



BRIEFING

Configuration of MIQ portfolio between quarantine and managed isolation

Date:	3 November 2021	Priority:	High
Security classification:		Tracking number:	2122-1576

Action sought		
	Action sought	Deadline
Hon Chris Hipkins Minister for COVID-19 Response	<p>Note the current status of managed isolation and quarantine capacity.</p> <p>Note that since August, MIQ has converted approximately 580 managed isolation rooms into quarantine rooms to support community cases in Auckland and Waikato.</p> <p>Note that we have identified four additional isolation facilities that could be converted to dedicated or dual quarantine facilities (one in Auckland, one in Rotorua, and two in Christchurch).</p> <p>Note that we have been advised by the Ministry of Health that there is no capacity in the Auckland health workforce to support another quarantine facility in Auckland.</p> <p>Note that converting further managed isolation facilities into quarantine facilities has a direct impact on our ability to accommodate additional border arrivals in December.</p> <p>Provide your direction for quarantine facilities in Auckland and Christchurch, to allow MBIE to plan managed isolation verses quarantine capacity to the end of 2021 and release vouchers accordingly.</p>	8 November 2021

Contact for telephone discussion (if required)			
Name	Position	Telephone	1st contact
Kara Isaac	General Manager, MIQ Policy	Privacy of natural persons	✓
Privacy of natural persons	Senior Policy Advisor		

The following departments/agencies have been consulted
Ministry of Health

Minister's office to complete:

Approved

Declined

Noted

Needs change

Seen

Overtaken by Events

See Minister's Notes

Withdrawn

Comments



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Date:	3 November 2021	Priority:	High
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Purpose

This briefing:

- updates you on the current proportions of managed isolation and quarantine capacity within MIQ;
- seeks your decision regarding quarantine capacity in Auckland to allow MBIE to plan for managed isolation versus quarantine capacity for November and December and release vouchers accordingly; and
- updates you on planning for converting further isolation facilities to quarantine in Christchurch and Rotorua, if required.

Recommended action

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

- a **Note** that MBIE has converted approximately 580 managed isolation rooms to quarantine rooms to support the community outbreak, with a total of 840 quarantine rooms (approximately 670 in Auckland), resulting in a reduction in number of managed isolation rooms for border arrivals.
- Noted*
- b **Note** that converting managed isolation rooms to quarantine rooms reduces the number of rooms available to support arrivals through the border, and that they cannot be reverted back quickly to managed isolation.
- Noted*
- c **Note** that demand for managed isolation remains high with 17,665 lobby participants representing 26,580 people for the 3,700 rooms released on Tuesday, 2 November.
- Noted*

Contingency

- d **Note** that nearly all of MIQ's operational contingency, and your QFT 500 Reserve, are being used to support the community response; our ability to respond to any concurrent events or emergencies is extremely limited.
- Noted*
- e **Note** that MBIE may use any remaining operational contingency to support a transition to additional quarantine facilities outside of Auckland, but will work to restore this when possible to respond to emergency events.
- Noted*
- f **Agree** that when the QFT 500 reserve is no longer required to support the community response that it no longer be held as a separate contingency.

Agree / Disagree

Quarantine levels

- g **Note** that quarantining around 60 percent of cases in the community has resulted in a stabilisation of quarantine utilisation in Auckland at around 40-48 percent available over the past two weeks; however, this stabilisation will likely not persist.
- Noted*
- h **Note** that under a medium scenario (maintaining current R0 of approximately 1.3, reaching 160 daily cases by 20 November), MIQ will run out of current Auckland quarantine capacity in mid-December; under a high scenario (R0 of approximately 1.5, reaching 257 daily cases by 20 November) capacity will run out in late November.
- Noted*
- i **Note** MBIE has identified that the Sudima Auckland (190 rooms) could be made available as a quarantine facility from mid-November.
- Noted*
- j **Note** that while a potential additional quarantine Auckland facility has been identified we have been advised that there is no health workforce available to staff another Auckland quarantine facility.
- Noted*
- k **Note** MBIE has identified that the Sudima and Commodore in Christchurch could be converted to full quarantine from mid-November, and a possible facility in Rotorua could be converted to a dual use facility (pending iwi consultation) that, if workforce constraints can be managed.
- Noted*
- l **Note** that MIQ has finite capacity to accommodate community cases due to facility and workforce constraints and existing commitments to border arrivals; even if additional facilities are converted to quarantine, based on current modelling a significant majority of cases will likely need to quarantine in the community by early next year.

Noted

Managed Isolation commitments

- m **Note** that managed isolation space for November remains incredibly tight with commitments to both existing voucher holders and recently increased commitments for offline allocations (320 spaces per month for health workers and Ministerial travel, increased Time-Sensitive and Emergency allocations and the increasing number of Afghanistan arrivals).
- Noted*
- n **Note** that in order to support the re-stacking of the managed isolation portfolio following the shift to a 7-day stay on 14 November and the release of further vouchers for 2021 certainty of MIQ's expected provision of further additional quarantine capacity is required.

Noted

o **Agree** to one of the options below to provide MBIE with a relative priority for the remainder of 2021:

- Option A (stabilisation): No further additional quarantine capacity in Auckland, and converting one facility in Christchurch and a dual-use facility in Rotorua from mid-November (if required)

Agree / Disagree

- Option B (prioritise quarantine): one further quarantine facility in Auckland (190 rooms) (subject to workforce), and converting 1-2 facilities in Christchurch and a dual-use facility in Rotorua from mid-November (if required).

Agree / Disagree

- Option C (prioritise border): convert the Ibis Ellerslie (100 rooms) back to managed isolation in Auckland, and converting one facility in Christchurch and a dual-use facility in Rotorua from mid-November (if required).

Agree / Disagree

p **Agree** to proactively release this briefing with any withholdings consistent with the Official Information Act 1982.

Agree / Disagree



Kara Isaac
General Manager, MIQ Policy
Managed Isolation and Quarantine, MBIE

3 / 11 / 2021



Hon Chris Hipkins
Minister for COVID-19 Response

...9 / .11. /2021

Background

1. The COVID-19 community outbreak in New Zealand continues to evolve rapidly and the sustained growth in positive community cases has placed significant strain on the MIQ system.
2. Since August, several decisions have been taken to create significant additional quarantine capacity within the MIQ system. This has included:
 - converting the Novotel Ibis Ellerslie and Holiday Inn Auckland to quarantine facilities;
 - converting the Distinction Hamilton into the Amohia community quarantine facility;
 - suspension of cohorting;
 - reducing the number of MIAS vouchers released for October and November; and
 - deferring ventilation, or non-essential maintenance, in some isolation facilities.

MIQ has tripled quarantine capacity since August but significant constraints exist

3. You previously directed officials to preserve the ability to expand community MIQ at reasonably short notice should an increase in community cases requires that [briefing 2022-0986]. You also previously signalled that cancelling MIAS vouchers should be a 'last resort', and avoided wherever possible.
4. MBIE's current approach throughout this period has been to convert as rooms and/or facilities within MIQ to quarantine capacity to maintain pace with the community outbreak. The recent introduction of Care in the Community model has prevented the exhaustion of MIQ quarantine capacity in Auckland.
5. Prior to August 2021, MIQ maintained quarantine capacity of approximately 250 rooms. In October 2021, this has more than tripled to approximately 840 quarantine rooms, with four facilities converted to full quarantine facilities.

Table 1: approximate quarantine and isolation rooms across the MIQ network

City	Managed isolation rooms	Quarantine rooms
Auckland	3,090	674
Hamilton	117	110
Rotorua	432	0
Wellington	122	13
Christchurch	947	90

6. Work has continued at pace to identify further isolation facilities that could be converted into quarantine within the existing MIQ network. Quarantine capacity is relevant to the regions that it is located in, and MIQ is exploring options to increase quarantine capacity within the existing MIQ network, outside of Auckland.

Quarantine capacity in Auckland

There is no capacity in the Auckland health workforce for any more quarantine facilities in Auckland

7. In Auckland, the Sudima (190 rooms) has been identified and preparations for potential conversion have taken place.

8. While facilities are available to convert to quarantine, the greatest constraint in converting to quarantine is the workforce capacity to support this. Converting a facility to quarantine requires additional security and health workforce. A larger health workforce of medical, nursing and healthcare assistants are required for quarantine facilities as people with COVID are often sicker and require more monitoring and interventions.
9. Additional Police resources have also been required in quarantine facilities given the complex situations and/or backgrounds of some of the community cases and associated risks, including more frequent attempts at absconding. Quarantine facilities now generally have four police officers on site 24/7, compared to one in managed isolation facilities.
10. Workforce capacity across the system will continue to be impacted due to staff testing positive and being close contacts associated with the community outbreak or from in-MIF transmission events. This in turn elevates the infection prevention and control risks associated with staff operating under pressure. Moving to a quarantine facility has the potential to impact on the employer's ability to attract and retain staff in an already tight labour market.
11. We have been advised by the Ministry of Health that there is currently no health workforce capacity to staff another quarantine facility in Auckland. Options to bring in additional workforce from other regions have had low uptake to date, and without additional staffing, no more facilities can be converted.
12. MBIE is also reaching the limits of capacity that can be converted and there are diminishing returns and serious risks if we maintain the current approach of converting as many rooms to quarantine capacity as possible. To ensure that MBIE can continue to honour the vouchers we have issued to voucher holders as well as increased offline allocations, MBIE needs direction to plan in the medium term for what facilities should be used for quarantine and which are managed isolation.
13. Additionally, with the introduction of the care in communities model and the stabilisation of referrals of community cases into managed quarantine, from 28 October – 1 November there were over 300 empty managed quarantine rooms every day. With high demand at the border for space in managed isolation converting further rooms to quarantine that may sit empty could be perceived to further frustrate New Zealanders right to return under the Bill of Rights Act.

Quarantine capacity outside of Auckland

14. Christchurch has two facilities (Sudima and Commodore) that could be converted to full quarantine. This could potentially create approximately 380 quarantine rooms (with approximately 230 rooms at the Sudima and 145 at the Commodore). Both of these facilities are currently dual-use facilities, and their layouts allow for a sequential conversion to quarantine. There are no health or security workforce concerns in converting these facilities.
15. Twenty-eight additional quarantine rooms will be available in Christchurch from the 6 November and the remaining rooms could be converted from mid-late November. The Grand Mercure in Wellington is also currently a dual use facility that could be converted to a dedicated quarantine facility.
16. MBIE has also been in discussion with Rotorua iwi about converting to a dual-use facility. Pending iwi approval, this facility could support any community cases in the region.
17. However, while the community outbreak has grown, there has been a stabilisation in the rate of unused quarantine rooms in MIQ with the last five days having an average of over 300 empty quarantine rooms a day in Auckland (Annex One refers). This is a result of the Care in the Communities model coming into effect in Auckland, with approximately 60 percent of cases able to quarantine in the community.

18. The expectation is that this stabilisation will not continue as community outbreak is expected to grow exponentially with projections of up to 1400 cases per week by the end of November 2021. Ultimately, MIQ's capacity is finite and there are ceilings for how much many rooms/facilities in MIQ can be provided to support the outbreak, which needs to be balanced with existed commitments to border arrivals.
19. A case projection model, as of 3 November 2021, has been included in Annex One. This modelling is based on a number of assumptions, including that 40% of positive cases are accommodated in a MIQ facility.

The Care in Communities model is in operation

20. The Operating Guidelines for managing COVID-19 positive people and whānau in the community are currently being finalised. Once approved, these guidelines will be sent to DHBs to enable them to work with their providers in delivering locally appropriate solutions.
21. These Operating Guidelines treat the COVID-19 positive individual and whānau as a household cohort. They are designed to empower District Health Boards (DHBs), Primary Health Organisations (PHOs), health and community care providers as well as social sector agencies to develop a flexible, regional response to manage COVID-19 positive people and whānau safely, effectively, and equitably in the community.
22. This first iteration focuses on a co-designed public health response. Future iterations will include more comprehensive detail on the social and welfare response, as well as lessons from implementing these guidelines.
23. The model of care in the Operating Guidelines is being implemented in many parts of the world and we have incorporated the lessons from locations such as Australia and Canada into this first iteration of this model.
24. The Operating Guidelines acknowledges the diversity and capabilities of the regions and works to support the appropriate balance of; centrally supported, regionally delivered, locally led health and well-being.
25. Nevertheless, even with increased shifts to community-based care approaches and lower-intensity approaches for travellers (such as self-isolation), there is likely to be a continued need for quarantine standard facilities which meet stringent IPC protocols; provide food, accommodation and health services; and where compliance can be supported. MBIE is working as part of an interagency group to progress these discussions.

There is a direct trade-off between quarantine capacity for community cases and managed isolation rooms for border arrivals.

October has pushed managed isolation capacity to the extremes, and has depleted contingency

26. Approximately 4,618 rooms were released on MIAS for the month of October. This is in addition to the approximately 825 rooms per month allocated to groups, 700 to emergency allocations, 200 to time sensitive travel allocations, along with additional rooms for Afghan arrivals, air and maritime stays and close contacts.
27. Given the current community outbreak, maintaining this throughput through October drew upon our contingency, as well as the QFT Reserve. This came with associated risks, leaving MBIE unable to respond to any concurrent, emergency or unforeseen events. As soon as possible, MBIE intends to progressively rebuild the operational contingency of approximately 400 rooms.

28. We recommend that the additional 500 room reserve, which you requested when QFT was introduced, is no longer maintained. In addition to QFT with Australia currently being suspended, it is unlikely we would use managed returns into MIQ again, rather than less stringent alternatives, as we move forward with Reconnecting New Zealanders (given increasing vaccination coverage and the existing presence of COVID-19 in the community).

New demands for November and the need to rebuild contingency means managed isolation space remains tight

29. Approximately 5,600 vouchers have been released on MIAS for November, alongside the approximate 2,300 rooms for offline allocations. This includes 320 rooms per month for health workers and Ministerial travel, alongside an increase in Emergency Allocations from 700 to 800 rooms per month from November.
30. Demand for managed isolation remains high with 17,665 lobby participants representing 26,580 people for the 3,700 rooms released on Tuesday, 2 November.
31. Given the need to build back up contingency to provide any capacity for MIQ to respond to emergencies or concurrent events, more rooms are not currently planned to be released for November.
32. 5,672 vouchers have been released on MIAS for December. Capacity gains from the introduction of 7-day MIQ stays may enable us to release a further 1,500-2,000 rooms for December, depending on whether additional workforce can be found and if given certainty about the maximum number of facilities that could be required for quarantine. By mid-November, MBIE should be in a better position to report on the ability to increase MIQ throughput. If an additional facility was converted to quarantine, this would result in a commensurate reduction in rooms available for MIAS lobby releases for December.

Table two: approximate managed isolation commitments from October 2021 to December 2021

	October	November	December
MIAS vouchers released	6,976	5,650	5,672
Approx Group commitments	825	900	675
Emergency Allocation	700	800	800
Time-Sensitive Allocation	200	400	400
Air crew/maritime crew	400	400	400
Total	9,101	8,150	7,947

Capacity gains from reduced-length MIQ stays are currently limited by workforce constraints and other factors

33. Transitioning to a reduced MIQ stay (7+3) will increase capacity somewhat, but will not result in the release of significantly more MIAS vouchers, due to there not currently being the system-wide workforce that is required to sustain significantly increased throughput.
34. These capacity gains will also be offset by competing pressures such as MIQ's need to rebuild operational contingency, increased offline allocations, and the conversion of facilities or rooms to quarantine in Christchurch, Wellington and Rotorua (if required).
35. You will shortly be provided with further advice on the implementation of reduced-length MIQ.

Options to provide certainty for capacity in November and December

36. MBIE has identified four criteria to support decisions on the MIQ portfolio. These include ensuring that MIQ can:
- meet existing voucher and offline allocation commitments;
 - restore an operational contingency;
 - provide quarantine capacity to support the community outbreak; and
 - utilise MIQ rooms as effectively as possible within the given constraints and uncertainty.
37. We require your direction on your expectations for the balance between managed isolation and quarantine rooms. Direction is needed to allow MBIE to plan for voucher releases in the next two or three weeks for November and December. MBIE seeks to ensure that its capacity is utilised as efficiently as possible and to continue to regularly release vouchers to support travellers, including New Zealanders and critical workers, to continue to enter New Zealand.
38. MBIE has identified three possible approaches for the portfolio in the lead up until Christmas. MBIE requires clarity on the preferred approach to ensure an appropriate number of vouchers are released for December in the coming weeks.

Option	Detail
<i>Option A – stabilisation</i>	Preserve current position by: <ul style="list-style-type: none"> • Hold current Auckland quarantine capacity. • Proceed with planning for one dedicated quarantine facility in Christchurch. • Proceed with planning for a dual-use facility in Rotorua (pending iwi consultation) if required.
<i>Option B – prioritise border</i>	Tilt further to community cases by: <ul style="list-style-type: none"> • Increasing Auckland quarantine capacity by one facility (Sudima Auckland 190 rooms), however, this is not recommended due to advice that the health system cannot staff another quarantine facility in Auckland. • Proceed with planning for one dedicated quarantine facility in Christchurch. • Proceed with planning for a dual-use facility in Rotorua (pending iwi consultation) if required.
<i>Option C – prioritise border</i>	Tilt back to border arrivals by:

	<ul style="list-style-type: none"> • Reduce current Auckland quarantine by converting the Ibis Ellerslie (100 rooms) back to managed isolation facility (this is currently the least suitable quarantine facility as its small rooms are not suitable for family groups). • Proceed with planning for one dedicated quarantine facility in Christchurch. • Proceed with planning for a dual-use facility in Rotorua (pending iwi consultation), if required.
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39. MBIE recommends Option A of maintaining current levels of quarantine capacity in Auckland, and to proceed with planning in Christchurch and Rotorua (pending iwi engagement).
40. We consider that it is preferable that further quarantine facilities in Auckland are not brought online, especially given the advice that it would not be possible to staff them. There is also peak demand for managed isolation in the lead up to Christmas, and the strong possibility that the current approach to quarantine is not sustainable if cases do exponentially increase as modelling suggests.

Next steps

41. You are meeting with MBIE officials to discuss isolation and quarantine capacity and MIQs future on Thursday, 4 November.
42. MBIE will proceed with planning arrangements subject to your decision. Further work will continue to explore how much MIQ capacity can be utilised to support the community outbreak outside of Auckland. MBIE will support this with its operational contingency where necessary while otherwise looking to rebuild it to 400 rooms.

Annex One: Quarantine rooms available and unused

Approximate rooms lost from managed isolation for community quarantine since August 2021

Facility	Rooms converted
Novotel IBIS Ellerslie, AKL	235
Holiday Inn, AKL	237
Amohia (Distinction Hamilton)	110
Total	580 rooms lost to Q
Existing QFT facilities	
Jet park, AKL	202
Grand Mercure, WLG	13
Commodore, CHC	15
Sudima, CHC	28
Total Quarantine rooms	840

Approximate Quarantine rooms available over past 7 days (22-28 October 2021)

Quarantine rooms unused 26 October – 1 November											
Facility	1 Nov	31 Oct	30 Oct	29 Oct	28 Oct	27 Oct	26 Oct	25 Oct	24 Oct	23 Oct	22 Oct
Novotel IBIS Ellerslie	133	136	137	140	141	126	139	128	133	151	157
Holiday Inn, AKL	121	100	110	113	111	57	100	103	56	67	62
Jet park, AKL	71	68	65	51	48	44	48	51	49	54	52
Total Q rooms available in Auckland	325	304	312	304	300	227	287	282	238	272	271
Hamilton	15	88	88	62	61	61	64	68	71	69	70
Wellington	13	13	13	13	13	13	13	13	13	13	13
Christchurch	33	35	36	38	40	41	40	40	41	42	42
Total Q rooms available	386	440	449	417	414	342	404	403	363	396	396

Quarantine Occupancy for Auckland

12 day occupancy; 1.8 people / room for community cases; 40% new community cases;

Solid lines for historical actuals **Total occupancy**, and **Border**.

Dotted **rooms freed up by alternative quarantine**.

Dashed lines for projections: **Border**; and Border + Community: **Low, Mid, High**.

