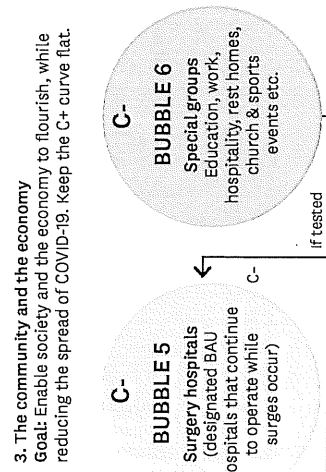
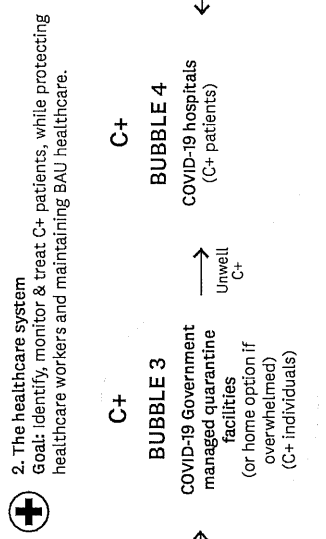
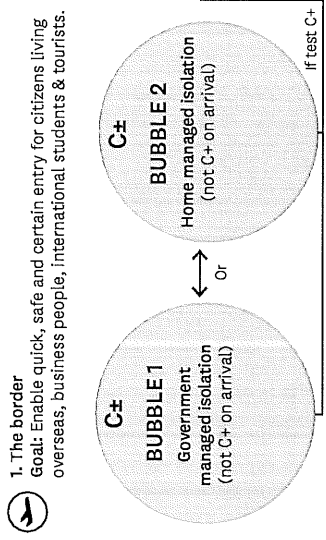
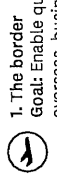


A suppression strategy: Living with COVID-19 in the year 2021

This strategy attempts to provide a human-centred approach that connects Aotearoa New Zealand to the rest of the world. This work builds on the Institute's Distancing Strategy (11 Mar 2020) and COVID-19 Situational Report (1 Sep 2021).

Aotearoa New Zealand finds effective ways to live with COVID-19 outbreaks



Tools

- Vaccinate**
 - (i) achieve 90% goal of eligible population with specific opening-up targets for business types, (ii) provide other Medsafe approved vaccinations for choice and those who reacted to first Pfizer dose, (iii) prepare for boosters for those most at risk.
- If a person is COVID-positive (C+)**

PCP is advised; C+ home care quarantine packages* delivered and C+ individual is triaged daily, ideally using online portal.

 - (i) Individual completes daily symptom checker before midday (using an agreed NZ-wide HealthPathway), or
 - (ii) Healthcare phones individual after midday. Zoom or visit from PCP if needed.

↓ If very unwell

Individual is collected by C+ ambulance and taken to C+ hospital



- C+ home care quarantine package**
 - (i) oximeter (if <92%, go to C+ hospital by C+ ambulance), (ii) thermometer, (iii) medical masks, (iv) aspirin/paracetamol, (v) rehydration sachets, etc. (see Supporting Notes).

- Monitor global developments**
 - Monitor: (i) antiviral tablets, (ii) ECMO, (iii) boosters, (iv) new vaccines.
 - (v) more acute
 - (vi) new variants

(McGuinness Institute, 2021d)
[Introduction]

- Research**
 - Collect: (i) vaccine efficacy, (ii) those fully vaccinated, (iii) proportion of interventions test positive.
- Government**
 - (i) NHI to coordinate, (ii) MOH plan National Res made public, (iii) minimum for DHES, (iv) wellbeing an, (v) mitigate, (vi) accommodat, (vii) death and d, (viii) undertak, (ix) review pr

Key:
C+ = COVID-19
C- = COVID-19
C± = Unsure
* In the community you work or live for medical use (e.g. church)



CREATING A NEW NORMAL

- Make protocols, rules and penalties clear and support police to actively enforce infringements/fines and prison (if necessary).
- Continue to require masks in public (e.g. public transport, when visiting shops and schools and on busy streets).
- MOH to continue track and trace teams and COVID-19 Tracer apps in short term but also provide a device for those that do not have the finances to purchase a phone. (Note: Use of shared pens for handwritten registers and buttons for carpark tickets should not continue.)
- Mandatory vaccination for healthcare and transport workers, shop assistants, police, teachers and childcare providers. Employers able to put in place a mandatory vaccination policy.

EDUCATION

- 12- to 15-year-olds offered vaccinations while at school (written consent forms to be completed by parents/guardians).
- Establish an expert healthcare team to plan for what will be needed to treat children with COVID-19. This should include funding and investment in new and emerging drugs.
- Teach mask etiquette and maintain two sick bays (one specifically for COVID-19 symptoms). Parent/guardian required to collect child and take for testing.
- Parents are responsible to keep children at home if they have COVID-19 symptoms, or if a family member has been in contact with someone who has tested positive for COVID-19.
- If in the community* no visitors to school grounds, and the principal has the right to close the school and move to home learning.

EMPLOYEES/EMPLOYERS

- Employees have a responsibility to report a positive COVID-19 case that might put others at risk.
- Employers are granted online access to digital COVID-19 vaccination certificates (with employee approval).
- Employers can require rapid tests daily if it is written into a worker's employment contract.
- If in the community,* employers can request employees to work from home as required.

EVENTS (including hospitality)

- Create a Health and Safety Officer (HSO) for all events over 50 people. If in the community,* limit events to 100 fully vaccinated people (or 50 if mixed). HSOs have right to request vaccination certificates or deny access if not fully vaccinated.

PIVOT HEALTHCARE SYSTEM

- One COVID-19 plan for all DHBs (to provide certainty).
- Three hospital types: C+, Surgery (strict C-) and General (C-).
- Oxygen hubs in rural communities linked to a C+ hospital.
- General practices (GPs) remain open (work hours), supported by phone consultations. Healthline provides after-hours service.
- Specialists, where possible, consult virtually.

C+ PATIENTS (not needing hospital care)

- Primary care providers (PCPs) are advised of positive patients, as they know their patients and are aware of possible complications. If quarantine facilities are full, individuals quarantine at home under the care of PCPs (including GPs).
- PCPs receive a fee for each C+ case, like the wage subsidy.
- PCPs manage long COVID-19 until clinics are established, like UK.
- Healthline organises delivery of a 'C+ home care quarantine package' (by special courier) and manages a daily symptom check.

C+ PATIENTS (needing hospital care)

- Create C+ hospitals, ambulances and train COVID-19 nurses. This could include construction of modular hospitals (e.g. using carparks), re-purposing rental cars as C+ ambulances and training nurses in ventilator and respiratory equipment.

OTHER C+ HEALTHCARE

- Establish a monthly National Health Index (NHI) to benchmark the system.
- Create a digital COVID-19 vaccination certificate, ideally including NHI number, a QR code, photo ID and vaccination batch number.
- Implement the UK (SAGE) model, including preparing a situational report every three months on latest global science. Standardise HealthPathways across NZ.
- Separate testing. Different booths for COVID-19 symptoms and non-COVID-19 symptoms. Invest in PCR and antibody testing capability. Invest in testing vans to go to offices or homes.

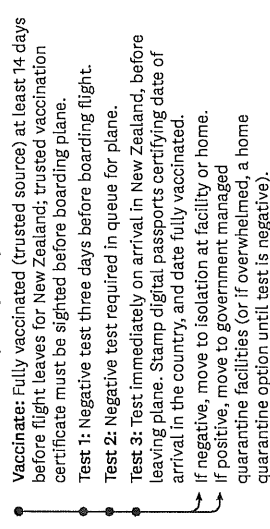
OTHER C- HEALTHCARE

- Create strict C- surgery hospitals. Pre-test patients and strict 'no visitors allowed' policy. Urgent operations to continue.
- Review mental health tools for individuals and businesses.
- Maintain general testing capacity for ongoing healthcare.
- Continually measure efficiency and effectiveness of healthcare system.

SECURING MANAGED ISOLATION AND QUARANTINE (MIQ)

- Once the home managed isolation option is approved, Air New Zealand sells MIQ voucher with every flight purchased. Other airlines and cruise ships can apply to do the same. Over time, the lottery system is phased out.
- An MIQ voucher can be for (i) existing government managed isolation or (ii) home managed isolation. Importantly, they are priced the same (e.g. about \$3100).
- Home option: Pre-boarding form must include transportation method from airport and names of household members (who must also isolate). If C+, they are offered a place in a quarantine facility.

ARRIVAL: VACCINATE, TEST, TEST, TEST



MANAGED ISOLATION (C±)

- Mandatory day two, day five and day 12 post-arrival test, collected by courier from declared isolation location on form.
- Build fit-for-purpose government managed isolation facilities.

MANAGED QUARANTINE (C+)

- Continue with existing C+ government managed quarantine facilities while numbers are low. Each government managed quarantine facility should have a C+ hospital in close proximity that maintains C+ ambulances.
- If quarantine facilities are overwhelmed, offer a C+ home quarantine option with a C+ home care quarantine package* (see far right column). The package provides medical testing tools for C+ individuals to manually collect data to help health professionals determine level of care and medicine required. Other tools include signage on front door, four-day PCR tests, food parcels and home visits (if required).

Learning in real time using Situational Reports, Dashboards and Feedback Loops: Establish a dedicated public/private strategic team that rapidly learns from international best practice and makes specific and actionable recommendations to the operation and logistics team.