MINISTRY OF BUSINESS, INNOVATION & EMPLOYMENT
HĪKINA WHAKATUTUKI

BRIEFING

Self-Isolation Pilot Evaluation Report: arriving and transferring to self-isolation.

Date:	7 December 2021	**Priority:**	Medium
Security classification:		**Tracking number:**	2122-2118

Action sought		
	Action sought	**Deadline**
Hon Chris Hipkins **Minister for Covid-19 Response**	**Note** the attached evaluation report **Agree** to distribute to Reconnecting New Zealanders Ministerial Group	8 December 2021

Contact for telephone discussion (if required)				
Name	**Position**	**Telephone**		**1st contact**
Christina Sophocleous Jones	General Manager Self-Isolation Pilot	Privacy of natural persons		✓
Privacy of natural persons	Principal Advisor Policy			

The following departments/agencies have been consulted

Minister's office to complete:

- ☐ Approved
- ☐ Noted
- ☐ Seen
- ☐ See Minister's Notes
- ☐ Declined
- ☐ Needs change
- ☐ Overtaken by Events
- ☐ Withdrawn

Comments

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Self Isolation Pilot Evaluation Report: arriving and transferring to self-isolation.

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Purpose

This briefing provides you with the second Evaluation report for the Self-Isolation pilot, covering the airport arrivals and transfer to Self-Isolation.

Recommended action

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

a **Note** this second report from the evaluation of the Self-Isolation pilot considers the arrivals processes and transfer to self-isolation

Noted

b **Note** that we will provide one further rapid evaluation reports prior to Christmas covering time in self-isolation

Noted

c **Note** the key findings of the evaluation of the arrival processes and transfer to self-isolation, which are:

i. The processes to identify and separate self-isolating travellers from travellers going to managed isolation and quarantine (MIQ) worked effectively and smoothly.

ii. Airports put in place systems that would cater for the number of people expected to participate in the pilot. The small size of the pilot limited the extent to which systems were tested.

iii. In Auckland, Rapid Antigen Testing was done for all pilot participants. The test extended the transfer time in the airport by 14-15 minutes.

iv. It is the view of the airports that undertaking COVID-19 testing at the border at scale is not operationally viable because of space constraints and the risks and costs of delays to passenger disembarkation if arrival halls are not cleared quickly.

v. Overall, the use of commercial transport providers to drive participants to their place of self-isolation was highly successful with few incidents.

vi. There was an ongoing need to share information between border agencies, health, transport providers and the project team to co-ordinate and plan services. These processes worked very well for the pilot, but automated and regular data sharing process would need to be implemented for a larger scale of travellers.

Noted

d **Note** that policy advice to DPMC has raised the importance of information systems for successful implementation of self-isolation.

Noted

e **Agree** to distribute this report to the Reconnecting New Zealand Ministerial Group

Agree / *Disagree*

f **Agree** that this briefing will <u>not</u> be proactively released at this time as the Self-Isolation pilot Evaluation is still in progress

Agree / *Disagree*

Christina Sophocleous-Jones
General Manager, Self-Isolation Pilot
MBIE

26/11/2021

Hon Chris Hipkins
Minister for the Covid-19 Response

12 / 12 / 2021

Background

1. You agreed the Evaluation Plan for the Self-Isolation Pilot [2122-1778 refers]. The plan proposed that we report the evaluation in phases.

2. The second evaluation report covering the arrivals processes is attached (Annex one).

Key findings

3. The key findings from the airport arrivals processes and transfer to self-isolation are:

    a. The processes to identify and separate self-isolating travellers from travellers going to managed isolation and quarantine (MIQ) worked effectively and smoothly.

    b. Airports put in place systems that would cater for the number of people expected to participate in the pilot. The small size of the pilot limited the extent to which systems were tested.

    c. In Auckland, Rapid Antigen Testing was done for all pilot participants. The test extended the transfer time in the airport by 14-15 minutes.

    d. It is the view of the airports that undertaking COVID-19 testing at the border at scale is not operationally viable because of space constraints and the risks and costs of delays to passenger disembarkation if arrival halls are not cleared quickly.

    e. Overall, the use of commercial transport providers to drive participants to their place of self-isolation was highly successful with few incidents.

    f. There was an ongoing need to share information between border agencies, health, transport providers and the project team to co-ordinate and plan services. These processes worked very well for the pilot, but automated and regular data sharing process would need to be implemented for a larger scale of travellers.

Next Steps

4. We will report on the isolation experience before Christmas.

Annex One: Title

Draft Monitoring and Evaluation of Self-Isolation Pilot: arriving and transferring to self-isolation.

Monitoring and Evaluation of the Self-isolation Pilot: arriving and transferring to self-isolation.

Key findings

- The processes to identify and separate self-isolating travellers from travellers going to managed isolation and quarantine (MIQ) worked effectively and smoothly.
- Airports put in place systems that would cater for the number of people expected to participate in the pilot. The small size of the pilot limited the extent to which systems were tested.
- In Auckland, Rapid Antigen Testing was done for all pilot participants. The test extended the transfer time in the airport by 14-15 minutes.
- It is the view of the airports that undertaking COVID-19 testing at the border at scale is not operationally viable because of space constraints and the risks and costs of delays to passenger disembarkation if arrival halls are not cleared quickly.
- Overall, the use of commercial transport providers to drive participants to their place of self-isolation was highly successful with few incidents.
- There was an ongoing need to share information between border agencies, health, transport providers and the project team to co-ordinate and plan services. These processes worked very well for the pilot, but automated and regular data sharing process would need to be implemented for a larger scale of travellers.

Background

The Self-Isolation Pilot was set up to test the processes for isolation in the community, as an alternative to managed isolation and quarantine, for low to medium risk international arrivals. This pilot is part of the Reconnecting New Zealanders work programme to allow for a phased border reopening around a risk-based system.

The pilot was approved by Cabinet on 27 September [CAB-21-MIN-0386]. It was agreed that the report back on the Self-Isolation Pilot will cover:

1. The border system and processes,
2. The delivery of services in self-isolation,
3. Monitoring, compliance and enforcement,
4. The participant experience, and
5. The experience of other stakeholders.

The evaluation is focussing primarily on aspects of scalability and participant experience of the components of the self-isolation pilot, which are:

1. The requirements to be met for self-isolation (e.g. plans and accommodation),
2. The process for applying and approving self-isolation,
3. Management of self-isolation at the border and transport to self-isolation,
4. Testing and the identification of COVID-19 positive cases at any point,
5. Monitoring of adherence to self-isolation protocols by returnees,
6. Response to health and other critical needs during self-isolation,
7. Safe provision of essential services during self-isolation.

Scope of this report

In order to ensure that insights from the pilot are able to inform policy settings for future self-isolation options in a timely way, we are providing 3 interim reports:

22 November 2021	Lessons from the Self-Isolation Pilot application processes
7 December 2021	Early learning about the border and arrivals processes

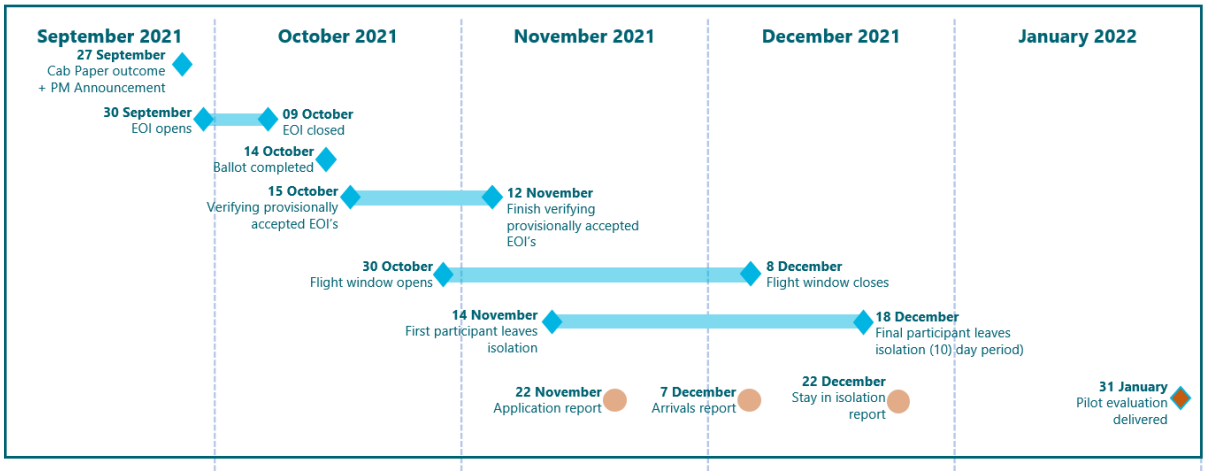
22 December 2022 Early insights into adherence to protocols and participant experience in self-isolation

Approach

This second report provides insights into the implications for managing self-isolating passengers at the border, including consideration of the impact of Rapid Antigen Testing, and the early participant experience.

We draw on feedback from staff implementing the pilot at the airports, and pilot project staff. The participant experience responses from a survey at day two of self-isolation, were available for 35 participants by 2 December.

Timeline and outline of processes



Arriving in New Zealand and transferring to self-isolation

The goal of the arrival process was to identify and manage self-isolating pilot participants and ensure they complied with a health checks and were safely delivered to their place of self-isolation. We wanted to understand the impacts on border and airport processes and to identify issues that would arise in scaling up self-isolation as a future pathway for low to medium risk travellers. Where possible the pilot is testing processes for responding to "incidents" that might arise during the arrival process.

At the airport, participants were required to undertake a health screen and testing and were provided with saliva testing kits.

Travellers into Auckland were required to return a negative Rapid Antigen Test before leaving the airport. This was not able to be implemented at Christchurch Airport due to space constraints.

On boarding the transport to their self-isolation accommodation, participants were given an Information Pack with guidance to support their stay, a supply of face masks, and signage to put on the external doors of their accommodation.

An overview of the process of arrival is provided in the appendix.

Outcomes

As at 2nd December, 65 travellers had undertaken business-related travel and returned to self-isolate in New Zealand: 37 in Auckland and 28 in Christchurch. Of these 42 had completed self-isolation: 18 in Christchurch and 24 in Auckland. Two participants exited the pilot and entered MIQ facilities before

beginning self-isolation; one due to a positive Rapid Antigen test, and one due to the last minute cancellation of their rented place of self-isolation.

Did systems and processes at the border work as intended?

Impacts on airport systems

Airports put in place systems that would cater for the volumes of people expected to participate in the pilot. The pilot was planned to accommodate up to 150 participants over six weeks, with no more than 10 per flight. At the end of the applicant selection process, 82 participants were approved to participate. The highest number of arrivals was four on any flight. This limited the extent to which systems were tested.

The pilot has created a focus for considering the issues of scaling up COVID-19 testing at the border and the implications of managing a dual arrival system where pathways vary for different categories of travellers crossing the border.

Christchurch and Auckland airports flex to accommodate the pilot

Auckland and Christchurch airports both undertook a considerable amount of work to facilitate the pilot. This meant assessing options to create workable operational processes and spaces to accommodate the pilot requirements. These engagements were essential to the successful implementation of the pilot. The pilot team have acknowledged the ongoing efforts of the airports to ensure the success of the pilot, despite its smaller than planned numbers.

Identifying Self-Isolating returnees on arrival

The Air Border Order in operation at the time of the pilot required all travellers to have a booking for MIQ before they board their flight to New Zealand. MIQ provides travellers with a voucher to prove they have a booking. To ensure that the self-isolation pilot participants could return to New Zealand they were given an MIQ voucher which was altered to note that they were participating in the pilot. No participants reported any issues with boarding flights to return to New Zealand.

Airports were provided with lists of participants arriving on each flight. Changes to flight schedules and other issues meant that these lists could change at short notice but the process for these updates worked well.

The process for separating pilot participants from others going to MIQ was similar at each airport; participants were disembarked by border officials before the majority of people who were going to MIQ. This process was an extension of the process already in place to off-load others with special requirements, such as unaccompanied children and travellers exempt from MIQ for other reasons. Airport officials report that the small numbers meant this was able to be done with minimal delay to the off-loading of passengers overall. They noted that it would not be desirable to separate people before disembarkation if large numbers were involved, because of the delays caused to other passengers.

Early disembarkation meant that participants were able to be processed separately through immigration, customs, and health screens, providing a more expedited experience than would otherwise be the case.

Health checks at the border

At the airports participants were provided with saliva testing kits for their period in self-isolation.

In Auckland, participants also underwent both a Rapid Antigen Test, and a PCR nasal swab on arrival. These tests added an additional 14 to 15 minutes to the time to transfer each participant through the airport as they waited for their test results. These timeframes have remained consistent throughout the

pilot and are a fair estimate of the minimum time for undertaking the tests in a situation where there are no queues for testing. Queuing times would extend the delays created by the testing regime.

The Health team at Auckland Airport report that the tests worked as expected. Participants expected the tests and were, in general, happy to adhere to the requirement. However, the team experienced delays in registering participants on the digital systems for recording the tests. They developed a system to avoid extending the time for participants by pre-registering expected arrivals. Feedback from the Health team was that the process is too resource-intensive and cumbersome to be implemented at scale. Issues were also experienced because personalised labels for the testing kits were not received on time. One incident was cited where a team member ended up delivering the testing kit, a two-hour round trip, after the participant had left due to the labels not being available.

Airports are of the view that implementing these tests at scale would not be possible due to operational constraints. Auckland airport representatives have expressed the view that they would not be able to safely accommodate large numbers of people being tested on-site. This view is supported by modelling which suggests that operational capacity would be reduced significantly by the introduction of point of arrival COVID-19 testing within the airport environs. The constraints arise due to space requirements and limitations on the number of travellers in the arrival halls to maintain safe distancing. They identified risks of delays to disembarking flights, due to the processing delays on the ground. They suggest that these issues would reduce the number of flights that could be accommodated if processing times are extended.

We were not able to observe operations at Auckland airport due to the COVID-19 alert levels.

Rapid Antigen testing was not done at Christchurch airport. It was not possible within the tight implementation timeframes to find a workable solution to implement testing within the constraints of the airport environs.

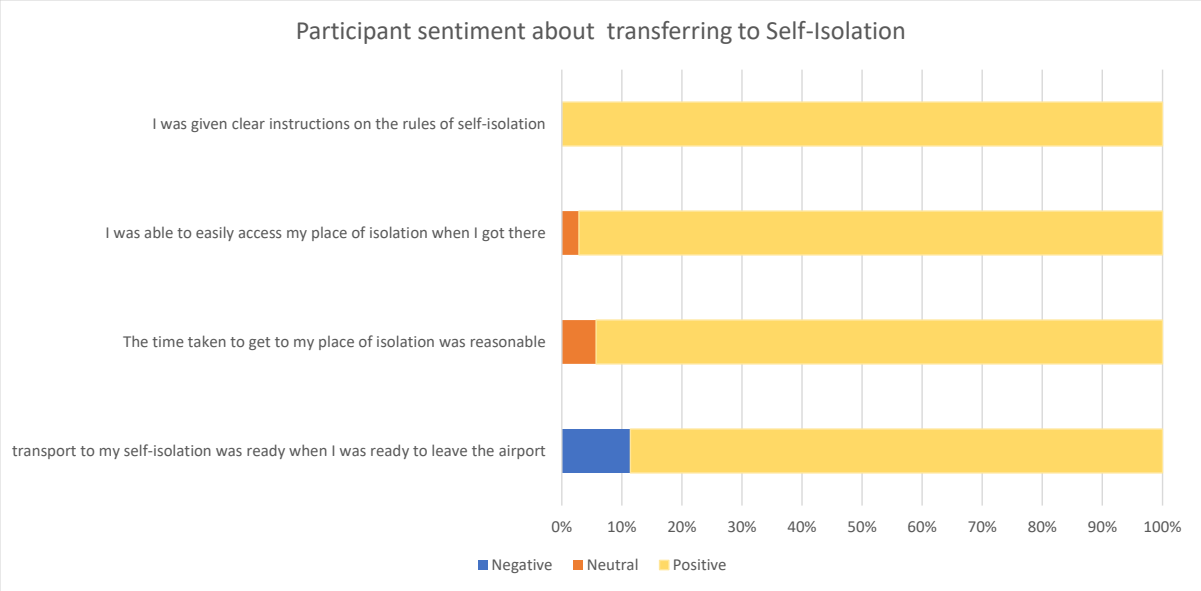
Transferring to Self-Isolation

Transport was arranged by the project team. Participants were met at the airport by a shuttle driver and transferred to their place self-isolation. Once onboard they received an Information Pack with guidance on self-isolation and signage to display on the external doors of their accommodation.

Overall, the use of commercial transport providers was highly successful with few incidents.

A similar service would be challenging to roll out at scale but was a necessary feature of the restrictive conditions agreed to by Cabinet. The few travellers arriving on each flight meant that transport was generally not shared and that the time to get the place of self-isolation was generally reasonable. Limits on the place of self-isolation being within 50km of the arrival airport could not be transferred to a wider roll-out of self-isolation.

Overall, participants were positive that the experience of transfer to Self-Isolation worked well.



Incident Management

Standard operating procedures were developed to address anticipated exceptions to the usual processes. Up until 2 December there had been only three occasions where incident management escalations were employed, for situations occurring at the border, enabling only limited testing of the procedures. These were:

1. Traveller returns a positive Rapid Antigen Test
2. Withdrawal from pilot on arrival at the airport
3. Delayed arrival due to positive pre-departure test

All worked as intended. In scenarios 1 and 2 the travellers were transported to a Managed Isolation Facility, and in scenario 3 the traveller returned a second negative test so was able to travel on a slightly later flight which the project team accommodated.

Information collection and sharing

The pilot required information sharing across multiple agencies for successful implementation. This was enabled by participants providing consent for their data to be shared for the purposes of the pilot and its evaluation. Data sharing was primarily done manually through exchange of files. Processes were put in place to ensure personal data was securely held. A privacy impact assessment was updated regularly to document issues and decisions.

The pilot has revealed the extensive need for information sharing to administer a closely monitored self-isolation pilot. Given the small scale of the pilot the processes used were mostly manual. The following data collection and sharing of personal information occurred to support the border arrival processes and health checks at the airport and the transfer of participants to their place of isolation.

1. Airports, Customs, INZ and MIQ allocations were provided with lists of participants and their flight details by the project team to determine who needed to be identified and processed through the self-isolation pathways.
2. The transport provider was provided the names and self-isolation addresses of participants requiring transport.

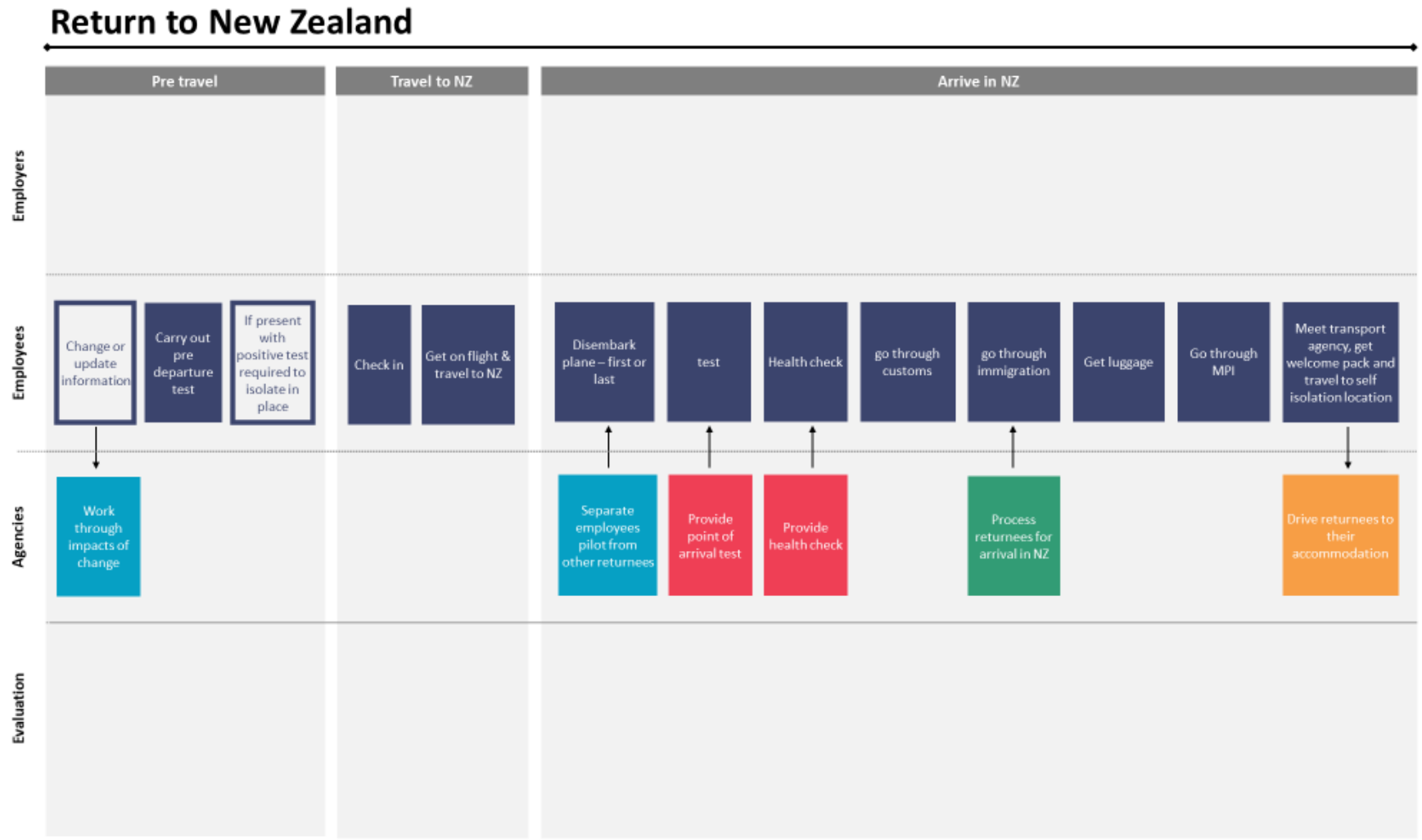
3. The RIQCC was provided with details of people requiring transfer to managed isolation and quarantine (MIQ).
4. RAT and PCR tests were recorded using the existing systems used for people going to MIQ

Ensuring that agencies were provided with accurate and timely data to support planning and implementation was resource intensive. Changes to the list of participants created rework and challenges for staff planning during into the first weeks of the pilot. This occurred because of changes flight schedules, (between EOI submission and schedules being finalised), changes to travel plans (e.g. business meetings), and changing COVID-19 situations in countries being visited etc. The flow on effect of changing travel plans is that information must be refreshed in a timely way to enable co-ordination of all the various services. Agencies worked together to solve the issues as they arose.

It is noted that the same information sharing requirements would not be a feature of large-scale self-isolation where travellers are identified at the check-in rather than on arrival and can arrange their own transport to their place of self-isolation.

Overall, while manual in nature, the information sharing processes put in place for the pilot worked well to ensure that all participating agencies received the information required for their part in the process.

Appendix


Return to New Zealand
Pre travel
Travel to NZ
Arrive in NZ
Employers
Employees
Agencies
Evaluation
Change or update information
Carry out pre departure test
If present with positive test required to isolate in place
Check in
Get on flight & travel to NZ
Disembark plane – first or last
test
Health check
go through customs
go through immigration
Get luggage
Go through MPI
Meet transport agency, get welcome pack and travel to self isolation location
Work through impacts of change
Separate employees pilot from other returnees
Provide point of arrival test
Provide health check
Process returnees for arrival in NZ
Drive returnees to their accommodation