

7 October 2020

Nicholas Jones

By email: Nicholas.Jones@nzme.co.nz  
Ref: H202006181

Dear Nicholas Jones

### **Response to your request for official information**

Thank you for your request under the Official Information Act 1982 (the Act) on 17 August 2020 for:

*"# Since July 2 2020, copies of any correspondence regarding the decision to stop operations at some community testing centres (CBACs), including in Otara.*

*# Since July 2 2020, copies of any correspondence received from GPs or other medical groups and associations regarding Covid-19 testing, including but not limited to associated funding issues and the availability of testing swabs."*

As you were advised on 1 September 2020, information on what factors are considered by district health boards (DHBs) to close community-based assessment centres (CBACs), such as consideration of funding and/or availability of testing swabs is more aligned with the functions of DHBs as they are responsible for delivering the testing strategy for their domiciled population. We were advised you had sent a similar request to DHBs you were interested in receiving information from, therefore we have not transferred your request.

Please refer to Appendix One for a list of documents identified within scope of your request. Please note that some information has been withheld pursuant to section 9(2)(a) of the Act to protect the privacy of natural persons and section 9(2)(b)(ii) of the Act to protect information where the making available of the information would be likely unreasonably to prejudice the commercial position of the person who supplied or who is the subject of the information.

I trust this information fulfils your request. Under section 28(3) of the Act you have the right to ask the Ombudsman to review any decisions made under this request.

Please note that this response, with your personal details removed, may be published on the Ministry of Health website.

Yours sincerely

A handwritten signature in blue ink, appearing to read 'Kel-Watson', is centered on a light yellow rectangular background.

Dr Kelvin Watson  
**Group Manager**  
**COVID-19 Immunisation, Testing & Supply**  
**COVID-19 Health System Response Directorate**

## Appendix One: List of documents

| # | Date                          | Title   | Decision on release  |
|---|-------------------------------|---|--|
| 1 | 16 July 2020                  | Letter from NRHCC to Silao Vaisola-Sefo, South Seas Healthcare Trust  | Released in full   |
| 2 | 13 August 2020                | Letter from Erica Stanford MP to Hon Chris Hipkins, Minister of Health  | Released in full   |
| 3 | 1 September 2020              | Letter from Dr Jeff Lowe General Practice NZ to Hon Chris Hipkins, Minister of Health   | Released in full   |
| 4 | 2 July 2020 to 17 August 2020 | Email correspondence regarding the decision to stop operations at some community testing centres (CBACs), correspondence received from General Practitioners and other medical groups and associations regarding Covid-19 testing | Released with some information withheld pursuant to the following sections of the Act: <ul style="list-style-type: none"> <li>• Section 9(2)(a) to protect the privacy of natural persons</li> <li>• Section 9(2)(b)(ii) to protect information where the making available of the information would be likely unreasonably to prejudice the commercial position of the person who supplied or who is the subject of the information</li> </ul> |
| 5 | 2 July 2020 to 17 August 2020 | Response letters to correspondence received regarding the decision to stop operations at some CBACs   | Released with some information withheld pursuant to section 9(2)(a) to protect the privacy of natural persons  |



16 July 2020

Silao Vaisola-Sefo  
 Chief Executive Officer  
 South Seas Healthcare Trust  
 14 Fair Mall  
 Otara, Auckland  
[silao.vaisola-sefo@southseas.org.nz](mailto:silao.vaisola-sefo@southseas.org.nz)

Dear Silao,

### Fixed site COVID-19 testing services

Thank you for the agility your organisation has demonstrated as you worked with us to respond to unpredictable demands in the COVID-19 environment in recent months.

The first stage of contracting for COVID-19 testing across metro Auckland is drawing to a close, with the final day of this phase being 31 July 2020. As you are aware, the metro Auckland DHBs released a Request for Quotes (RFQ) on 14 July, seeking quotes for fixed site and mobile COVID-19 testing services. We expect the services contracted through this process to commence on 3 August 2020.

The purpose of today's letter is threefold.

Firstly it provides confirmation that we require the services of your fixed site COVID-19 testing service through until 31 July. I wrote to you on 1 July to outline the provisions for your organisation's fixed site COVID-19 testing services contract (for the period 1 July – 31 July).

Secondly, your organisation assisted with the response to increased demand in the second half of June. I understand that staff at the Northern Region Health Coordination Centre have gathered data about the additional hours of operation that were stood up by your organisation in response to this demand. A contract variation will be provided, if required, to ensure recompense for the additional service your organisation supplied to help meet this demand.

Thirdly, I am confirming that the July contract for fixed site COVID-19 testing services will terminate on 31 July without an offer of renewal. If you are willing to continue providing fixed site services after 31 July, I invite you to submit a quote via the metro Auckland RFQ process that was launched on 14 July.

I sincerely appreciate the many hours of hard work that you and your staff have dedicated to the fight against COVID-19.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'Dale Bramley'.

pp  
 Dale Bramley  
 Lead CEO  
 Northern Region Health Coordination Centre (NRHCC) COVID-19

13 August 2020

Hon Chris Hipkins  
Minister of Health

By e-mail

Dear Minister

In light of revelations this evening that a Glamorgan School student has tested positive for COVID-19, I write to request your urgent consideration to re-establishing a testing station at the Shorecare Urgent Care clinic in Northcross.

Noting that Glamorgan School is a feeder school for Northcross Intermediate, Long Bay College and Rangitoto College, I anticipate there will be an extreme and immediate surge in demand for testing within the community.

To mitigate this expected surge I ask that you consider re-establishing testing at Shorecare Urgent Care as a matter of urgency.

Thank you for your consideration. I look forward to hearing from you.

Yours sincerely



Erica Stanford  
**Member of Parliament for East Coast Bays**

1 September 2020

**Hon Chris Hipkins**  
Minister of Health

Parliament Buildings  
PO Box 18 888  
Wellington 6130

By email: [c.hipkins@ministers.govt.nz](mailto:c.hipkins@ministers.govt.nz)

And, by copy to Dr Ashley Bloomfield: [Ashley.Bloomfield@health.govt.nz](mailto:Ashley.Bloomfield@health.govt.nz)



Dear Minister Hipkins

### **Effective Communication with General Practices**

I would like to add GPNZ's voice to those expressing general concern regarding recent communications on testing for COVID-19, and urge you to establish mechanisms that will enable timely and reliable information to reach those clinicians conducting the vast majority of tests.

PHOs and general practices share the frustration that you and the Prime Minister have expressed, following official messages advising everyone in west and south Auckland to seek a test. However, our concerns are much wider – though the implications of directing some 750,000 people to visit general practices and CBACs is far from insignificant, even if it was unintended.

Even before the recent cluster emerged in Auckland, general practices have been struggling to deal with the impact of rapidly changing communications to the public around testing, often conveyed via the media, and surveillance planning that does not seem to reflect the realities of clinical capacity in the community.

Without advance warning or direct information from official channels, practices around the country have regularly had to manage a significant influx of patients requesting swabs following the daily press stand-up. Confused and sometimes frustrated patients are calling and visiting practices based on social media information or advice they have heard or read that relates to specific groups or communities.

While PHOs provide the latest information, provided directly by the Ministry of Health and/or DHBs to their practices, too often this is piecemeal, unclear, inconsistent or not timely. The need for clarity and consistency of messages regarding testing to the public is vital; the need for clarity and consistency of messages to those carrying out the tests even more so.

We appreciate that in a public health emergency, we need to be able to respond quickly in unpredictable circumstances. As you know PHOs and their general practices have done an incredible job throughout this pandemic, ensuring that the local COVID-19 response services are available on top of 'business as usual'. The surge in testing in the past three weeks, whether in general practices, CBACs or pop up centres has been achieved thanks to the hard work and commitment of general practice teams and primary care providers, and they will continue to deliver the comprehensive testing that is instrumental to our elimination strategy.

However, PHOs and general practice need far more effective direct communication from the centre to maintain effectiveness and credibility with our local communities. We fully comprehend the complexity involved in decision-making around surveillance and testing criteria, and the processes involved in approving and conveying information around any changes. Unfortunately, the disestablishment of the primary care Technical Advisory Group has removed a key conduit for the information sharing we need.

*Supporting General Practice Networks and Teams*

GPNZ can offer an effective communication channel to general practice, as well as being able to provide the on-the-ground clinical insights to the Ministry of Health and AOG experts. We have robust and trusted mechanisms for communicating with all PHOs not just our members, and those PHO in turn have excellent channels for immediate communication with their practices.

I urge you to take advantage of the expertise and support we continue to offer to both the Government and the Ministry of Health, and would welcome a phone call with yourself to discuss further.

Ngā mihi nui

A handwritten signature in blue ink, appearing to read 'Jeff Lowe', with a stylized flourish at the end.

Dr Jeff Lowe,  
Chair GPNZ and GP Karori Medical Centre

Released under the Official Information Act 1982

From: "Haylee Isaacs" <Haylee.Isaacs@parliament.govt.nz>  
 To: § 9(2)(a)  
 Date: 31/07/2020 01:20 pm  
 Subject: (DR) Acknowledgement from the office of Hon Chris Hipkins (CH200956)

§ 9(2)(a)

On behalf of Hon Chris Hipkins, Minister of Health, thank you for your correspondence regarding the relocation of the Otago COVID-19 testing station. The Minister has noted your concerns and has forwarded your correspondence to the Ministry of Health for its consideration.

Kind regards



**Haylee Isaacs | Correspondence Private Secretary, Health**  
**Office of Hon Chris Hipkins**  
 Minister of Health  
 haylee.isaacs@parliament.govt.nz

From: § 9(2)(a)  
 Sent: Friday, 31 July 2020 9:22 AM  
 To: Hon Chris Hipkins <Chris.Hipkins@parliament.govt.nz>  
 Subject: FOR URGENT CONSIDERATION & RESPONSE PLEASE

Kia Ora Minister Hipkins

We are desperate to keep our testing station open and here in Otago where it was set up to be for our community to keep our Pacifica People and locals safe from Covid 19. Please do what you can to reverse the situation where they are being closed and relocated to Wiri. How are our elderly disabled and vulnerable going to get access to this distant place. Please do what you can. Thankyou for your time and concern Minister Hipkins § 9(2)(a)

From: § 9(2)(a)  
 Sent: Thursday, 30 July 2020 8:58 PM  
 To: Matt Hannant (CMDHB)  
 Subject: Re: Auckland Regional Public Health

Thankyou we are all deeply concerned and needing this valued service to remain here long term so we can continue to feel confident, protected and safe. Thankyou Nga Mihi §

From: Matt Hannant (CMDHB)  
 Sent: Thursday, 30 July 2020 8:10 PM  
 To: § 9(2)(a)



**Cc:** Ryan Stangroom (CMDHB)

**Subject:** RE: Auckland Regional Public Health

Kia ora s 9(2)(a)

Thank you for calling and apologies for my delayed response. I want to acknowledge receipt of your email and let you know I will reply soon.

Ngaa mihi,

Matt

[Matt Hannant](#)

General Manager Primary Care, Funding and Development | Primary Health and Community Services

---

s 9(2)(a)

[Matt.Hannant@middlemore.co.nz](mailto:Matt.Hannant@middlemore.co.nz)

Counties Manukau Health | Ko Awatea Innovation Hub | Middlemore Hospital, 100 Hospital Road, Otahuhu |

Private Bag 93311 Otahuhu, Auckland 1640

[countiesmanukau.health.nz](http://countiesmanukau.health.nz) | COUNTIES MANUKAU DISTRICT HEALTH BOARD

*Please consider the environment before printing this email.*

Kia ora, if this email reaches you out of hours, it doesn't mean I am seeking a reply outside of your office hours, it's just a convenient time for me to send an email, ngaa mihi.

**From:** s 9(2)(a)

**Sent:** Wednesday, 29 July 2020 1:29 pm

**To:** Matt Hannant (CMDHB)

**Subject:** FW: Auckland Regional Public Health

Kia Ora Matt

I was referred to you by Lyree Ogle (ADHB)

I am s 9(2)(a)

I object most strongly to the planned reallocation of

Testing Station services, currently provided by South Seas Health Otara, scheduled for Friday.

I have outlined my concerns in the email below – it has been to Middlemore Hospital, Counties Manukau DHB, Ministry of Health, Auckland REGIONAL Public Health, Local MP services and now back to you.

My email is self explanatory. Please examine it thoroughly and consider what our concerns are, as a community of low Socio-Economic and High Deprivation circumstances.

South Seas Health was established by Pascofic and Maori clients – here in Otara where the main population base is.

Where are the elderly, disabled, vulnerable people going to go – they live here, not in Wiri and most people don't even have a phone, let alone transport!

Please give this your "Urgent" and serious consideration and put a stop to this "planned closing down".

I would appreciate a response by return.

Thankyou and my eternal gratitude if this closure can be prevented.

I look forward to your reply by return

s

s 9(2)(a)

**EMAIL REFERRED TO**

Email to Silao @ South Seas Health

Talofa lava

Firstly, may I offer my objections to you guys being closed down on Friday.

What is best for our community is here – Otara, not Wiri, anything you can do to change the minds of the powers to be? Who do I lodge an objection with.

We are never going to get the kind treatment that we have experienced from your nurses and security that we have in this past period.

I object to the Fleamarket and potential for infection – please send me contacts so I can lodge an urgent appeal.

I called Counties Manukau District Health Board – referred to Covid Patient Help Line – referred to Ministry of Health – waited for very long time to get a real voice. “Agents on other calls” .....

It appears nobody in Health knows what left arm or right arm are doing!

OMG – and we are supposed to trust they know what they are doing for our peoples’ best interests?

Public Health Units - AK Region (09) 623 4600 – referred to Main Healthline

Aggy: testing station locations decisions allocated to DHB in Counties Manukau who advised me this morning they knew nothing about this!

Basically, Auckland Public Health not sure but are going to email me contacts and have suggested I include MP which I will.

I have based my objections on

1. Testing Station – South Seas Health Otara was established here to support Pacific and Maori clients who live right here and in surrounding parts of Otara – not in Wiri. Many of our people are elderly, vulnerable and do not have transport so they walk here to get tested, rather than waiting in at their GPs for hours before being seen – often standing outside! With no transport, how are they going to get to Wiri and how will they be able to make themselves understood?
2. The community was not consulted.
3. There has been little or no impact on businesses (no matter what people say) – businesses facing carpark have dual entry points front and back and the carpark is not impacted.
4. I am concerned about health, safety and wellbeing of our staff and volunteers and that of the community if this valued service is relocated.

Come back to me Silao asap

**From:** Lyree Ogle (ADHB) <[LyreeO@adhb.govt.nz](mailto:LyreeO@adhb.govt.nz)>

**Sent:** Wednesday, 29 July 2020 12:36 PM

**To:** s 9(2)(a)

**Subject:** Auckland Regional Public Health

Good afternoon Linda

We spoke this morning with regards to your public health concerns over the relocation of the Otago CBAC.

I have been informed that Matt Hannant is the best contact. He has a senior role in the management and co-ordination of the primary care operations which includes the CBAC's.

His email is [Matt.Hannant@middlemore.co.nz](mailto:Matt.Hannant@middlemore.co.nz)

Kind regards,

Lyree Ogle

SHED Public Health Nurse

Communicable Disease Team

Tel: +64 9 623 4600 Ext: 26828 |

---

## Auckland Regional Public Health Service

Cornwall Complex, Floor 2, Building 15, Greenlane Clinical Centre, Auckland

Visit [www.arphs.govt.nz](http://www.arphs.govt.nz) | [Auckland Regional Public Health Service](#) | [@aklpublichealth](#)

**Welcome Haere Mai | Respect Manaaki | Together Tūhono | Aim High Angamua**

This e-mail message and any accompanying attachments may contain information that is confidential and subject to legal privilege. If you are not the intended recipient, do not read, use, disseminate, distribute or copy this message or attachments. If you have received this message in error, please notify the sender immediately and delete this message.

Visit [www.kiwihealthjobs.com](http://www.kiwihealthjobs.com), New Zealand's largest employment site for jobs in the public health sector. 100% owned and supported nationally by the District Health Boards (DHBs) and the New Zealand Blood Service (NZBS).

If you are looking for medical jobs in New Zealand, your career in health starts with us.

Released under the Official Information Act 1982

From: "Toni Atkinson" <Toni.Atkinson@parliament.govt.nz>  
 To: § 9(2)(a)  
 Date: 29/07/2020 04:25 pm  
 Subject: DR Acknowledgement from the Office of Hon Jenny Salesa S200803

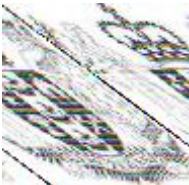
DR201253

DREP: Objections to closing and relocating of COVID-19 test centre  
 Team: COVID-19 Hub

Kia ora §

On behalf of Hon Jenny Salesa, Associate Minister of Health, thank you for your correspondence. We appreciate you taking the time to write about your concerns. I have forwarded your email to the Ministry of Health and asked that they respond to you directly. You can expect a response from them in due course.

Ngā mihi



### Toni Atkinson

**Private Secretary - Health** | Office of Hon Jenny Salesa  
 Minister for Building and Construction | Minister of Customs | Minister for Ethnic Communities  
 Associate Minister of Health | Associate Minister of Education

DDI: (04) 817 9727 | § 9(2)(a)  
 Email: [toni.atkinson@parliament.govt.nz](mailto:toni.atkinson@parliament.govt.nz) Website: [www.Beehive.govt.nz](http://www.Beehive.govt.nz)  
 Private Bag 18041, Parliament Buildings, Wellington 6160, New Zealand

*Authorised by Hon Jenny Salesa, Parliament Buildings, Wellington*

Disclaimer: The information in this email (including attachments) is confidential and may be legally privileged. If an addressing or transmission error has misdirected this email, please notify the author by replying to this email and destroy the message. If you are not the intended recipient, any use, disclosure, copying or distribution is prohibited and may be unlawful.

**Please consider the environment before printing this e-mail**

**Email disclaimer:** Please note information about meetings related to the Ministers' portfolios will be proactively released (this does not include personal or constituency matters). For each meeting in scope, the summary would list: date, time (start and finish), brief description, location, who the meeting was with, and the portfolio. If you attend a meeting with the Minister on behalf of an organisation, the name of the organisation will be released. If you are a senior staff member at an organisation, or meet with the Minister in your personal capacity, your name may also be released. The location of the meeting will be released, unless it is a private residence. The proactive release will be consistent with the provisions in the Official Information Act, including privacy considerations. Under the Privacy Act 1993 you have the right to ask for a copy of any personal information we hold about you, and to ask for it to be corrected if you think it is wrong. If you'd like to

*ask for a copy of your information, or to have it corrected, or are concerned about the release of your information in the meeting disclosure, please contact the sender. You*

**From:** s 9(2)(a)  
**Sent:** Wednesday, 29 July 2020 11:27 AM  
**To:** J Salesa (MIN) <[J.Salesa@ministers.govt.nz](mailto:J.Salesa@ministers.govt.nz)>  
**Subject:** FW: s - MY OBJECTIONS TO CLOSING AND RELOCATION O'F COVID TESTING STATION

Forwarded to Hon. Jenny Salesa

**From:** s 9(2)(a)  
**Sent:** Wednesday, 29 July 2020 11:22 AM  
**To:** Michael Clatworthy <[michael.clatworthy@parliament.govt.nz](mailto:michael.clatworthy@parliament.govt.nz)>; [jenny.salesa@parliament.govt.nz](mailto:jenny.salesa@parliament.govt.nz)  
**Subject:** s - MY OBJECTIONS TO CLOSING AND RELOCATION O'F COVID TESTING STATION

Kia Ora Jenny & Michael

I have discovered this morning that the South Seas Health testing station is being closed Friday and services relocated to Wiri and I strongly object.

I sent an email to Silao, CEO at South Seas Health which I have copied here and hope to have a response asap.

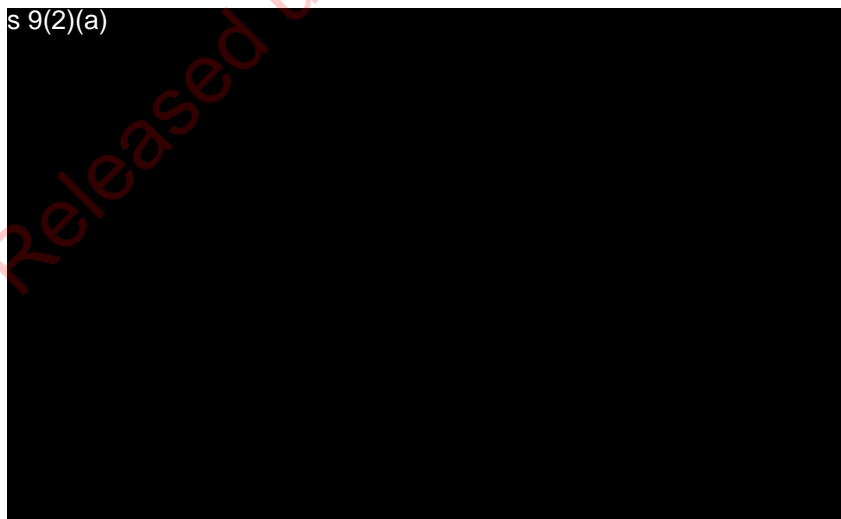
I know some have said business has been impacted but I know that is not Correct as I see the normal clientele daily – the barbers closed for a totally Different reason.

Anyway, why I am sending this to you is that it was suggested by Auckland Public Health.  
(copied under signature)

Have a check through and I would appreciate your input.

Nga Mihi

s 9(2)(a)



Talofa lava

Firstly, may I offer my objections to you guys being closed down on Friday.

What is best for our community is here – Otara, not Wiri, anything you can do to change the minds of the powers to be? Who do I lodge an objection with.

We are never going to get the kind treatment that we have experienced from your nurses and security that we have in this past period.

I object to the Fleamarket and potential for infection – please send me contacts so I can lodge an urgent appeal.

I called Counties Manukau District Health Board – referred to Covid Patient Help Line – referred to Ministry of Health – waited for very long time to get a real voice. “Agents on other calls” .....

It appears nobody in Health knows what left arm or right arm are doing! OMG – and we are supposed to trust they know what they are doing for our peoples’ best interests?

Public Health Units - AK Region (09) 623 4600 – referred to Main Healthline Aggy: testing station locations decisions allocated to DHB in Counties Manukau who advised me this morning they knew nothing about this!

Basically, Auckland Public Health not sure but are going to email me contacts and have suggested I include MP which I will.

I have based my objections on

1. Testing Station – South Seas Health Otara was established here to support Pacific and Maori clients who live right here and in surrounding parts of Otara – not in Wiri. Many of our people are elderly, vulnerable and do not have transport so they walk here to get tested, rather than waiting in at their GPs for hours before being seen – often standing outside! With no transport, how are they going to get to Wiri and how will they be able to make themselves understood?
2. The community was not consulted.
3. There has been little or no impact on businesses (no matter what people say) – businesses facing carpark have dual entry points front and back and the carpark is not impacted.
4. I am concerned about health, safety and wellbeing of our staff and volunteers and that of the community if this valued service is relocated.

Come back to me Silao asap

DR201277

DREP: Closure of COVID-19 testing centres  
Team: COVID-19 Hub

Dear **s 9(2)(a)**

On behalf of Hon Chris Hipkins, Minister of Health, thank you for your correspondence. The Minister has noted your concerns and has forwarded your correspondence to the Ministry of Health for its consideration.

Kind regards



**Haylee Isaacs | Correspondence Private Secretary, Health  
Office of Hon Chris Hipkins**  
Minister of Health  
haylee.isaacs@parliament.govt.nz

**From:** **s 9(2)(a)**

**Sent:** Friday, 31 July 2020 2:23 PM

**To:** C Hipkins (MIN) <c.hipkins@ministers.govt.nz>

**Subject:** Fwd: [URGENT] IMPORTANT: New COVID-19 community testing centres opening, CBACs closing

Mr Chris Hipkins

MOH

How can we get testing rates up when your DHBs do this??

Means few will get tested unless GPs do it; nobody has asked us, and it is not a great idea, a waste of PPE gear and exposes larges numbers of the aging GP workforce to the COVID bug, which is rather likely to be present and undetected due to poor quarantine practices and pathetically low screening rates.

Surely there is now a case for better publicity on TV and mass screening of asymptomatics, say in hospitality staff, supermarket staff, rest homes and EDs etc

Or it will blow up just like Victoria, having been bubbling away quietly undetected till it reaches a critical mass??

Regards

**s 9(2)(a)**

GP

**s 9(2)(a)**

**Subject:**[URGENT] IMPORTANT: New COVID-19 community testing centres opening, CBACs closing  
**Date:**Fri, 31 Jul 2020 12:11:09 +1200  
**From:**[no-reply@medinz.co.nz](mailto:no-reply@medinz.co.nz)  
**To:**s 9(2)(a)

The following urgent messages have been added to Medinz in the past day and are relevant to your settings.

**IMPORTANT: New COVID-19 community testing centres opening, CBACs closing**

Published by Auckland, Counties Manukau and Waitematā DHBs on 31/07/2020 11:29:21 AM.

The following Community Based Assessment Centres (CBACs) will shut down at 4pm on Friday 31 July:

- Shore Care, Northcross
- White Cross, St Lukes
- Langimalie, Panmure
- Spectrum House, Howick
- South Seas, Otara

Do not refer patients to these CBACs after 3:30pm on Friday 31 July.

Please find below the new Community Testing Centres (CTCs) that will open on Saturday 1 August:

- NORTH: AUT North Campus, Northcote
- CENTRAL: Eden Terrace Community Testing Centre, Grafton
- WEST: Whanau House, Waipareira Trust, Henderson
- SOUTH: The Whānau Ora Community Clinic, Wiri

Please see the table below for opening hours information. All CTCs will open this weekend. After this weekend, they will open Monday to Friday.

People needing a COVID-19 test outside the times listed below will need to go to a general practice or urgent care clinic.

**Priority groups**

You should offer tests to anyone who has any COVID-19 symptoms.

Please also test anyone who requests a test because they are concerned about the traveller from New Zealand who recently tested positive for COVID-19 in South Korea.

**Testing for Air New Zealand Crew**

There are now increased requirements for Air New Zealand crew to be tested, including for pre-flight clearance to Hong Kong.



Crew will be provided with surveillance testing vouchers and may present to CTCs, general practice or urgent care clinics for testing.

Please test them and record the surveillance (SURV) code on the lab form and claim for this testing via POAC.

**New Community Testing Centre locations**

Released under the Official Information Act 1982

| Location | Centre Name  | Address  | Operating Hours                            | Referral Process (for all four CTCs)                                |
|----------|--|--|--|---|
| NORTH    | AUT North Campus (by Whānau Ora Clinic)                      | Main Entrance, 90 Akoranga Drive, Northcote                            | Mon to Fri<br>8.00am to<br>3.30pm          |   |
|          |  |  | Sat 1 August<br>8.00am to<br>3.30pm        |   |
|          |  |  | Sun 2 August<br>8.00am to<br>3.30pm        |   |
|          |  |  | Mon to Fri<br>8.00am to<br>3.30pm          |   |
| CENTRAL  | Eden Terrace Community Testing Centre (by Whānau Ora Clinic) | 112 New North Road, Eden Terrace. Entrance via Ngahura Street, Grafton | 8.00am to<br>3.30pm                        | Walk-in/Drive thru.<br><br>No referrals/ presentations after 3.00pm |
|          |  |  | Sat 1 August<br>8.00am to<br>3.30pm        |   |
|          |  |  | Sun 2 August<br>8.00am to<br>3.30pm        |   |
|          |  |  | Mon to Fri<br>8.00am to<br>3.30pm          |   |
| WEST     | Whanau House, Waipareira Trust, Henderson                    | Corner of Edsel St & Catherine St Henderson                            | Sat 1 August<br>8.00am to<br>3.30pm        |   |
|          |  |  | Sun 2 August<br>8.00am to<br>3.30pm        |   |
|          |  |  | Mon to Fri<br>8.00am to<br>3.30pm          |   |
|          |  |  | Sat 1 August<br>8.00am to<br>3.30pm        |   |
| SOUTH    | The Whānau Ora Community Clinic                              | 25 Druces Road, Wiri   | Sat 1 August<br>8.00am to<br>3.30pm        |   |
|          |  |  | Sun 2 August<br><b>1.00pm</b> to<br>3.30pm |   |

[View this message on Medinz.](#)

Please send feedback to [vicki.scott@waitematadhb.govt.nz](mailto:vicki.scott@waitematadhb.govt.nz).

From: "Georgia Roden" <Georgia.Roden@parliament.govt.nz>  
To: § 9(2)(a)  
Date: 05/08/2020 11:21 am  
Subject: (DR) Acknowledgement from the Office of Hon Chris Hipkins - CH201079

*DREP: COVID-19 testing station in Otara, South Auckland*  
*Team: COVID-19 Hub*

DR201307

Kia ora §

On behalf of Hon Chris Hipkins, Minister of Health, thank you for your correspondence.

The Minister has noted your comments and has asked the Ministry of Health to respond to you directly about the issues you have raised.

Ngā mihi



**Georgia Roden** | Correspondence Private Secretary, Health  
Office of Hon Chris Hipkins  
Minister of Health  
E: [Georgia.Roden@parliament.govt.nz](mailto:Georgia.Roden@parliament.govt.nz)

**From:** Elena Scheule **On Behalf Of** Rt. Hon Jacinda Ardern  
**Sent:** Tuesday, 4 August 2020 10:36 PM  
**To:** § 9(2)(a)  
**Subject:** RE: URGENT CONSIDERATION PLEASE : FW: COVID 19 TESTING STATION - OTARA : FOR URGENT RESPONSE

Dear §

I am writing on behalf of the Prime Minister, Rt Hon Jacinda Ardern, to acknowledge your email of 31 July 2020 regarding the Otara COVID-19 testing station. Please be assured your comments have been noted.

As the issue you have raised falls within the portfolio responsibilities of the Minister of Health, the Hon Chris Hipkins, your correspondence has been forwarded to the Minister's office for consideration.

Thank you for writing to Jacinda.

Elena Scheule

Office of the Prime Minister

**From:** CabinetOffice [DPMC] [<mailto:CabinetOffice@dpmc.govt.nz>]  
**Sent:** Tuesday, 4 August 2020 2:48 PM  
**To:** Rt. Hon Jacinda Ardern <[Jacinda.Ardern@parliament.govt.nz](mailto:Jacinda.Ardern@parliament.govt.nz)>  
**Subject:** FW: URGENT CONSIDERATION PLEASE : FW: COVID 19 TESTING STATION - OTARA : FOR URGENT RESPONSE

[UNCLASSIFIED]

**From:** s 9(2)(a)  
**Sent:** Friday, 31 July 2020 11:03 AM  
**To:** CabinetOffice [DPMC] <[CabinetOffice@dpmc.govt.nz](mailto:CabinetOffice@dpmc.govt.nz)>  
**Subject:** FW: URGENT CONSIDERATION PLEASE : FW: COVID 19 TESTING STATION - OTARA : FOR URGENT RESPONSE

FOR URGENT ATTENTION: PRIME MINISTER ADERN

**Subject:** FW: URGENT CONSIDERATION PLEASE : FW: COVID 19 TESTING STATION - OTARA : FOR URGENT RESPONSE

**Subject:** URGENT CONSIDERATION PLEASE : FW: COVID 19 TESTING STATION - OTARA : FOR URGENT RESPONSE

Prime Minister

We are appealing to you at this 11<sup>th</sup> hour, to please save our testing station In Otara, South Auckland, the one you visited briefly a week ago.

They are relocating it to Wiri – how can our elderly, vulnerable and disabled Pacific people get there – most of them walk to the Town Centre close to Where they live to get all these essentials.

Take this away and it is just another thing that has been taken away from the people.

Please do what you can to help.

Thankyou for all that you do, for this very grateful country  
Please try to do this one more thing if you can

On behalf of the health and wellbeing of the people of our Community.

Nga Mihi

s 9(2)(a)

**EMAILS COPIED**

**From:** s 9(2)(a)  
**Sent:** Thursday, 30 July 2020 3:56 PM  
**To:** [phil.goff@aucklandcouncil.govt.nz](mailto:phil.goff@aucklandcouncil.govt.nz)  
**Subject:** COVID 19 TESTING STATION - OTARA : FOR URGENT RESPONSE

Kia Ora Mayor Goff

Mr Mayor, can you help us – the community of Otara

I am copying to you an email I have sent to protest against the relocation of the Covid 19 Testing Station currently based in Otara, due to be shifted to Wiri.

Our Testing Station was Set up to help and support Pacific and Maori people in our community to keep the elderly, disabled and vulnerable safe.

Most of them don't have transport or a phone -= how will they get from their Pensioner flats to Wiri?

I have attached my protest email and would ask for someone on staff, with Your support to do what you can to help us keep our station here in Otara.

Please feel free to contact me at any time on s 9(2)(a)

Nga Mihi

s 9(2)(a)

Email to Silao @ South Seas Health

Talofa lava

Firstly, may I offer my objections to you guys being closed down on Friday.

What is best for our community is here – Otara, not Wiri, anything you can do to change the minds of the powers to be? Who do I lodge an objection with.

We are never going to get the kind treatment that we have experienced from your nurses and security that we have in this past period.

I object to the Fleamarket and potential for infection – please send me contacts so I can lodge an urgent appeal.

I called Counties Manukau District Health Board – referred to Covid Patient Help Line – referred to Ministry of Health – waited for very long time to get a real voice. “Agents on other calls” .....

It appears nobody in Health knows what left arm or right arm are doing! OMG – and we are supposed to trust they know what they are doing for our peoples’ best interests?

Public Health Units - AK Region (09) 623 4600 – referred to Main Healthline Aggy: testing station locations decisions allocated to DHB in Counties Manukau who advised me this morning they knew nothing about this!


Basically, Auckland Public Health not sure but are going to email me contacts and have suggested I include MP which I will.

I have based my objections on

1. Testing Station – South Seas Health Otara was established here to support Pacific and Maori clients who live right here and in surrounding parts of Otara – not in Wiri. Many of our people are elderly, vulnerable and do not have transport so they walk here to get tested, rather than waiting in at their GPs for hours before being seen – often standing outside! With no transport, how are they going to get to Wiri and how will they be able to make themselves understood?
2. The community was not consulted.
3. There has been little or no impact on businesses (no matter what people say) – businesses facing carpark have dual entry points front and back and the carpark is not impacted.
4. I am concerned about health, safety and wellbeing of our staff and volunteers and that of the community if this valued service is relocated.

Come back to me Silao asap

s 9(2)(a)



s 9(2)(a) [Redacted]  
[Redacted]  
[Redacted]  
[Redacted]  
[Redacted]

The information contained in this email message is for the attention of the intended recipient only and is not necessarily the official view or communication of the Department of the Prime Minister and Cabinet. If you are not the intended recipient you must not disclose, copy or distribute this message or the information in it. If you have received this message in error, please destroy the email and notify the sender immediately.

Released under the Official Information Act 1982

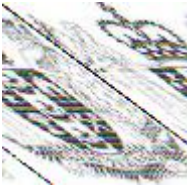
From: "Toni Atkinson" <Toni.Atkinson@parliament.govt.nz>  
 To: "Silao.Vaisola-Sefo@southseas.org.nz" <Silao.Vaisola-Sefo@southseas.org.nz>  
 Date: 20/07/2020 08:41 am  
 Subject: Acknowledgement from the Office of Hon Jenny Salesa S200753

*Min: Fixed covid testing centres*  
*Team: NHCC*  
*Assign: Lydia Vershchefelt*

Kia ora Silao

On behalf of Hon Jenny Salesa, Associate Minister of Health, thank you for your correspondence. We appreciate you taking the time to write about your concerns. The Minister will respond to you in due course.

Ngā mihi



## Toni Atkinson

**Private Secretary - Health** | Office of Hon Jenny Salesa  
 Minister for Building and Construction | Minister of Customs | Minister for Ethnic Communities  
 Associate Minister of Health | Associate Minister of Education

DDI: (04) 817 9727 | § 9(2)(a)  
 Email: [toni.atkinson@parliament.govt.nz](mailto:toni.atkinson@parliament.govt.nz) Website: [www.Beehive.govt.nz](http://www.Beehive.govt.nz)  
 Private Bag 18041, Parliament Buildings, Wellington 6160, New Zealand

*Authorised by Hon Jenny Salesa, Parliament Buildings, Wellington*

Disclaimer: The information in this email (including attachments) is confidential and may be legally privileged. If an addressing or transmission error has misdirected this email, please notify the author by replying to this email and destroy the message. If you are not the intended recipient, any use, disclosure, copying or distribution is prohibited and may be unlawful.

**Please consider the environment before printing this e-mail**

**Email disclaimer:** Please note information about meetings related to the Ministers' portfolios will be proactively released (this does not include personal or constituency matters). For each meeting in scope, the summary would list: date, time (start and finish), brief description, location, who the meeting was with, and the portfolio. If you attend a meeting with the Minister on behalf of an organisation, the name of the organisation will be released. If you are a senior staff member at an organisation, or meet with the Minister in your personal capacity, your name may also be released. The location of the meeting will be released, unless it is a private residence. The proactive release will be consistent with the provisions in the Official Information Act, including privacy considerations. Under the Privacy Act 1993 you have the right to ask for a copy of any personal information we hold about you, and to ask for it to be corrected if you think it is wrong. If you'd like to ask for a copy of your information, or to have it corrected, or are concerned about the release of your information in the meeting disclosure, please contact the sender. You can read more about the proactive release policy at <https://www.dia.govt.nz/Proactive-Releases#MS>

**From:** Silao Vaisola-Sefo [<mailto:Silao.Vaisola-Sefo@southseas.org.nz>]

**Sent:** Friday, 17 July 2020 8:34 AM

**To:** Hon Jenny Salesa <[Jenny.Salesa@parliament.govt.nz](mailto:Jenny.Salesa@parliament.govt.nz)>; Michael Clatworthy <[michael.clatworthy@parliament.govt.nz](mailto:michael.clatworthy@parliament.govt.nz)>; Hon Aupito William Sio



<[Aupito.william.sio@parliament.govt.nz](mailto:Aupito.william.sio@parliament.govt.nz)>

Cc: Andrew Chan Mow <[Andrew.ChanMow@southseas.org.nz](mailto:Andrew.ChanMow@southseas.org.nz)>

Subject: FW: Letter of Termination - South Seas CBAC Team

Importance: High

Talofa,

This is a concern. Can we discuss more please today.

Silao

From: Priya Srivastava (CMDHB) <[Priya.Srivastava@middlemore.co.nz](mailto:Priya.Srivastava@middlemore.co.nz)>

Sent: Thursday, 16 July 2020 1:01 p.m.

To: Silao Vaisola-Sefo <[Silao.Vaisola-Sefo@southseas.org.nz](mailto:Silao.Vaisola-Sefo@southseas.org.nz)>

Cc: Joy Christison (WDHB) <[Joy.Christison@waitematadhb.govt.nz](mailto:Joy.Christison@waitematadhb.govt.nz)>; Vicki Scott (WDHB)

<[Vicki.Scott@waitematadhb.govt.nz](mailto:Vicki.Scott@waitematadhb.govt.nz)>; Matt Hannant (CMDHB) <[Matt.Hannant@middlemore.co.nz](mailto:Matt.Hannant@middlemore.co.nz)>;

Penelope Magud (CMDHB) <[Penelope.Magud@middlemore.co.nz](mailto:Penelope.Magud@middlemore.co.nz)>

Subject: Letter of Termination - South Seas CBAC Team

Importance: High

**On behalf of Ministry of Health (MoH) and the Primary Care team at Northern Region Health Coordination Centre**

Good afternoon,

Please refer to the attached correspondence in relation to the above matter.

Thank you.

**Kind Regards,**

**Priya Srivastava on behalf of COVID-19 IMT Primary Care NRHCC**

Programme Manager | Primary Care

---

s 9(2)(a) | Innovation Hub – Ko Awatea, Middlemore Hospital

[priya.srivastava@middlemore.co.nz](mailto:priya.srivastava@middlemore.co.nz)

[www.countiesmanukau.health.nz](http://www.countiesmanukau.health.nz)

Counties Manukau Health | Private Bag 94052 Manukau 2241

This e-mail message and any accompanying attachments may contain information that is confidential and subject to legal privilege. If you are not the intended recipient, do not read, use, disseminate, distribute or copy this message or attachments. If you have received this message in error, please notify the sender immediately and delete this message.

Visit [www.kiwihealthjobs.com](http://www.kiwihealthjobs.com), New Zealand's largest employment site for jobs in the public health sector. 100% owned and supported nationally by the District Health Boards (DHBs) and the New Zealand Blood Service (NZBS).

If you are looking for medical jobs in New Zealand, your career in health starts with us.

Released under the Official Information Act 1982



Confirm termination end of July - South Seas.pdf

Released under the Official Information Act 1982

From: "Georgia Roden" <Georgia.Roden@parliament.govt.nz>  
To: "Ministerials@health.govt.nz" <Ministerials@health.govt.nz>  
Date: 10/09/2020 12:36 pm  
Subject: FW: reality ground zero / feedback and thanks

[Here's her new correspondence](#)

**From:** Elena Scheule **On Behalf Of** Rt. Hon Jacinda Ardern  
**Sent:** Thursday, 10 September 2020 8:17 AM  
**To:** s 9(2)(a)  
**Subject:** RE: reality ground zero / feedback and thanks

Dear s 9(2)

I am writing on behalf of the Prime Minister, Rt Hon Jacinda Ardern, to acknowledge your email of 10 September 2020 regarding a s 9(2)(a) Medical Centre. Please be assured your comments have been noted.

As the issue you have raised falls within the portfolio responsibilities of the Minister of Health, the Hon Chris Hipkins, your correspondence has been forwarded to the Minister's office for consideration.

Thank you for writing to Jacinda.

Elena Scheule  
Office of the Prime Minister

**From:** s 9(2)(a)  
**Sent:** Thursday, 10 September 2020 7:39 AM  
**To:** Rt. Hon Jacinda Ardern <[Jacinda.Ardern@parliament.govt.nz](mailto:Jacinda.Ardern@parliament.govt.nz)>  
**Subject:** reality ground zero / feedback and thanks

Dear Rt Hon Jacinda Ardern, Prime Minister,

I wish to say thanks again for your efforts as I can imagine with a pending election the pressure has now increased.

I have written to you previously with feedback on my work environment.  
To recap I work in a medical centre in s 9(2)(a) with GP care and a walk-in facility.

I have detailed my concerns to your office regard the ability of the Practice Manager to interpret the guidelines and his ability to deliver a safe environment for employees and patients.  
I should state at this point his intentions are well meant but he is out of his league and the choices he makes are inappropriate for the current environment.

It can be questioned for the future if it is appropriate to have the cost of such a position as a burden on our health system.

I believe in a lean learning health system, one which eliminates layers of administrative costs.

I think it would be cost effective to remove the role of practice managers from this level of care. The size of our Practice is around 10,000 patients with a main clinic in **§ 9(2)(a)** and two satellite clinics.

The administrative cost we carry is a Practice Manager, a head administrator, a reception team lead, a head receptionist, a nurse team lead and a head nurse. These are all roles that are a cost and have no actual patient contact.

We are a **§ 9(2)(a)** so there is another set of administrative staff and level of management above as well.

The question is how much does this cost and what does the patient benefit and what do I benefit as an employee in our health system.

I have worked for this company for a year, so far in that year I have not had an employment review, we have had three staff meetings and no full practice meetings, no development on using the manage my health system, we have no video consults in place, we have a process that does not encourage contactless interaction at reception, we have nurses not wanting to wear facemasks, I have no ability to feed back on the delivery of code of rights being delivered at our practice.

I stay employed here because I believe in supporting the Doctors and that the patients deserve more.

In this country we then also have Primary Health Care Organisations as well as District Health Boards. It can be said that this is a costly structure and how much bang are we getting for our buck. Are these different structures all communicating with each other? Are we progressing toward a better stronger cost-efficient health system?

I think that a practice of this size can operate with less administrative costs if our systems are lean, we can have a department of The Ministry of Health delivering the guidelines and making sure that they are met, ensuring our human resource needs are met, our health and safety requirements are met. The list of actions that should be taken out as an individual business cost and delivered to us by The Ministry of Health would ensure that money is spent wisely on such costs.

Practice Managers just have too many hats to wear under this title and the staff employed in this role do not have the skills to cover the task at hand or deliver the results.

Medical Centres should be managed by a clinical staff member, heading a strong leadership with vision for a modern delivery of health care.

We cannot try to keep returning to how it was.

Many of our Practice Managers are administrative staff who have been in health as a receptionist and have over time worked their way up or in our case a male who was a bank manager and has no experience in health at all.

Why do I have **§** staff above me managing how I function in my role as a medical receptionist and the basics are not being met, not one of these staff have any patient contact time so have lost touch on what the daily issues are.

I have to constantly keep updated from The Ministry Website and online training to be able to decipher if my actions on a daily basis are appropriate to The Ministry of Health's requirements.

We have a quality system called Cornerstone that is delivered by The New Zealand Collage of General Practioners.

We have this in our Practice however it is a process that ticks' boxes and is not monitored.

I think that this is the place to start, get the collage to issue statements to all general practices in New Zealand on the requirements of Cornerstone and the importance of meeting the appropriate levels and issue new requirements with the current pandemic in mind.

I believe that it is time for a restructure of our Health System and its funding.

Thank you again for your tireless work and good luck with your electioneering.

You have my support and my vote.

Kind Regards

s 9(2)(a)

Released under the Official Information Act 1982

From: "Haylee Isaacs" <Haylee.Isaacs@parliament.govt.nz>  
To: **s 9(2)(a)**  
Date: 08/07/2020 03:59 pm  
Subject: Acknowledgement from the Office of Hon Chris Hipkins

DREP: GP sharing views and requests regarding COVID-19 testing  
Team: COVID-19 Hub

Note: may need to go via Primary Care

Kia ora Dr **s 9(2)**

On behalf of Hon Chris Hipkins, Minister of Health, thank you for your correspondence regarding COVID-19 testing. I will be sure to pass your correspondence and your kind words on to the Minister for his information.

As you are likely aware, much of this work is being lead through the Ministry of Health therefore we have forwarded your thoughts to the Ministry for its information.

Kind regards



Haylee Isaacs | Acting Correspondence Private Secretary, Health  
P: +64 4817 9606  
Office of Hon Chris Hipkins  
Minister of Health

From: **s 9(2)(a)**  
Sent: Wednesday, 8 July 2020 9:24 AM  
To: C Hipkins (MIN) <[c.hipkins@ministers.govt.nz](mailto:c.hipkins@ministers.govt.nz)>  
Subject: COVID testing - GP perspective

Morena Chris,

I am delighted to welcome you to the Ministry of Health. These are challenging times but I can assure you that Primary Care in New Zealand will be fully behind you if you engage with us.

As a GP, a practice owner, and as **s 9(2)(a)**, I must express my thanks to your government and the Director-General of Health for the outstanding work they have done in managing COVID 19 in New Zealand so far.

I was completely floored by the announcement on the Ministry website on 24th June that testing was to be limited to those with symptoms plus Higher Index of Suspicion Criteria. This flew in the face of the message we had been giving which was to test, test, test. I was unable to get further information or clarification from anyone, other than that I could use discretion (for example - a community-acquired pneumonia in a rest home resident) until the 30th of June. To a GP owner, if the Ministry redefines the case definition and advised against generalised testing we were under the understanding that we would no longer be paid for all the testing work we had been doing. As a private business, pushed hard financially when consultation rates plummeted during the lockdown, we clearly have to ensure we can continue to pay our dedicated staff for the work they do. So we pushed out the Ministry's message to our patients and stopped testing unless patients met the HIS criteria (none did). So our testing rate reduced from about 14 per day to zero. I personally was delighted to hear your comments yesterday as I completely agree that we need to keep up surveillance in our communities. I suspect DHBs are looking closely at their budgets and are keen to stop spending on testing.

Please can you be very hands-on in this instance, and communicate clearly with DHBs, PHOs and the public. We need ONE consistent message about who can be swabbed and how finding for that will work. Also, who will provide the PPE as we were informed that no more would be coming our way? Please can you also follow the Prime Minister's great policy of giving New Zealanders a few day's notice of significant change - so that primary care can plan and adjust to changes?

The public have become very laissez-faire about COVID and are no longer staying at home when sick. This has to be rectified.

I offer you my very best wishes in your role and will support your endeavors to keep NZ safe from COVID. I will always welcome any questions you may have about the primary care sector.

Ngā mihi

Drs 9(2)(a)



From: "Haylee Isaacs" <Haylee.Isaacs@parliament.govt.nz>  
To: s 9(2)(a)  
Date: 09/07/2020 04:58 pm  
Subject: Acknowledgement from the office of Hon Chris Hipkins (DR202334)

DREP: Payment of GP practice  
Team: HSII / Primary Care

Dear s

On behalf of Hon Chris Hipkins, Minister of Health, thank you for your correspondence. As the issue you have raised falls within the portfolio responsibility of the Minister of Health, Hon Chris Hipkins, your letter has been forwarded to this office for consideration.

The Minister has noted your concerns and has forwarded your correspondence to the Ministry of Health for its attention.

Kind regards



Haylee Isaacs | Acting Correspondence Private Secretary, Health  
P: +64 4817 9606  
Office of Hon Chris Hipkins  
Minister of Health

From: s 9(2)(a)  
Date: Wednesday, 08 Jul 2020, 6:40 PM  
To: Megan WoodsMP <[Megan.WoodsMP@parliament.govt.nz](mailto:Megan.WoodsMP@parliament.govt.nz)>  
Subject: non payment of covid claims

Despite the Prime Minister saying govt depts should pay their bills promptly I receive this from poac for the swabbing I have done not only are I am paid very late but they reverse my claims paying me nothing . I FEEL I HAVE NO OPTION BUT TO STOP TESTING - and stop putting my life at risk . As your glorious leader well knows in the old USSR they had a saying = "you pretend to pay me and I pretend to work"  
I would value your advice on this.  
As Donald trump says "we must slow down the testing and we will have less cases"

DR s 9(2)(a)

A SIMPLY COUNTRY GP WHO PUT MY LIFE ON THE LINE EVERY DAY IN LEVEL 4 SEEING PT'S FACE TO FACE  
(while you were safe in your bubble) -do you hope I will step up next time - when you kick a dog enough  
he eventually bites you.  
I don't expect a reply - just saying

s 9(2)(a), s 9(2)(b)(ii)

Released under the Official Information Act 1982

DREP: Supply of PPE to general practice  
Team: COVID-19 Hub

DR201449

Kia ora s [REDACTED]

On behalf of Hon Chris Hipkins, Minister of Health, thank you for your correspondence.

The Minister has noted your concerns and has asked the Ministry of Health to respond to you directly about the issues you have raised.

Ngā mihi



**Georgia Roden** | Correspondence Private Secretary, Health  
Office of Hon Chris Hipkins  
Minister of Health  
E: [Georgia.Roden@parliament.govt.nz](mailto:Georgia.Roden@parliament.govt.nz)

**From:** s 9(2)(a) [REDACTED]

**Sent:** Thursday, 20 August 2020 6:58 PM

**To:** Shane Reti <Shane.Reti@parliament.govt.nz>; Hon Chris Hipkins <Chris.Hipkins@parliament.govt.nz>

**Subject:** PPE for GP swab clinics no longer provided

FYI I am writing to express our disappointment at no longer being able to access DHB supplied PPE, as of this week.

This has been supplied throughout the **whole** pandemic for us, for at least basic masks and gowns, for us to perform Covid swabs.

It is not used for routine practice care or anything but Covid swabbing and assessing sick people in "Covid" clinics.

**It seems GP's are probably the only Health Professionals involved in frontline Covid Health assessments being made to buy our own PPE.**

There are no local CBAC's and hasn't been for months. (nearest is s 9(2)(a) [REDACTED] 230 km away)

We are likely to stop providing Covid swabbing services in our clinic as a matter of principle when we run out of PPE next week.

See variety of emails below. I appear to have got nowhere with our DHB or PHO. I spoke to Stuff about it yesterday, as we feel pretty strongly about this.

Thanks for your attention to enable us to continue contributing to the Covid response.

Regards s 9(2)(a) [REDACTED]

s 9(2)(a) [REDACTED]

Dr s 9(2)(a) [REDACTED]

**From:** s 9(2)(a)  
**Sent:** Thursday, 20 August 2020 2:33 PM  
**To:** Dr s 9(2)(a)  
**Subject:** RE: Health Staff screening

Marvellous. I have heard nothing, s 9(2)(a) seem to be digging their heels in. Suggesting we are paid more than enough! I am surprised more are not being grumpy like me.

s

s 9(2)(a)

Dr s 9(2)(a)

**From:** s 9(2)(a)  
**Sent:** Thursday, 20 August 2020 2:28 PM  
**To:** s 9(2)(a)  
**Subject:** RE: Health Staff screening

Hi s

Long conversation with Ministry today. PPE issue seems to be isolated to the southern end of the country. They were going to look into it and get back to me. Will let you know when hear back.

s 9(2)

Released under the Official Information Act 1982

Nāku noa, nā

Dr s 9(2)(a)

[Redacted]

s 9(2)(a)

[Redacted]

If you are not the intended recipient, please note that any use, dissemination, further distribution, or reproduction of the information in this email in any form, is strictly prohibited. If you are not the intended recipient, please notify me and delete your copy immediately, and accept my apologies for any inconvenience caused.

**From:** s 9(2)(a)

**Sent:** Wednesday, 19 August 2020 7:09 PM

**To:** s 9(2)(a)

**Subject:** RE: Health Staff screening

Great that at least makes some sense!

s 9(2)(a)

[Redacted]

Dr s 9(2)(a)

[Redacted]

**From:** s 9(2)(a)

**Sent:** Wednesday, 19 August 2020 7:03 PM

To: s 9(2)(a) [REDACTED]  
Cc: s 9(2)(a) [REDACTED]  
Subject: RE: Health Staff screening

No problems s [REDACTED] I'll feed this through to the Ministry. I agree where the testing is required I don't see this as an acceptable way forward.

On the issue of closing clinic with a positive swab I had a conversation with Public Health representative on TAG. I just posted this on the internet:

Just following up on queries about 48 hour closure for cleaning of GP surgeries where case of COVID is detected which has been raised on this forum and also separately with me. I spoke to the Public Health representative on TAG today for clarification. The issue is not cleaning. This can usually be completed in a shorter period of time. The actual issue is the time needed to complete issues around contact tracing , review of who may have been in contact with the positive case and who should self-isolating and not. This all takes time and they would try and shorten it if possible. They have realized GP surgeries are complex environments with a myriad of patient and staff interactions and sorting through the issues takes considerable time.

This is stressful. I will get back to you with the Ministries response.

Released under the Official Information Act 1982

Nāku noa, nā

Dr s 9(2)(a)

s 9(2)(a)

If you are not the intended recipient, please note that any use, dissemination, further distribution, or reproduction of the information in this email in any form, is strictly prohibited. If you are not the intended recipient, please notify me and delete your copy immediately, and accept my apologies for any inconvenience caused.

**From:** s 9(2)(a)

**Sent:** Wednesday, 19 August 2020 6:45 PM

**To:** Dr s 9(2)(a)

**Subject:** RE: Health Staff screening

Yep see below. Sorry to bother you directly, but I was pretty mad at having to beg for PPE again, and self fund safety gear when doing a public health service.

We can just pay up but it's the principle and attitude that annoys me. We have never used the DHB stock for routine consults, only swabbing patients who are symptomatic.

The Southern DHB will not supply face shields, N95's, shoe or hair coverings, and scrubs, we have always self funded these or re-used face shields.

We have had gowns, gloves, hand sanitiser and surgical masks supplied throughout.

An s 9(2)(a) GP is sick in hospital with Covid , so I don't feel I am being overly cautious in requesting PPE.

Some warning would have been nice - we would have been stockpiling PPE but now there are no N95s to be had anywhere.

Local hardware store has P95s luckily.

No CBACs near to us, so I am reluctant to be seen pulling out of testing but that is where we are headed in the coming days, not because we want to but it seems there is little choice. If they don't want us to test that's fine, but we have been told to do more testing for weeks!

I am also unhappy about the risk of enforced shutdown that seems to be higher this time round. A clear guideline as to why a clinic would be shut vs allowed to stay open, if they see or swab a positive case, is urgently needed IMHO, so we can assess where we are in terms of infection control. We don't want to find out too late we should have been doing things differently as some clinics have found out the hard way.

It seems the College is the only GP advocacy out there, thank goodness.

s

**From:** s 9(2)(a)  
**Sent:** Tuesday, 18 August 2020 2:56 PM  
**To:** Practice Nurse s 9(2)(a)  
**Subject:** RE: PPE order

Hi s 9(2)

The current advice is that while we are in level 2, practices need to exhaust their commercial avenues of supply before accessing the DHB's pandemic supplies.  
If you can't get anything, we will absolutely back you to the DHB. Find attached a list of suppliers that OneLink has confirmed has stock available.

Kind regards

s 9(2)(a)

Email Disclaimer: The information contained in this email and any attachments herewith is confidential and may be legally privileged. It is intended solely for the addressee(s). If you are not the intended recipient, do not read, use, disseminate, distribute, or copy this message or attachments. If you have received this message in error, please notify the sender and delete immediately.

**From:** s 9(2)(a)  
**Sent:** Tuesday, 18 August 2020 1:29 PM  
**To:** s 9(2)(a)  
**Subject:** RE: PPE order

Thanks, can you confirm then that we are expected to buy our own gowns, masks, sanitiser, and gloves to perform swabbing each day, this is new. We have been supplied by Onelink up until now. USL has very limited stock it seems anyway.

s 9(2)(a)



s 9(2)(a)

**From:** s 9(2)(a)

**Sent:** Tuesday, 18 August 2020 11:00 AM

**To:** Practice Nurse s 9(2)(a)

**Subject:** PPE order

Good Morning s 9(2)(a)

I understand you have requested a copy of the Onelink PPE order form. Practices are to request PPE from their own supplier first. We have been advised that Ebos and other suppliers have sufficient stock. However, if there is a delay please let s 9(2)(a) know and we can assist with an emergency request via Onelink.

Kind regards

s 9(2)(a)

Email Disclaimer: The information contained in this email and any attachments herewith is confidential and may be legally privileged. It is intended solely for the addressee(s). If you are not the intended recipient, do not read, use, disseminate, distribute, or copy this message or attachments. If you have received this message in error, please notify the sender and delete immediately.

Hi s 9(2)(a)

I dislike sending an email, but appreciate how busy you are with clinic at the moment.

I appreciate you putting your perspective out there, but it feels like s is being set up to fail here.

I'm disappointed that you didn't call me directly yesterday. I always try to be available to general practitioners and staff. If you have frustrations about any part of the Covid response, please call me directly and I will try to resolve it. Playing these problems out in the media is not part of my MO. You are not on your own!

Yes, the cost of PPE is high, but practices are being paid \$120 per assessment to swab and this will more than cover judicious use of PPE. Patients will not be co-charged for CO-19 swabbing. Pandemic supplies come into play when we hit level three, heaven forbid. If you are desperate for a product that your suppliers don't have in stock we will represent your needs to the DHB and ensure you have what you need.

Our position has always been that practices are not compelled to swab. It is s responsibility to ensure that patients have access to swabbing and currently we have capacity in s 9(2)(a) should you feel it not safe or financially sustainable to swab patients. Your practice and your staff are a priority as well.

Regarding the labs, they too are being careful with their supplies, as is prudent. 1500 swabs were done over Sunday, Monday Tuesday this week in Southern alone. Government has made CO19 the priority. You can disagree with government policy, but that is where we currently stand.

Regarding testing of frontline staff, there is currently no requirement to swab asymptomatic staff. Like everything, this is subject to change, but is the current directive from Public Health. During the first wave staff at practices that had a positive test were tested as part of surveillance, and the same will happen this time if required. Public Health will make that call and it is inaccurate to say that practice staff will not be screened, ever.

As always, I am happy to talk this through, even if we have to agree to disagree.

Regards

s [redacted]

[redacted]

Thanks. We are pretty busy. We had been ordering PPE from the past 4 months without issue, so yesterday was a surprise, and it seemed obvious nothing was going to change from correspondence.

We are looking at \$3-500 a month for full PPE for a once daily swab clinic by 2 staff, plus a few other casual walk ins we have to deal with.

Most USL stock isn't available until next month or October. There are no face shields which is what I enquired about yesterday.

We got 2 single use face shields in March and none since.

I feel pretty strongly about this as a safety issue, and the response from s [redacted] yesterday was pretty bluntly negative.

I was already PO at the lackadaisical attitude from the DHB about PPE, and public masking, which has been behind the curve based on all international advice for months. There has been multiple infections of health staff around the country including last week, we are putting ourselves out there for the public good.

I will have to give serious thought if it is worth the staff health risk , and closure risk, to the practice continuing swabbing. We are doing 8-10 a day.

I don't think people realise the sheer effort required at present to keep all staff in a clinic infection free (any bugs), and therefore open.

It sounds like not much will change so I am voicing my concerns publicly, as there seems to be no planned change in policies.

It wasnt until journalists pointed out the slack testing in MIQ that anything happened!

Regards s [redacted]

s 9(2)(a) [redacted]

Dr s 9(2)(a) [redacted]

[redacted]

[redacted]

s 9(2)(a)

Dr s 9(2)(a)

**From:** s 9(2)(a)

**Sent:** Wednesday, 19 August 2020 6:18 PM

**To:** s 9(2)(a)

**Subject:** RE: Health Staff screening

I interviewed as well and said the DHB and Government need to back general practice with PPE. Are you the only region that has been affected with this? I can take this into the Ministry as well. Did they send through a letter or formal notification in which case could you send it up to me.

Cheers

s 9(2)

Released under the Official Information Act 1982

Nāku noa, nā

Dr s 9(2)(a)

s 9(2)(a)

If you are not the intended recipient, please note that any use, dissemination, further distribution, or reproduction of the information in this email in any form, is strictly prohibited. If you are not the intended recipient, please notify me and delete your copy immediately, and accept my apologies for any inconvenience caused.

**From:** s 9(2)(a)

**Sent:** Wednesday, 19 August 2020 6:07 PM

**To:** Dr s 9(2)(a)

**Subject:** RE: Health Staff screening

On another front, today I interviewed with Stuff, as it seems we have to start buying our own PPE. We have been supplied by the DHB throughout.

FYI s

s 9(2)(a)

Dr s 9(2)(a)

**From:** Dr s 9(2)(a)  
**Sent:** Tuesday, 18 August 2020 11:58 AM  
**To:** s 9(2)(a)  
**Subject:** RE: Health Staff screening

Thanks s Has been raised at MOH. Resources are the issue. Totally agree re your comments about GP's are the frontline and will raise again this week.

Nāku noa, nā

Dr s 9(2)(a)

s 9(2)(a)

If you are not the intended recipient, please note that any use, dissemination, further distribution, or reproduction of the information in this email in any form, is strictly prohibited. If you are not the intended recipient, please notify me and delete your copy immediately, and accept my apologies for any inconvenience caused.

**From:** s 9(2)(a)  
**Sent:** Tuesday, 18 August 2020 11:13 AM  
**To:** s 9(2)(a)  
**Subject:** Health Staff screening

Given all the hoopla in the media about "frontline" border and port workers not getting tested as intended , I thought I would point out that as GP clinics we are also "frontline" dealing every day with masses of symptomatic patients, including having sick people in the building or sticking our heads into car windows full of sick people . PPE helps but is not foolproof.

We are risking our businesses ( ie forced closure) by becoming the default testing service in most of the country, with disruption to our regular care.

I suggest there should be regular **asymptomatic screening of such health workers**. The testing guidelines currently state symptomatic people only should be tested in clinics in both Auckland and the rest of NZ.

There is already one older GP accidentally infected, and now in hospital in Auckland, having treated several hundred patients prior to getting symptomatic. That clinic will have been no doubt decimated in terms of services and staff it has.

Alarm bells should be ringing for our health workforce.

I realise testing services are very stretched, however this may be an opportunity to be proactive instead of reacting to journalists probing about the previous testing regime.

Regards

Dr s 9(2)(a)

s 9(2)(a)

Dr s 9(2)(a)

Released under the Official Information Act 1982

From: Ministerials/MOH  
To: "Stephen Lavery" <Stephen.Lavery@health.govt.nz>  
Cc: "Jess Crimp" <Jessica.Crimp@health.govt.nz>, "Jordan Crosbie" <Jordan.Crosbie@health.govt.nz>, "Ministerials/MOH" <Ministerials@health.govt.nz>, "Nikki Canter-Burgoyne" <Nikki.Canter-Burgoyne@health.govt.nz>  
Date: 24/08/2020 05:37 pm  
Subject: RE: COVID-19 and general practice Fw: Acknowledgement from the Office of Hon Chris Hipkins - CH201850  
Sent by: Sophie Corfan

*Drep: GP surgery's during COVID  
Team: HSII Primary Care*

DR201478

*Note to advisor: this may require COVID-19 input too*

Thanks for the quick response Stephen - we'll get it logged and an advisor will be in touch with Jordan to work on a response.

Ministerial Correspondence  
ministerials@moh.govt.nz

Government Services  
Office of the Director-General  
Ministry of Health  
www.health.govt.nz



From: "Stephen Lavery" <Stephen.Lavery@health.govt.nz>  
To: "Ministerials/MOH" <Ministerials@health.govt.nz>  
Cc: "Nikki Canter-Burgoyne" <Nikki.Canter-Burgoyne@health.govt.nz>, "Jess Crimp" <Jessica.Crimp@health.govt.nz>, "Jordan Crosbie" <Jordan.Crosbie@health.govt.nz>  
Date: 24/08/2020 05:35 pm  
Subject: RE: COVID-19 and general practice Fw: Acknowledgement from the Office of Hon Chris Hipkins - CH201850

Jordan has been dealing with this person  
It does require a response  
For the log jess

Cheers

**Stephen Lavery**

Programme Manager - Primary Health Care System Improvement and Innovation

You are welcome to contact me on - [s 9\(2\)\(a\)](#)

**From:** Sophie Corfan <Sophie.Corfan@health.govt.nz> **On Behalf Of** Ministerials

**Sent:** Monday, 24 August 2020 5:33 pm

**To:** Stephen Lavery <Stephen.Lavery@health.govt.nz>

**Subject:** COVID-19 and general practice Fw: Acknowledgement from the Office of Hon Chris Hipkins - CH201850

Kia ora Stephen

Passing on for your team's attention as per below. If you think this requires a formal response, please let me know and we can log it.

Ngā mihi  
Sophie

Ministerial Correspondence  
[ministerials@moh.govt.nz](mailto:ministerials@moh.govt.nz)

Government Services  
Office of the Director-General  
Ministry of Health  
[www.health.govt.nz](http://www.health.govt.nz)



----- Forwarded by Sophie Corfan/MOH on 24/08/2020 05:32 pm -----

From: "Georgia Roden" <[Georgia.Roden@parliament.govt.nz](mailto:Georgia.Roden@parliament.govt.nz)>

To: [s 9\(2\)\(a\)](#)

Date: 24/08/2020 04:43 pm

Subject: Acknowledgement from the Office of Hon Chris Hipkins - CH201850

Kia ora [s 9\(2\)\(a\)](#)

On behalf of Hon Chris Hipkins, Minister of Health, thank you for your correspondence.

The Minister has noted your concerns and has forwarded your correspondence to the Ministry of Health for its attention.

Ngā mihi





**Georgia Roden** | Correspondence Private Secretary, Health  
Office of Hon Chris Hipkins  
Minister of Health  
E: [Georgia.Roden@parliament.govt.nz](mailto:Georgia.Roden@parliament.govt.nz)

**From:** Elena Scheule **On Behalf Of** Rt. Hon Jacinda Ardern  
**Sent:** Friday, 21 August 2020 8:44 AM  
**To:** § 9(2)(a)  
**Subject:** RE: reality ground zero / feedback and thanks

Dear § 9(2)

I am writing on behalf of the Prime Minister, Rt Hon Jacinda Ardern, to acknowledge your email of 21 August 2020 regarding contact tracing at your GP practice Please be assured your comments have been noted.

As the issue you have raised falls within the portfolio responsibilities of the Minister of Health, the Hon Chris Hipkins, your correspondence has been forwarded to the Minister's office for consideration.

Thank you for writing to Jacinda.

Elena Scheule  
Office of the Prime Minister

**From:** § 9(2)(a)  
**Sent:** Friday, 21 August 2020 6:42 AM  
**To:** Rt. Hon Jacinda Ardern <[Jacinda.Ardern@parliament.govt.nz](mailto:Jacinda.Ardern@parliament.govt.nz)>  
**Subject:** reality ground zero / feedback and thanks

Dear Rt Hon Jacinda Ardern, Prime Minister,

I write with concerns and feedback regard the complacency occurring in relation to the current situation.

The Alert Level Two requirements are not being met from my experiences at work or in the community.

I will outline so that you have an understanding that all though this is clear and you may think the message is being delivered it is not actually being met.

I work at a general practice in § 9(2)(a). Our doors are open and we have the majority of patients being seen in clinic face to face, we do have telephone consultation but no video consultation option available. We have a tracing bar code on the door however yesterday when I was on reception it was only myself and one other person that actually scanned it.

We have no register for people to sign in. The argument being that we can audit Medtech for who was seen in clinic and attended. This does not account for the people that are in the practice as support persons, come in to book as they cannot get through on the telephone or come in for a query or to pay an account.

Patients with flu like symptoms have the ability to walk into the front desk, wait in line and then lean on the front counter before being screened for flu like symptoms and then given a mask to sit and wait in a waiting room queue like system.

The mask for receptionists is optional with some choosing to wear one. The nursing team currently has chosen not to wear face masks although all of our Doctors appear to be wearing them. There is no eye covering protection being used at all.

The front desk reception area has no screen, only tape on the floor which is not being seen as a guide line at all for where people are to stand. We take cash and our eftpos still does not have pay wave.

We have an arrival system that uses A5 paper and is passed from receptionist, to patient to doctor back to patient and then returned to the receptionist.

The workplace safety guidelines are not being met. There is no distancing between staff, work stations are shared and the sanitising regime has dropped off to almost absent. The cleaning of work stations only occurs if a staff member is undertaking it themselves and not a mandatory part of our daily routine.

The mentality from our leadership team appears to be that the virus has presented as a cluster in Auckland and now that Auckland is in Level Three there is no real need for us to be in Alert Level Two.

This of course has come from a group of people that did not identify that being at Alert Level One was an opportunity to prepare and to continue to work and act as if to protect our community, our patients, our staff and our families as well as contributing to the efforts of our wellbeing as a nation.

I once again say thank you for the efforts of yourself, your team and to the ministry.

This is not written for you to feel attacked as a government, it is written to provide a realistic view of life currently in a health facility in the provinces.

I hope that you can use this information in a productive manner to instruct a firm, direct and clear set of guidelines to this sector. In light of the current circumstances an environment like this is where a case will be picked up therefore the limit of spread and the ability to trace all contacts a must.

Kindest Regards

s 9(2)(a)

From: COVID-19 Response/MOH  
 To: COVID-19 Public Health Intelligence/MOH@MOH  
 Date: 06/08/2020 11:47 am  
 Subject: Health Emis ID 32767 - Covid and surveillance swabbing clinics  
 Sent by: Leigh Gibson

Hello PHI team

Please refer to the below email from **s 9(2)(a)**

It is important that **s 9(2)(a)** receive an appropriate response to her questions/suggestions. Could you please provide a response by 10 August.

Many thanks

Leigh Gibson  
 Incoming/Outgoing Responder  
 Response and Coordination  
 COVID-19 Health System Response  
 Ministry of Health

<http://www.health.govt.nz>  
<mailto:Leigh.Gibson@health.govt.nz>

----- Forwarded by Leigh Gibson/MOH on 06/08/2020 11:44 am -----

From: **s 9(2)(a)**  
 To: **s 9(2)(a)**  
 Date: 06/08/2020 10:15 am  
 Subject: Covid and surveillance swabbing clinics

To the Covid group and the rest of the team including the DHB, M and the Ministry of Health

I am not representing any professional group per se, nor do I speak for my workplace although it is important that it is clear that I do have extensive experience in many facets of healthcare at ground level including the challenge of setting up and running a Covid clinic alongside the urgent Care after-hours in **s 9(2)(a)**. Therefore I speak as a Nursing professional as well as concerned individual.

There are 2 points I need to make for my own peace of mind;

1. Why do we not keep on COVID clinic and ensure all patients are directed to a containable centre?
2. Why do we need to wait for Covid to be widespread before we insist on patients' wearing masks?

*Politics and money are now the key factors in the ongoing battle against Covid, and like frontline soldiers we are the acceptable collateral damage. Or perhaps it's another aspect our silo health system where the left hand doesn't know what the right hand is doing etc.*

**Covid clinic - the **s 9(2)(a)** CBAC – Covid swabbing centre, will close at the end of session this Sunday 9th August (this is the last of the dedicated centres in **s 9(2)(a)**)**

- Yes, we cannot correctly predict what will happen with Covid in NZ but basic knowledge and common sense would indicate that we will get a second wave, and there is absolutely no way we will manage it with our already limited resources and overcrowded emergency rooms and hospitals at capacity.
- I know that college of GP's and Urgent Care and others have written polite letters with their concerns and to be honest I do not see any impact from their diplomatic and gentle approach. Nursing organisations are a shambles and in no way representative of the professional nurses at ground level. I can certainly say that I do not wish to keep doing this and have no desire to keep running a makeshift Covid centre, nor can I continue to extend and stretch our staff any further. However, when a Covid wave hits we will

be the ones on the frontline and apart from dwindling numbers, we are very much an aging group at the high risk end. So I feel I need to at least put in my opinion.

- I'm at loss why we would want all patients with symptoms real or otherwise (at present) –( remembering that the general population is even more frightened than we are), to present to general practice and/or urgent care and also ED with flu-like symptoms- this is already happening, alongside the chest pains, the diabetics, the asthmas the minor cuts and scrapes and the larger MVA's etc.
- I believe it would make more sense and even be economically prudent to ensure we have a fully dedicated Covid clinic to try to contain the very real risk of community transmission. Yes, it is expensive, especially when results are all negative but certainly a lot easier to trace and to contain than allowing it to run through all clinic and hospitals.
- It could then be staffed by dedicated people instead of the overworked and doubling up that is already happening.
- It will be far more expensive to try and treat hundreds of Covid patients, including the cost of lives, including ours. Some of us will have no choice but to place ourselves at risk because it is our 'job'.
- Would it not be better to have a unit with appropriately trained, staffed and sufficient supplies of PPE working now to keep any possible community outbreak to a minimum, instead of having to deal with the catastrophe that awaits us.

#### Supply of Masks

At this stage we are the only health service I'm aware of that still has a policy in place for all patients to wear masks on presentation, regardless of complaint and for all staff to ensure they have masks and other appropriate PPE.

- However I have been told I will not get the supplies we need from the DHB because it is not their recommended practice.
- There is a guide on appropriate PPE to wear and when but who is protecting the waiting room especially as patients may be waiting to be seen / to be triaged and at times do not supply the correct information on entry.
- Sick people go to hospital or clinic and/or get sicker there so who is protecting them and us - masks are not a cure or a prevention but if every sick, compromised or attending staff has one then it certainly decreases the transmission risk. Are we waiting to be like Melbourne and make it compulsory once we have 700 a day or is there another arbitrary number?
- Masks will cost anything from \$50 to \$75 per box of 50 and at present we use about 1800 a week, not including N95 or level 3 surgical masks for staff. So yes it is expensive but the money is there, after all, I would prefer that the government spend it on masks rather than the elitist America's cup.

My opinion does not reflect the board or members of s 9(2)(a) and I am more than happy to work with anyone towards a system that considers our lives are important too.

Kind regards

s 9(2)(a)

This email and any attachments may contain information that is confidential and subject to legal privilege. Additionally, this email may contain patient information and is thus subject to the Health Information Privacy Code. As the recipient of this email you must comply with the Code, including ensuring the information is protected against unauthorized disclosure or use. If you are not the intended recipient, you are asked to respect the confidentiality and not disclose, copy or make use of its contents. Please delete the message and any attachments and notify the sender immediately



please consider the environment before printing this e-mail

133 Molesworth Street  
PO Box 5013  
Wellington 6140  
New Zealand  
T+64 4 496 2000

s 9(2)(a)

s 9(2)(a)

Tēnā koe s 9(2)(a)

Thank you for your email of 31 July 2020 to the Minister of Health, Hon Chris Hipkins, regarding the closing of the testing facility in Otara. The Minister has asked that I respond to you directly.

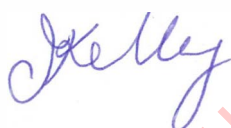
I appreciate you taking the time to write and share your concerns. I acknowledge that having the testing facility in Otara might be a strategic location to support the local Pacific and Māori community in the area.

Due to the recent new cases of COVID-19 in the community, the Ministry of Health has been working with the district health boards (DHBs) to increase the number of testing facilities around the Auckland region. I am advised that the testing facility in Otara is still doing COVID-19 tests, together with other testing facilities around the area. You can find a list of the testing facilities in the Auckland and Counties Manukau region on [www.countiesmanukau.health.nz/covid-19](http://www.countiesmanukau.health.nz/covid-19) and selecting the 'community testing centres' list link.

As you may be aware, each DHB is responsible for assessing the health needs of their local populations and making decisions about the management of the testing facilities in their area. I understand you have already contacted the Counties Manukau DHB and they have referred you to Matt Hannant. He should be able to assist you with any other queries and concerns.

Thank you again for taking the time to write. I wish you well.

Nāku noa, nā



Jane Kelley  
Director  
COVID-19 Hub

Released under the Official Information Act 1982



133 Molesworth Street  
PO Box 5013  
Wellington 6140  
New Zealand  
T+64 4 496 2000

Dr s 9(2)(a)  
s 9(2)(a)

s 9(2)(a)

Tēnā koe Dr s 9(2)(a)

Thank you for your email of 31 July 2020 to the Minister of Health, Hon Chris Hipkins, regarding community testing in Auckland. The Minister has asked that I respond to you directly. I appreciate you taking the time to write.

I appreciate you sharing your concerns, and I note that the situation in Auckland has changed since you wrote. I can assure you that the Ministry of Health is taking this recent outbreak of COVID-19 extremely seriously. Testing is an essential part of our response to and surveillance of COVID-19, and the Ministry is working closely with the sector to increase testing in the community.

The Ministry has released updated guidelines to assist general practices when making clinical decisions about who to test. This is to help ensure there is a consistent approach and a sufficient number of people are tested as part of our community testing.

The new guidance states that anyone presenting to health services with symptoms consistent with COVID-19 should be encouraged to take a test. This is in addition to testing of essential groups such as people with 'Higher Index of Suspicion' criteria or people who are more likely to have severe consequences if they were to contract COVID-19, including Māori and Pacific peoples. All care, including assessment and treatment, should be free of charge to people in these instances.

For more information about the COVID-19 case definition criteria, you can visit the Ministry's website ([www.health.govt.nz](http://www.health.govt.nz)) by searching 'COVID-19 case definition'.

The location and availability of testing locations can be viewed on the Auckland District Health Board's (DHB's) website ([www.adhb.health.nz](http://www.adhb.health.nz)) by searching 'getting tested'. I encourage you to contact the DHB if you have any further concerns about the locations and opening times of testing centres in your region.

Thank you again for taking the time to write. I hope this information is useful, and I wish you well.

Nāku noa, nā



Jane Kelley  
Acting Group Manager  
Office of the Deputy Chief Executive  
**COVID-19 Health System Response**