border response

25. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. Health officials have reviewed the risks from aircrew coming to New Zealand. Consultation with the border sector, airline and airport

representatives on revised exemptions for airline crew will be initiated this weekend.

26. New Zealand Customs data recorded **413** people arriving in New Zealand on **27 April 2020**. All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
27. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.

Global situation

28. As reported by the WHO on **27 April 2020**, globally there have been **85,530** new confirmed cases (**2,878,196** confirmed cases in total) and **4,982** new deaths reported (**198,668** deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

29. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travellers, due to high rates of infection worldwide.
30. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
31. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
32. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
33. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
34. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

35. The WHO's risk assessment of the situation is very high at the global level.
36. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 23 April 2020:
 - The risk of severe disease in the EU/EEA and UK is currently considered **low** for the general population in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced and/or maintained at low levels.

- The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for the general population in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing
- The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced or maintained at low levels.
- The risk of severe disease in the EU/EEA and UK is currently considered **very high** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing.
- For the detailed risk assessment see:
<https://www.ecdc.europa.eu/en/threats-and-outbreaks/reports-and-data/risk-assessments>

APPENDIX 2: WELFARE

37. The All of Government Welfare Number, 0800 779 997, is now up and running and available 7 days a week. This provides welfare information and support for individuals in self-isolation.
38. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
39. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

40. The psychosocial subfunction of the welfare response has now stood up a team.
41. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
42. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations Border	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	<u>NHCC_Psychosocial@health.govt.nz</u>
National isolation team public email	<u>MI_Exemptions@health.govt.nz</u>
National isolation team	NHCC_National_Isolation@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at 1400 hours on **29 April 2020**.

Prepared by: Kirsten Forrest and Bridget Murphy, NHCC Intelligence

Approved by: Johnny Mulheron, NHCC Response Manager



SITREP 101
Coronavirus disease 2019 (COVID-19)
Issued: 1400 hours 29 April 2020

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 29 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 3: Restrict. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 29 April 2020 there are 1,126 confirmed cases and 348 probable cases, totalling 1,474 combined confirmed and probable cases. Two new confirmed cases and no new probable cases have been reported in the last 24 hours.
3. As at 0900 hours on 29 April 2020 there are 1,229 recovered cases (up 15 in the last 24 hours), and 19 deaths (no change in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

4. Alert Level 3 allows businesses to carry out necessary work to prepare their workplaces. At Alert Level 3 we will need to be even more vigilant because more people will be circulating in our communities.
5. A further review and Alert Level decision will be made on 11 May 2020.
6. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

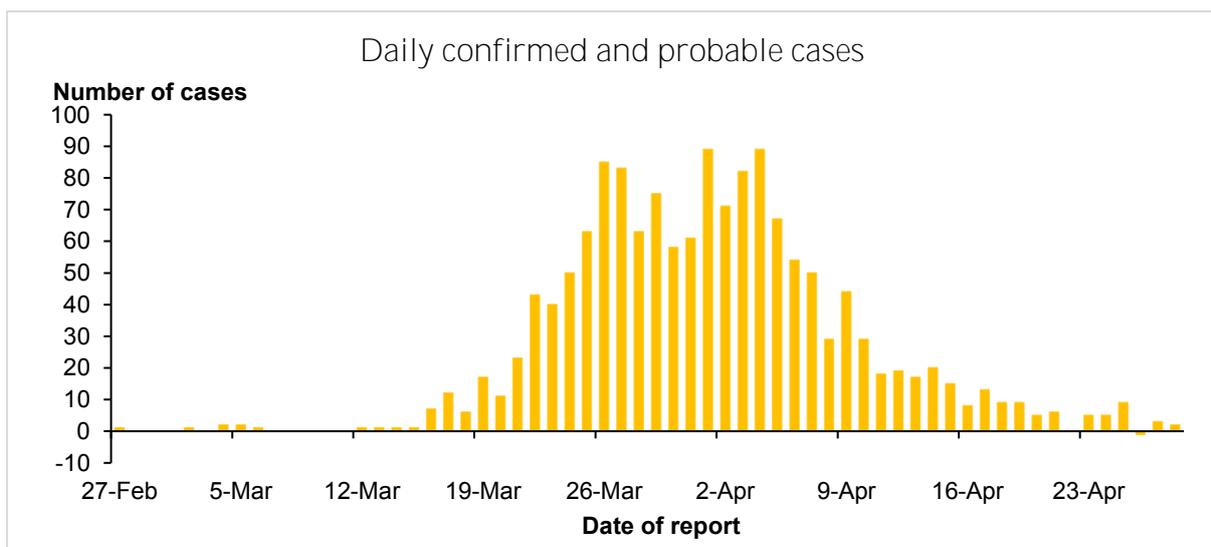
Outbreak situation

7. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the case definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection>

8. At 0900 hours on **29 April 2020**, the source of infection for all confirmed and probable cases are:
 - 39% are imported cases (cases reported a history of international travel within 14 days of onset);
 - **32%** are import related cases (cases reported a link to an imported/overseas acquired case);
 - **24%** are locally acquired cases, epidemiologically linked (cases reported a link to a locally acquired case with unknown source);
 - **4%** are locally acquired cases, unknown source (cases reported no history of international travel within 14 days of onset and no epidemiological link to a source case);
 - 2% with source of infection that remains under investigation.

9. At 0900 hours on **29 April 2020** there are **226 active cases**, and:
 - **1,126 confirmed cases and 348 probable cases, totalling 1,474 combined confirmed and probable cases. Two new confirmed cases and no new probable cases have been reported in the last 24 hours.**
 - **1,229 recovered cases (up 15 in the last 24 hours),**
 - **19 deaths (no change in the last 24 hours).**

10. See the figure below for the epidemic curve of daily confirmed and probable cases by date of report.



11. At 0900 hours on **29 April 2020** there are **156 cases (11% of all confirmed and probable cases)** who are health care workers. Of these, **70%** have recovered.

12. As at 0900 hours on **29 April 2020** there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country. One of the significant clusters has passed **more than 28 days** since the last reported case and transmission for that cluster may be considered **finished**.

13. The largest clusters are in Auckland, Southern, and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>

14. As at midnight on **28 April 2020**, there were **six** people in hospital with COVID-19, **three fewer than the day before**. Of those in hospital, **none are in an intensive care unit (ICU)**. For further details, see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#dhhosp>

Health sector response

15. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
16. At Alert Level 3,
- **services will open and operate normally where possible, while managing public health risks;**
 - **strict hygiene measures and physical distancing measures will remain in place,**
 - **infection prevention and control principles must be adhered to across the system,**
 - **testing for COVID-19 will continue at community-based assessment centres (CBACs), designated practices, and some general practices.**
17. **Information on how to access health and disability services at Alert Level 3 is available on our website here:** <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/health-and-disability-services-alert-level-3>

Lab testing

18. As at 0900 hours on **29 April 2020** there are **79** Community Based Assessment Centres (CBACs) active and **88** designated practices/swabbing centres/mobiles.
19. A total of **2,637** tests were done on **28 April 2020**. **The lower volume was expected due to the long weekend**. The 7-day rolling average on tests completed is **4,844** tests, and we have **13** days stock on hand at this level. The daily testing capacity in labs for **29 April 2020** is **8,483**. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>
20. **Over the weekend 70,000 of swabs arrived from overseas, however the flight was diverted from Auckland to Christchurch. This has created a delay in getting these swabs into the network and we do not expect that these will be available until Friday. Bulk stocks have been exhausted, however there are around 130,000 swabs in circulation currently. A further 200,000 swabs are expected to arrive in New Zealand later this week.**

National Close Contact Service (NCCS) contact tracing

21. 48 close contacts were contacted on 28 April 2020 and 7,961 close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs).

National Telehealth service (NTS)

22. On 28 April 2020, 6,470 calls were answered/outbound calls made (compared to 803 on the same day last year).
23. The demand on 1737 and other mental health services remains high.
24. The top themes were
 - outbound welfare checks to those in managed isolation are finding that people are generally coping okay. However, there is an emerging theme relating to the quantity of food being served and frustration that people cannot have food delivered. Specific examples have now been relayed to the Ministry of Health managed isolation team.
 - far more people needed clinical advice (both COVID-19 and non-COVID-19) than forecast resulting in some longer than forecast delays for clinical advice,
 - some businesses remain confused about Level 3 rules.

New Zealand border response

25. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. Health officials have reviewed the risks from aircrew coming to New Zealand. Consultation with the border sector, airline and airport representatives on revised exemptions for airline crew will be initiated this weekend.
26. New Zealand Customs data recorded 88 people arriving in New Zealand on 28 April 2020. All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.

27. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.
28. Ministry of Health is currently working with border agencies on two cabinet papers - a future border settings paper and a paper on the restrictions at the maritime border. These papers are being worked on with some urgency and will inform the border response and planning going forward.

Global situation

29. As reported by the WHO on 28 April 2020, globally there have been 76,026 new confirmed cases (2,954, 222 confirmed cases in total) and 3,932 new deaths reported (202,597 deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>
30. WHO Director-General Dr. Tedros, in his regular media briefing on 27 April, highlighted “As lockdowns in Europe ease with declining numbers of new cases, we continue to urge countries to find, isolate, test and treat all cases of COVID-19 and trace every contact, to ensure these declining trends continue”. More information is available here: <https://www.who.int/dg/speeches/detail/who-director-general-s-opening-remarks-at-the-media-briefing-on-covid-19---27-april-2020>

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

31. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travellers, due to high rates of infection worldwide.
32. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
33. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
34. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
35. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
36. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

37. The WHO's risk assessment of the situation is very high at the global level.
38. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 23 April 2020:
 - The risk of severe disease in the EU/EEA and UK is currently considered **low** for the general population in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced and/or maintained at low levels.

- The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for the general population in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing
- The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced or maintained at low levels.
- The risk of severe disease in the EU/EEA and UK is currently considered **very high** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing.
- For the detailed risk assessment see:
<https://www.ecdc.europa.eu/en/threats-and-outbreaks/reports-and-data/risk-assessments>

APPENDIX 2: WELFARE

39. The All of Government Welfare Number, 0800 779 997 is available 7 days a week. This provides welfare information and support for individuals in self-isolation.
40. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
41. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

42. A dedicated team oversees the psychosocial aspect of the welfare.
43. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
44. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations Border	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	<u>NHCC_Psychosocial@health.govt.nz</u>
National isolation team public email	<u>MI_Exemptions@health.govt.nz</u>
National isolation team	NHCC_National_Isolation@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at 1400 hours on **30 April 2020**.

Prepared by: Bridget Murphy and Maria Turley, NHCC Intelligence

Approved by: Johnny Mulheron, NHCC Response Manager



SITREP 102
Coronavirus disease 2019 (COVID-19)
Issued: 1400 hours 30 April 2020

New information in red text.

Unless otherwise specified, all information is current as of 1400 hours on 30 April 2020.

Purpose: This report provides daily advice/evidence/policy from the health response to the COVID-19 pandemic.

Summary

1. New Zealand has a four-level COVID-19 specific alert system. We are currently on Level 3: Restrict. For further details see: <https://covid19.govt.nz/government-actions/covid-19-alert-system/#new-zealand-covid-19-alert-levels>
2. At 0900 hours on 30 April 2020 there are 1,129 confirmed cases and 347 probable cases, totalling 1,476 combined confirmed and probable cases. Three new confirmed cases and one fewer probable cases have been reported in the last 24 hours.
3. As at 0900 hours on 30 April 2020 there are 1,241 recovered cases (up 12 in the last 24 hours), and 19 deaths (no change in the last 24 hours). For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-cases>

Key messages

4. Alert Level 3 allows businesses to carry out necessary work to prepare their workplaces. At Alert Level 3 we will need to be even more vigilant because more people will be circulating in our communities.
5. A further review and Alert Level decision will be made on 11 May 2020.
6. It is critically important that we both protect New Zealanders from the virus and play our part in the global effort to contain COVID-19.

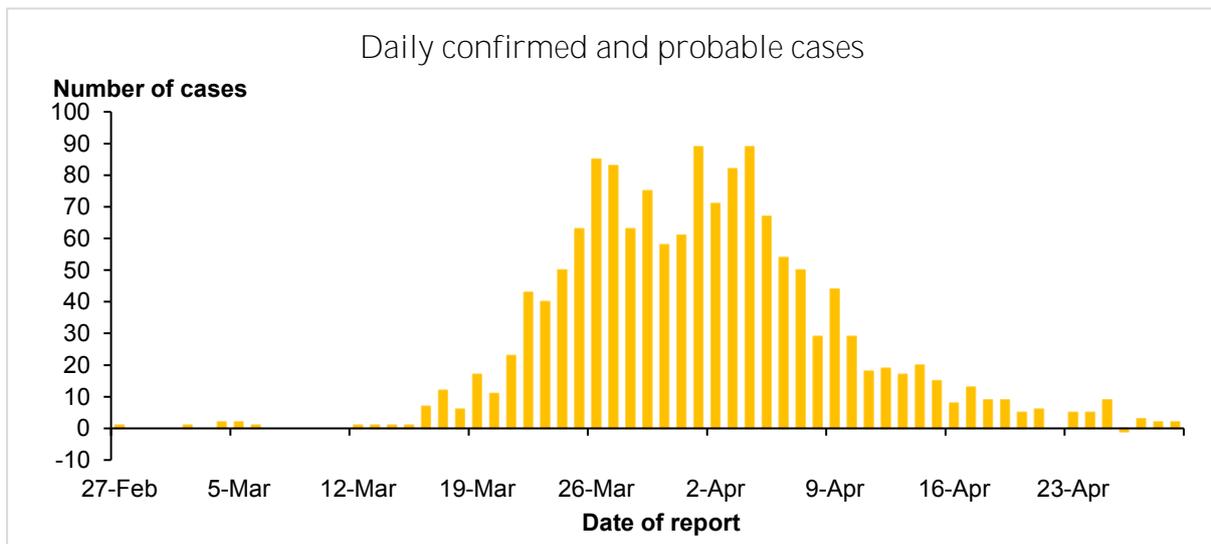
Outbreak situation

7. The case definition was amended on 16 April 2020 and broadens the criteria for eligibility for testing for COVID-19. For the case definitions see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-resources-health-professionals/case-definition-covid-19-infection>

8. At 0900 hours on **30 April 2020**, the source of infection for all confirmed and probable cases are:
 - 39% are imported cases (cases reported a history of international travel within 14 days of onset);
 - 32% are import related cases (cases reported a link to an imported/overseas acquired case);
 - 24% are locally acquired cases, epidemiologically linked (cases reported a link to a locally acquired case with unknown source);
 - 4% are locally acquired cases, unknown source (cases reported no history of international travel within 14 days of onset and no epidemiological link to a source case);
 - **1%** with source of infection that remains under investigation.

9. At 0900 hours on **30 April 2020** there are **216 active cases**, and:
 - **1,129** confirmed cases and **347** probable cases, totalling **1,476** combined confirmed and probable cases.
 - **Three** new confirmed cases and **one fewer** probable cases have been reported in the last 24 hours. **The new probable case from 29 April has been reclassified as 'not a case' as a result of new information gathered by the Medical Officer of Health yesterday, reducing total probable cases to 347.**
 - **1,241** recovered cases (up **12** in the last 24 hours)
 - and **19** deaths (no change in the last 24 hours).

10. See the figure below for the epidemic curve of daily confirmed and probable cases by date of report.



11. At 0900 hours on **30 April 2020** there are 156 cases (11% of all confirmed and probable cases) who are health care workers. Of these, **72%** have recovered.

12. As at 0900 hours on **30 April 2020** there are 16 significant clusters of 10 or more confirmed and probable cases (no change in the last 24 hours) under investigation by public health officials throughout the country. **One of the 16 significant clusters is considered closed. A cluster is considered closed (there is no longer transmission of the virus within or associated with the cluster), after a total of 28 consecutive days – or two incubation periods for the virus – since the most recent onset date of a reported case.**

13. The largest clusters are in Auckland, Southern, and Waikato DHBs. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases/covid-19-clusters>
14. As at midnight on **29 April 2020**, there were **seven** people in hospital with COVID-19, **one more than the day before**. Of those in hospital, none are in an intensive care unit (ICU). For further details, see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#dhbhosp>

Health sector response

15. Effective from 30 January 2020, novel coronavirus capable of causing respiratory illness was made a notifiable infectious disease under the Health Act 1956. It became a quarantinable disease on 11 March 2020.
16. At Alert Level 3,
 - services will open and operate normally where possible, while managing public health risks;
 - strict hygiene measures and physical distancing measures will remain in place,
 - infection prevention and control principles must be adhered to across the system,
 - testing for COVID-19 will continue at community-based assessment centres (CBACs), designated practices, and some general practices.
17. Information on how to access health and disability services at Alert Level 3 is available on our website here: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/health-and-disability-services-alert-level-3>

Lab testing

18. As at 0900 hours on **30 April 2020** there are 79 Community Based Assessment Centres (CBACs) active and 88 designated practices/swabbing centres/mobiles.
19. A total of **5,867** tests were done on **29 April 2020**. **The daily test average is now 4,756 and New Zealand has 14 days stock on hand at this level. The test positivity rate is 0.10% (average for week ending 28 April 2020). 134,570 tests have been completed to date.**
20. For further details see: <https://www.health.govt.nz/our-work/diseases-and-conditions/covid-19-novel-coronavirus/covid-19-current-situation/covid-19-current-cases#lab>
21. Over the weekend 70,000 of swabs arrived from overseas, however the flight was diverted from Auckland to Christchurch. **These 70,000 swabs are due into Auckland on 30 April 2020.** Bulk stocks have been exhausted, however there are **over 100,000 swabs** in circulation currently. A further 200,000 swabs are expected to arrive in New Zealand **early next week**.

National Close Contact Service (NCCS) contact tracing

22. 20 close contacts were contacted on 29 April 2020 and 7,981 close contacts traced since 24 March (when the Ministry of Health picked up contact tracing from individual public health units at DHBs).

National Telehealth service (NTS)

23. On 29 April 2020, 6,146 calls were answered/outbound calls made (compared to 803 on the same day last year).
24. The demand on 1737 and other mental health services was 37% higher than expected based on last year.
25. The top themes were
 - people are continuing to delay access to primary for non-COVID symptoms, as evidenced by the general practice referral rate running 13% higher than expected and self-care is 13% down. However, ED and 111 referrals have normalised over the last few days.
 - outbound welfare checks to those in managed isolation are finding that people are generally coping okay. However, the quantity of food being served remains an issue.
 - people continue to be concerned about border control. Yesterday Healthline had a strong feedback from the public regarding Cabin Crew not having to isolate.

Surveys

26. Between the 30 March and 26 April, 7,973 people who had previously been interviewed as part of the New Zealand Health Survey were interviewed in a new COVID-19 Health and Wellbeing Survey. New Zealand has been on Level 4 for the duration of this survey. There will be some sample biases.
27. The Ministry of Health's COVID-19 Health and Wellbeing Survey found that
 - 30% of adults (15+ years) have applied, or their employer has applied on their behalf for government financial support in the week ending 26 April. This includes COVID-19 Wage subsidy, COVID-19 Leave payment or other government financial support.
 - 7% of adults reported that they had lost their main source of income due to COVID, compared with 13% in the week ending 5 April.
28. The Health Promotion Agency ran a survey on alcohol, tobacco and gambling use during the COVID-19 Level 4 lockdown, on 21 April. It found that, of those respondents who have drunk in the last 4 weeks, one in five report drinking more than usual. Increased drinking is more prevalent among 25-49-year olds. The majority of those who are drinking more say it is to help them relax or switch off.

For the full report, see: <https://www.hpa.org.nz/research-library/research-publications/the-impact-of-lockdown-on-health-risk-behaviours>

New Zealand border response

29. Currently, only New Zealand residents and citizens (and their children and partners) are permitted to enter New Zealand. This includes the Realm countries, Australian citizens and permanent residents ordinarily resident in New Zealand. There can be exceptions on a case by case basis, for example for essential health workers or for humanitarian reasons. There is also a ban on the entry of cruise ships to New Zealand's territorial waters. Air and marine crew (including positioning crew) who have taken appropriate infection control and PPE measures are exempt to keep air and sea routes open for imports and exports, including essential supplies. Health officials have reviewed the risks from aircrew coming to New Zealand. Consultation with the border sector, airline and airport representatives on revised exemptions for airline crew is **currently underway**.
30. New Zealand Customs data recorded **nil** people arriving in New Zealand on **29 April 2020**. All passengers arriving in New Zealand are disembarked in small groups from aircraft and met by Government officials at the gate. Everyone is screened for COVID-19 infection or contact on arrival. If a passenger has COVID-19 symptoms, they are tested for COVID-19 and placed in an approved isolation facility for 14 days or until they have been symptom-free for at least 48 hours, whichever happens later. If a passenger does not have COVID-19 symptoms on arrival, they are transported to a managed quarantine facility where they must stay for at least 14 days. Passengers will have further information provided to them on what will happen after the 14 days isolation period, including transport arrangements to their final destination.
31. Health exit measures for travellers leaving New Zealand to travel to the Pacific are in place at airports with flights to Pacific Island nations. Travellers have their temperatures taken and are asked if they have had contact with a confirmed or suspected case of COVID-19. They are also asked about any recent international travel. Any travellers who fail to meet the public health criteria will be prevented from boarding the flight. Requests are being received for exit measures for travellers to other countries. Work is continuing to develop proposals for exit measures that can be applied at all airports, for all passengers, all airlines and all destination countries.
32. Ministry of Health is currently working with border agencies on two cabinet papers - a future border settings paper and a paper on the restrictions at the maritime border. **These will inform the border response and planning going forward.**

Global situation

33. As reported by the WHO on **29 April 2020**, globally there have been **(66,276)** new confirmed cases (**3,018,952** confirmed cases in total) and **5,376** new deaths reported (**207,973** deaths in total). For further details see: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/situation-reports/>

APPENDICES

APPENDIX 1: RISK ASSESSMENT

New Zealand risk assessment as of 3 April 2020

34. Importation risk: Even with the containment measures in place in other countries and the border measures currently in place in New Zealand, the likelihood of cases having been imported into New Zealand remains HIGH. There also remains a HIGH likelihood of further returning travellers, due to high rates of infection worldwide.
35. Risk of transmission within New Zealand: Most cases in New Zealand to date are linked to international travel and subsequent close contact, there is accumulating evidence of limited community transmission but at this time no evidence of widespread sustained community transmission in New Zealand.
36. Based on the current domestic situation, the global situation, the available evidence, including limited evidence of pre-symptomatic spread and super spreader events the likelihood of limited transmission in New Zealand is VERY HIGH, the likelihood of sustained transmission is MODERATE-HIGH and the likelihood of widespread outbreaks is LOW-MODERATE. This assessment assumes that cases are detected in a timely manner and that infection prevention and control measures are implemented promptly.
37. However, if the virus is not rapidly detected, infection control measures are not in place, or if there is significant transmission from asymptomatic or mild cases, the likelihood of further transmission in community settings would be considered VERY HIGH.
38. Public health impact: The impact on the sector and the public from this emerging issue and preparedness work for COVID-19 is already significant. The public health impact is considered HIGH both for public health staff, the wider health sector and the community.
39. Public health risk: Given the assessment of the likelihood of importation, the likelihood of transmission in New Zealand and the public health impact, the overall public health risk from this event is considered HIGH.

Global risk assessment

40. The WHO's risk assessment of the situation is very high at the global level.
41. The European Centre for Disease Prevention and Control (ECDC) issued an updated risk assessment on 23 April 2020:
 - The risk of severe disease in the EU/EEA and UK is currently considered **low** for the general population in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced and/or maintained at low levels.

- The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for the general population in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing
- The risk of severe disease in the EU/EEA and UK is currently considered **moderate** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are in place and/or where community transmission has been reduced or maintained at low levels.
- The risk of severe disease in the EU/EEA and UK is currently considered **very high** for populations with defined factors associated with elevated risk for COVID-19 in areas where appropriate physical distancing measures are not in place and/or where community transmission is still high and ongoing.
- For the detailed risk assessment see:
<https://www.ecdc.europa.eu/en/threats-and-outbreaks/reports-and-data/risk-assessments>

APPENDIX 2: WELFARE

42. The All of Government Welfare Number, 0800 779 997 is available 7 days a week. This provides welfare information and support for individuals in self-isolation.
43. The National Emergency Management Agency (NEMA) Welfare Team is operating as both the Welfare function lead in the National Health Coordination Centre (NHCC) and as the Welfare Pillar lead coordinator for the COVID-19 response.
44. NEMA has convened regular National Welfare Coordination Group (NWCG) meetings to discuss COVID-19 and share information between Welfare Services Agencies. Welfare sub-functions have been meeting as needed.

APPENDIX 3: Psychosocial Coordination

45. A dedicated team oversees the psychosocial aspect of the welfare.
46. A national psychosocial response plan has been developed for this specific event, it is part of Ministry strategic plan for COVID-19 and will be circulated to the NHCC and sector.
47. A NHCC Psychosocial inbox has been established as a central location for all psychosocial and mental health and addiction inquiries, internal and external (NHCC_psychosocial@health.govt.nz).

NHCC Contact Information:

National Coordinator s 9(2)(a)	NHCC_NationalCoordinator@health.govt.nz
Response Manager s 9(2)(a)	NHCC_ResponseManager@health.govt.nz
Operations Border	NHCC_OpsBorder@health.govt.nz
Operations s 9(2)(a)	NHCC_Operations@health.govt.nz
Logistics s 9(2)(a)	NHCC_InternalLog@health.govt.nz
Public Information Management (PIM)	NHCC_PIM@health.govt.nz
Intelligence s 9(2)(a)	NHCC_Intelligence@health.govt.nz
Planning s 9(2)(a)	NHCC_Planning@health.govt.nz
Welfare	NHCC_Welfare@health.govt.nz
Psychosocial	<u>NHCC_Psychosocial@health.govt.nz</u>
National isolation team public email	<u>MI_Exemptions@health.govt.nz</u>
National isolation team	NHCC_National_Isolation@health.govt.nz

The NHCC continues to operate 7 days per week.

The next SitRep will be at 1400 hours on **1 May 2020**.

Prepared by: Bridget Murphy and Li-Chia Yeh, NHCC Intelligence

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