



BRIEFING

Large scale self-isolation for travellers to New Zealand – design of self-isolation model

Date:	10 November 2021	Priority:	High
Security classification:		Tracking number:	MBIE: 2122-1563 MoH: 20212434

Action sought		
	Action sought	Deadline
Hon Chris Hipkins Minister for COVID-19 Response	Agree in principle to initial operational settings for a large-scale self-isolation approach for travellers to New Zealand	16 November 2021
	Note that further advice will be provided in November to the Reconnecting New Zealanders Ministerial Group, including public health settings, before a report back to Cabinet in December	

Contact for telephone discussion (if required)			
Name	Position	Telephone	1st contact
Kara Isaac	General Manager – Policy, MIQ	Privacy of natural persons	✓
Bridget White	Deputy Chief Executive- COVID-19 Health System Response		✓
Privacy of natural persons	Senior Policy Advisor, MIQ Policy		

The following departments/agencies have been consulted
Department of Prime Minister and Cabinet, NZ Customs, Immigration, Crown Law

Minister's office to complete:

- | | |
|---|--|
| <input type="checkbox"/> Approved | <input type="checkbox"/> Declined |
| <input type="checkbox"/> Noted | <input type="checkbox"/> Needs change |
| <input type="checkbox"/> Seen | <input type="checkbox"/> Overtaken by Events |
| <input type="checkbox"/> See Minister's Notes | <input type="checkbox"/> Withdrawn |

Comments

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Purpose

To update you and seek your agreement in principle on the direction of large-scale self-isolation for travellers to New Zealand as the medium-risk pathway under the Reconnecting New Zealanders framework, including likely settings and key implementation questions which are still to be resolved.

Executive Summary

As part of the Reconnecting New Zealanders with the World strategy, international travellers self-isolating is intended to become one of the primary ways that people enter New Zealand from early 2022. This approach for medium-risk travellers will complement low- and high-risk pathways, as part of the risk-based approach to international arrivals Cabinet has agreed to adopt.

This represents a significant change in both approach and scale, reflecting the change in the balance of public health risks as our COVID-19 response evolves. This is driven particularly by rapidly increasing vaccination rates and availability both in New Zealand and around the world, and the changed New Zealand context of moving away from the elimination strategy to the COVID-19 Protection Framework.

To meet the Government's ambitions for large-scale self-isolation, officials recommend a high-volume, high-trust model. This reflects both:

- a proportionate response which will appropriately match the changing public health risks that fully vaccinated international travellers present to the New Zealand community (including a community that COVID-19 is already present in) when implemented, assuming that the Delta variant continues to be the main variant of concern shaping our COVID-19 response throughout 2022; and
- the need for any model to be scalable to support significantly larger volumes of travellers than have been able to enter New Zealand previously during our COVID-19 response.

Officials seek agreement in principle to a number of low- and no-touch operational approaches for large-scale self-isolation, to inform further implementation planning.

Recommended action

The Ministry of Business, Innovation and Employment and the Ministry of Health recommends that you:

- a **Note** that in on 9 August 2021 Cabinet agreed to shift border settings to a risk-based approach, based on three entry pathways [CAB-21-MIN-0305 refers]

Noted
- b **Note** that Cabinet is currently considering further advice on the implementation of the medium-risk pathway, including a staged approach to progressively open to groups of travellers starting with New Zealand citizens and residents outside of higher-risk countries [SWC-21-SUB-0176 refers]

Noted
- c **Note** that the Government has announced that from Q1 2022 self-isolation will become a primary way that medium-risk travellers enter New Zealand

Noted
- d **Note** that, in line with the Government's Reconnecting New Zealanders with the World strategy and the COVID-19 Protection Framework, once New Zealand reaches sufficient levels of vaccination the medium-risk pathway will provide a proportionate response to manage the public health risk of these travellers while enabling significantly larger volumes of travellers to enter New Zealand

Noted
- e **Agree** that large-scale self-isolation will operate as the medium-risk pathway, available to travellers in line with Cabinet's pending decisions on the timing and application of the medium-risk pathway [SWC-21-SUB-0176 refers]

Agree / Disagree / Discuss

Design principles

- f **Agree** that, based on initial high-level estimates for the medium-risk pathway, large-scale self-isolation must be able to accommodate at least 20,000 travellers per week during Q1 2022, rising to up to 66,000 arrivals per week by Q3 2022

Agree / Disagree / Discuss
- g **Agree** that any measures included in large-scale self-isolation in a medium-risk pathway should be proportionate to the public health risk presented by medium-risk travellers

Agree / Disagree / Discuss
- h **Note** that, in order to accommodate the required number of travellers while adhering to public health requirements and avoiding placing undue impacts on the public health workforce, self-isolation will therefore be a high-trust, low-intervention model

Noted

Noted

Public health settings for large-scale self-isolation

- i **Note** that the Ministry of Health will report back to the Reconnecting New Zealanders Ministerial Group later in November 2021 on the final recommended public health settings for self-isolation under the medium-risk pathway

Noted

Noted

- j **Note** that if any testing requirements are considered, it will need to take into account the expected volumes of travellers that large-scale self-isolation will need to accommodate and the impact of this volume on existing testing workforce and infrastructure

Noted

Operational settings for large-scale self-isolation

- k **Agree** that, subject to final advice on the public health settings for self-isolation under the medium-risk pathway, large-scale self-isolation should be designed with the following features:
- i. limited to travellers who meet vaccination requirements
Agree / Disagree / Discuss
 - ii. limited to travellers who provide evidence of a negative pre-departure test prior to departure
Agree / Disagree / Discuss
 - iii. require all travellers to provide relevant prior travel history and all required information, including contact details, prior to entering self-isolation
Agree / Disagree / Discuss
 - iv. no limitations or requirements on how people travel from their arrival airport to their location of self-isolation;
If rapid testing on arrival can be operationalised then this might be OK Agree / Disagree / **Discuss**
 - v. no limitations or requirements on where people may undertake their self-isolation
Further consideration needed for things like boarding hostels, backpackers etc Agree / Disagree / **Discuss**
 - vi. no limitations or requirements on who else may be present in the premises while a person is undertaking self-isolation
If this is the case there is little point in self-isolation. This should be limited to those normally resident at the same address. Agree / Disagree / **Discuss**
 - vii. limited (traveller-initiated) in-premises welfare support for people undertaking their self-isolation, focused on highlighting existing community services to travellers
Agree / Disagree / **Discuss**
 - viii. no requirements for active monitoring or enforcement of traveller compliance with self-isolation requirements
A light touch monitoring solution, preferably using technology, would be preferred. Agree / Disagree / **Discuss**
- l **Note** that technology-based solutions can aid, but cannot automate, enforcement of self-isolation requirements, and so do not provide viable avenues to service self-isolation at the scale required without a significant, nation-wide workforce to support it

Discuss

Noted

- m **Note** that travellers arriving from very high risk countries are not intended to be permitted to self-isolate at this time, and further advice on these travellers will be provided separately

Noted

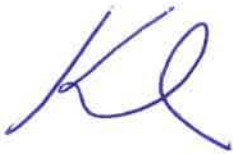
Implementation

- n **Note** that officials are working to have large-scale self-isolation available from Q1 2022, in line with timeframes set out in the Reconnecting New Zealanders with the World strategy

Noted

- o **Note** that between the start of large-scale self-isolation, and the launch of the first phase of the Traveller Health Declaration Service in late Q1 2022, there will be a period during which a high-trust approach will have to be taken to traveller vaccination status
Noted
- p **Note** that officials will provide further advice on necessary measures to manage the risk of unvaccinated travellers reaching New Zealand intending to self-isolate during this period
Noted
- q **Note** that a recommendation on the appropriate agency to lead delivery of large-scale self-isolation will be included in joint advice to Reconnecting New Zealanders Ministers later in November 2021
Noted
- r **Note** that further advice will include recommendations on any appropriate exemptions regime from self-isolation
Noted
- s **Agree** that this briefing be proactively released with appropriate withholdings under the Official Information Act 1982

Agree / Disagree



Kara Isaac
General Manager, MIQ Policy
MIQ, MBIE

15 / 11 / 2021



Dr Ashley Bloomfield
Director General of Health, Ministry of Health

10 / 11 / 2021

I'd like to see more advice on use of rapid tests on arrival, and take-home tests for people to use during their self-isolation. CH



Hon Chris Hipkins
Minister for COVID-19 Response

17 / 11 / 2021

Context

New Zealand's COVID-19 response is changing towards the COVID-19 Protection Framework

1. New Zealand's response to COVID-19 is rapidly changing, moving from the elimination strategy towards a vaccination-led response through the COVID-19 Protection Framework.
2. This change in both overall approach and the domestic response is reflected in our border settings. Changes which have recently been agreed include:
 - a. Reducing the length of stay in MIQ from 14 days to 7 days in MIQ, along with 3 further days of self-isolation, from 14 November 2021 [Health Report HR20212360 refers];
 - b. expanded one-way quarantine-free travel to eligible travellers from Samoa, Tokelau, Tonga and Vanuatu on the low-risk pathway from 8 November [Health Report HR20212360 refers]; and
 - c. The commencement of the self-isolation pilot (run between October and December 2021), allowing a small number of business travellers to and isolate at home rather than requiring MIQ.
3. These changes are occurring alongside the evolving response to the community outbreak in New Zealand. Rapidly increasing levels of vaccination and the ongoing community outbreak are both driving and enabling new response options (e.g. increased use of home isolation for low risk community cases), but also changing the comparative risk profile of international arrivals.
4. On 9 August 2021, Cabinet agreed to shift border settings to a risk-based approach, based on three entry pathways [CAB-21-MIN-0305]. As part of this approach, it is proposed that the medium-risk pathway would include self-isolation and testing requirements.
5. This medium-risk pathway will provide an intermediate step, with the capacity to allow for the staged growth of traveller volumes while still protecting public health, starting with New Zealand citizens and residence-class visa holders from all but higher-risk countries [SWC-21-SUB-0176 refers].
6. The proposed approach for Reconnecting New Zealanders aims to ensure that the risk of cases entering New Zealand via international travel can be readily managed domestically through the Framework. This means keeping overall risk at the border within a manageable level, in order to minimise the risk of overwhelming the health system and to ensure that systems and processes can support the reconnecting approach.
7. On 28 October 2021 the Government announced that from Q1 2022, self-isolation will become the primary way for New Zealanders to enter the country. This change is to follow the successful start of the full COVID-19 Protection Framework, after reaching appropriate domestic vaccination milestones, and presumes no other significant changes to the COVID-19 response (e.g. no new COVID-19 variants of concern which require a change in approach) over that time.
8. Cabinet is due to consider further detailed proposals on how this proposal delivers on the Reconnecting New Zealanders with the World framework [SWC-21-SUB-0176 refers].

The proposed approach to self-isolation

9. Large-scale self-isolation as a medium-risk pathway will, by its nature, need to be a light-touch intervention. This approach is driven by two complementary factors.

Proportionate to the public health risk

10. Any intervention (and interventions collectively) for medium-risk travellers should be a proportionate response to the level of public health risk they pose to the New Zealand community.
11. Large-scale self-isolation is expected to operate in the context of very high levels of vaccination rates (for both incoming travellers and the wider New Zealand community), as well as the expected presence of COVID-19 in the community. In this context, more restrictive or intensive public health interventions may not be a proportionate response to the lower risk posed by these travellers.
12. This sense of proportionality is important for two reasons:
 - a. First, to ensure that the limited resources of New Zealand's COVID-19 response, in particular the health workforce, is focused on interventions that create the greatest gain, or greatest reduction in public health risk;
 - b. Second, reserving stricter requirements for areas where there is a compelling public health reason for requiring them will help ensure that large-scale self-isolation does not create artificial inequities, by preventing travellers who would otherwise be able to enter New Zealand through this pathway from doing so only because they cannot afford to meet specific requirements (e.g. access to a particular level of personal electronic device or a separate residential property).

Capable of being significantly scaled up

13. To meet Ministers' expectations for how the medium-risk pathway can facilitate the reconnection of New Zealanders with the world, any intervention for medium-risk travellers must also be capable of being scaled up to significantly larger volumes of travellers than have thus far been able to be accepted into New Zealand.
14. While further modelling is underway, initial high-level estimates¹ provided for the Reconnecting New Zealanders work estimate that, on the currently proposed reopening steps, approximately 20,000 travellers per week may use a medium-risk pathway in Q1 2022 with the first proposed step of the medium-risk pathway, growing to up to 66,000 travellers per week by Q3 2022 under the third step.
15. These volumes are expected to be demand-driven, based on the proposed staged opening of the medium risk pathway. This includes New Zealand citizens and residents (stage one), travellers from Australia (stage 2), and a range of temporary visa holders including visitors, Working Holiday and student visa holders (stage 3) [SWC-21-SUB-0176 refers].
16. Experience from designing and operationalising the self-isolation pilot, as well as insights drawn from the Customs-led Future Borders sprints highlight that delays, interactions or inputs which may appear minor when applied to an individual traveller will create a significant impact (for example, on the workforce required to operationalise them or the flow of travellers through an airport) when applied across large groups of travellers.
17. Given this challenge, to enable large-scale self-isolation to operate at this scale currently intended, any intervention must either require little/no human interaction with the traveller, be able to be completely automated, or be required by a clear, specific and proportionate public health risk to justify a significant workforce requirement.

¹ Generated by DPMC, in consultation with MBIE Immigration policy, using pre-COVID-19 airport arrival data.

Design of large-scale self-isolation

Public health settings for large-scale self-isolation

18. The Ministry of Health and MIQ will report back to the Reconnecting New Zealanders Ministerial Group in November 2021 to provide final recommended public health settings for large-scale self-isolation under the medium-risk pathway.
19. In particular, this advice will inform final settings on:
 - a. a requirement for the minimum period of time of self-isolation;
 - b. requirements, if any, before travellers may be permitted to end their self-isolation period;
 - c. requirements, if any, of potential COVID-19 testing regimes, including potentially both self-administered Rapid Antigen and potentially saliva based PCR tests.
20. In addition to public health advice on an effective frequency and mode of COVID-19 testing, if any is required, the development of this regime will need to consider the ability to scale up such testing to meet the anticipated volumes without unduly impacting existing public health workforce and infrastructure. In line with current volume projections, each test that a self-isolating traveller is required to undertake will add 20,000 to 66,000 COVID-19 tests per week which require processing by testing infrastructure.
21. International arrivals who develop COVID-19 symptoms during their period of self-isolation are expected to be supported through normal processes for those developing symptoms in the community.

Operational settings for large-scale self-isolation

22. While the final public health advice may further inform other operational settings, there are a number of operational settings which can be agreed in principle now.
23. These measures are subject to final confirmation following the confirmed public health advice, which will enable officials to assess and provide advice (including seeking Bill of Rights advice) on both the individual measures that are recommended, as well as considering the proportionality of the settings as a collective whole.
24. The assessments provided below are based on the current health advice, and current view of the expected context that the medium-risk pathway will operate under.

Fully vaccinated

25. Vaccinated travellers pose a lower risk because of their decreased likelihood of catching COVID-19 in transit, and lower levels of transmission. This reduces their risk to a level where self-isolation is commensurate to their public health risk.
26. On this basis, all adult travellers² seeking to use self-isolation should be required to provide acceptable evidence of full vaccination, with a COVID-19 vaccination that is included in the Director General of Health's Gazette notice of acceptable vaccines for the Air Border Order vaccination requirement.
27. Officials note that from 1 February 2022, Air New Zealand will require all travellers 18+ years of age on their international services to be fully vaccinated.

² It is currently proposed to Cabinet that children travelling with their adult guardians will enter the same risk-based pathway as the adults they are traveling with [SWC-21-SUB-0176 refers].

28. Considerations around verifying this status are discussed below from paragraph 44.

Pre-departure testing

29. In line with the current pre-departure test (PDT) requirements regime, all travellers seeking to use self-isolation should be required to provide evidence of an acceptable negative PDT.

30. It is anticipated that this requirement will align with the current PDT regime for travellers to New Zealand, including both destinations that New Zealand does not require a PDT for travellers from, and verification of PDT prior to departure.

Travel history and required information

31. All travellers seeking to use self-isolation should be required to declare relevant prior travel history and all required information, including contact details, via the appropriate mechanism (eg the Nau Mai Rā online traveller declaration prior to arrival, or via a bespoke online booking portal (see below from paragraph 49)).

Location and premises for self-isolation

32. It is recommended that large-scale self-isolation will not include any restrictions on the location or types of premises that a traveller may self-isolate in. Any such restrictions would create both equity concerns and significant workforce impacts, both of which are likely to be disproportionate to any reduction in public health risk.

33. This proposal is in line with the approach taken for self-isolation following release from the shortened 7 day MIQ stay.

Travel to self-isolation

34. It is recommended that large-scale self-isolation will not include any restrictions on how travellers get from the airport to the premises where they will self-isolate, outside existing public health measures already designed to proportionately address any risk. Any such restrictions would create both equity concerns and significant workforce impacts, likely to the point that it would not be possible to operationalise large-scale self-isolation that includes significant restrictions on how travellers transfer to their place to self-isolation.

Other household members

35. It is recommended that large-scale self-isolation will not include any restrictions on other people in the household – either their presence or requiring them to self-isolate themselves. Any such restrictions would create significant barriers to uptake, as well as significant workforce impacts to enforce, and are likely to be disproportionate to any reduction in public health risk.

36. This proposal is also in line with the approach taken for self-isolation following release from the shortened 7 day MIQ stay.

Welfare support for self-isolating travellers

37. It is recommended that large-scale self-isolation will not include any active support for, or monitoring of, the welfare needs of travellers during their self-isolation period. Supporting such measures at the scale required will pose a significant workforce impact, which is likely to be disproportionate to any reduction in public health risk from reducing the chance of travellers failing to comply with self-isolation requirements to meet welfare needs.

38. Further consideration will be given to directing travellers towards resources that they can access through existing community services that can be accessed remotely (e.g. Healthline). This mirrors the approach recommended for travellers self-isolating under the current short-stay MIQ model.

39. Officials note that this approach is for travellers who are self-isolating, and is distinct from health and welfare support that is provided to individuals who test positive for COVID-19 and are medically assessed as being able to safely and appropriately isolate at home. Such individuals will continue to receive appropriate support under the care in the community model.

Active enforcement and monitoring is not recommended due to workforce constraints

40. It is recommended that large-scale self-isolation will operate on a high-trust basis, and therefore will not include active monitoring or enforcement of traveller compliance.
41. This will align with the low-intervention, high trust approach recommended for other settings, reflecting the significantly lower public health risk medium-risk travellers will represent.
42. It also reflects the significant workforce impact that any enforcement or monitoring regime will require. Even reactive, random or intelligence-led enforcement, while comparatively light touch for each individual traveller, will require a significant workforce to operationalise to be able to support the anticipated traveller volumes of more than 20,000 travellers per week. Such a workforce is not currently available or could be stood up quickly.

Technology-aided monitoring and enforcement does not offer an effective solution

43. Officials have considered whether technology solutions could be used to enable effective monitoring and enforcement at this scale, drawing on both exploratory work done as part of the development of the self-isolation pilot and experiences in other similar jurisdictions, including Singapore, New South Wales and South Australia.
44. Technology, such as app-based solutions, can significantly automate and streamline monitoring procedures, for example enabling more effective remote-checking, such as the Singapore model which combines video calls and GPS location confirmation to ensure travellers are self-isolating in the location required. Alternatively, monitoring could be entirely automated, with human intervention only required when an unexpected result (e.g. the traveller not responding to a location confirmation request or upon response not appearing to be in their home) is returned, similar to the South Australian approach.
45. While these approaches offer significant gains in the efficiency of monitoring and enforcement, they still ultimately require human interaction to confirm a breach and take enforcement action. Even if carried out remotely the challenge of the size of workforce required to support the anticipated large scale of travellers self-isolating makes these approaches unfeasible in our context.
46. For comparison, both New South Wales and South Australia only operated monitored self-isolation on a limited scale. For example, the South Australia home quarantine pilot was initially operated with only 50 participants, and later expanded to 250 households. The New South Wales programme, which was announced in mid-September 2021, was abandoned in favour of allowing fully vaccinated travellers to arrive quarantine free from 1 November 2021.
47. A technology-enabled solution will also limit the types of travellers able to use self-isolation, as it would be dependent on cellular coverage or internet connectivity at the places where travellers self-isolate and travellers would need to have the appropriate personal devices. This would particularly disadvantage travellers seeking to self-isolate outside the main centres, or parts of the community who do not own appropriate personal electronic devices. Other jurisdictions that have successfully used technology to support self-isolation, such as Singapore, do not face the same geographical challenges that New Zealand does.

48. Overall, while technology can offer options to supplement and increase the efficiency of monitoring and enforcement of self-isolation requirements, it does not present a realistic way to operationalise self-isolation in the New Zealand context in a way that is proportionate to the public health risk. However, such technical solutions (and the workforce that would support them) may present other opportunities to enhance the support provided to positive COVID-19 cases who are isolating in the community.

Additional implementation issues

Approach to traveller registration and travel vouchers

49. Further work is required to confirm and design the customer journey for travellers looking to use self-isolation, in particular how they will register to use self-isolation and any travel documentation they may be issued.
50. Currently, almost all travellers to New Zealand must hold a MIAS voucher, confirming they have an allocated space in MIQ. Some equivalent booking or registration process – and proof of permission to travel – will be required to support large-scale self-isolation, to continue to ensure that all travellers (outside of QFT arrangements) have a safe pathway (whether self-isolation or MIQ) into the country before they travel to New Zealand.
51. An equivalent system of registration will also provide border agencies with vital information on expected arrivals to maintain capacity planning, by understanding the expected numbers of arrivals each day and the entry pathway they expect to use.
52. Some scoping work has been undertaken on how such a booking system would function, including through the Future Borders work and Reconnecting New Zealanders workstreams, including a recognition that any process to determine entry pathways will need to interface with MIQ systems. While there are potential platforms which could host this service, including the THDS and existing MIAS booking platform, at this time this functionality is not included in either the existing MIAS platform or the planned THDS functionality.
53. It is not envisaged that such a system would operate to limit the volume of people permitted to travel and self-isolate on arrival. As well as practical considerations of how this would operate in a fair and transparent manner, careful consideration would be needed for if or how a volume constraint could be justified, absent the limited capacity underpinning the current MIQ booking system.
54. Developing such functionality will likely require development of supporting business processes, information sharing between agencies (including appropriate privacy safeguards for personal information which needs to be exchanged), as well as core IT development. Whatever platform is chosen to host this functionality will likely require trade-offs with existing development priorities.
55. This work cannot move beyond the scoping stage until a lead agency to operationalise large-scale self-isolation is confirmed (discussed below from paragraph 65).

Verifying vaccination status

Vaccine status verification will primarily be through the Customs-led Traveller Health Declaration System

56. To enforce the requirement that all travellers seeking to self-isolate must be fully vaccinated, a system to validate that travellers meet this requirement **before** they travel to New Zealand is required. At this time no system exists to provide this verification in a reliable and uniform manner, instead depending on manual and high-trust measures.

57. It is currently anticipated that the THDS will be able to provide this functionality, starting with initial functionality and coverage of countries of origin by the end of Q1 2022.³
58. For countries outside this initial coverage, a manual solution will initially operate, although further work is required to confirm that the likely capacity of this system will be sufficient to process bookings from travellers vaccinated in countries not initially covered by the THDS.

The Reconnecting New Zealanders strategy anticipates large-scale self-isolation starting before THDS is available, which will carry significant risk

59. However, in line with the time-frames timing proposed in the *Reconnecting New Zealanders with the World: Moving forward with the approach* Cabinet paper, currently due to be considered by Cabinet, officials are working towards being able to implement large-scale self-isolation in Q1 of 2022.
60. Therefore, there is likely to be a brief period (perhaps 6-8 weeks) between the start of self-isolation and THDS becoming available. Over this time there will be no way to independently verify the vaccination status of travellers before they reach New Zealand, and a high-trust approach will be necessary during this period.
61. This could potentially mirror the approach applied to checking the vaccination status of non-New Zealand citizens before they travel currently employed, but further work would be required with external stakeholders, in particular airline operators, to understand the operational implications of such an approach if it was to become necessary.
62. However, given the much larger numbers of travellers anticipated, a high-trust approach carries significant risk. Even if only a small proportion of travellers were found on arrival to be ineligible for self-isolation, this could quickly surpass the ability of MIQ to accommodate these travellers within any reasonable contingency, or result in large numbers of MIQ rooms held in contingency and then not used.
63. This risk is however mitigated by Air New Zealand's announced intention to require all travellers on their international services 18 years of age and over to be fully vaccinated by 1 February 2022. Other airlines that service New Zealand following this approach may further mitigate this risk.
64. As part of further implementation planning, officials will prepare further advice on how to mitigate this risk, including appropriate ways to triage individuals who arrive without acceptable evidence of vaccination status and necessary MIQ contingency capacity.

A decision is required on the lead operational agency for self-isolation

65. As part of further implementation planning, a decision is required on the lead agency to operationalise a large scale self-isolation approach.
66. The final mix of interventions recommended by public health advice those recommended in this briefing will need to inform this decision.
67. A decision soon on a lead operational agency would allow work to commence on a customer-facing booking/registration system in particular.
68. Following your direction on the recommendations in this paper, the Chief Executives of MBIE and Ministry of Health intend to resolve the appropriate lead agency to deliver this work at an appropriate cross-government CEs forum, and a recommendation on the appropriate lead agency will be included in the joint advice provided to Reconnecting New Zealanders Ministers later in November 2021.

³ Covering vaccination certificates issued by New Zealand, Australia, and EU-DCC countries (which includes other trusted 3rd countries, such as the United Kingdom).

Funding

69. Depending on the final scope of the large-scale self-isolation model, and lead implementation agency, it is likely that there will be ongoing resource implications to deliver the pathway. Further advice will be provided following these decisions.

Exemptions

70. Following your direction on the broad design of large-scale self-isolation, further advice will be provided on any exemptions regime which is necessary to complement the self-isolation requirements. This will include requirements that it may be appropriate to exempt specific travellers from in certain circumstances, and the most appropriate way to operate such a regime.

Next steps

71. Officials will continue to develop detailed implementation plans for a large-scale approach to self-isolation, in line with your decisions on this paper.
72. MBIE (MIQ) and the Ministry of Health are available to meet to discuss this briefing further.
73. The Ministry of Health and MIQ will report to the Reconnecting New Zealanders Ministerial Group later in November 2021 with further advice on the public health settings and design of large-scale self-isolation.
74. This advice will include confirmed public health settings for large-scale self-isolation, considering these settings both on an individual basis and as a collective package relative to the public health risk at the border. This will also include advice from Crown Law on any potential Bill of Rights issues, and how the proposed measures comply with the rights and freedoms of New Zealand citizens.
75. Following that advice, and your decisions on this briefing, officials will prepare final advice to seek Cabinet approval to the implementation of large-scale self-isolation.