

# 48-hour Review of Travel Restrictions

### **Purpose**

• To provide health advice on continued requirements for travel restrictions. This is the **eleventh** such review and is current at 1400 on **26** February 2020.

### Key messages

- The Ministry recommends that the current travel restrictions remain in place due to:
  - o no evidence of a sustained decrease in the number of confirmed cases and deaths
  - no softening of risk assessment levels or lifting of travel restrictions in other countries.
  - o following a Cabinet meeting on 24 February 2020, Prime Minister has confirmed the travel restrictions around China will be extended for another eight days.

#### **Further information**

- On 26 February it is recommended that current travel restrictions remain in place due to:
  - the continuing rising number of cases in mainland China. (24 hour increase of 508 confirmed cases)
  - o the increasing number of deaths in mainland China. (24 hour increase of **71** deaths)
  - the increasing number of cases outside of mainland China. There have been **2,581** confirmed cases reported outside of mainland China, an increase of **400**. This includes a reported **977** confirmed cases in South Korea of which **214** are new, and a reported **229** confirmed cases in Italy of which **105** are new.
  - o a number of cases in Australia and the wider Western Pacific Region suggesting risk in the Pacific region remains high.
- Our case definition is broad and adopts a cautious, pre-emptive approach due to the severity of the illness.
- There have been no confirmed cases in New Zealand. Since becoming a notifiable disease on 31 January 2020.
- The international picture has not significantly shifted from when the travel restrictions were announced. The risk remains high and there is no evidence of a sustained decrease in the number of reported cases in mainland China and internationally; and there is no suggestion that the overall risk profile is reducing.



Our assessment against the high-level review criteria is:

## Factors for consideration for border measures review

| # | High-level<br>considerations   | Factors for consideration  NB: these factors have not been weighted or prioritised   | Indicate if there has been a change in this factor since the last assessment   | Overall comment  |
|---|--|--|--|--|
| 1 | Readiness of New<br>Zealand's health<br>system to respond<br>to cases and/or<br>outbreak | Appropriate guidance documents and management processes available for the health system  Scenario planning for potential impact on New Zealand's health system | There is guidance available on the Ministry of Health website for the health sector and the general public. Regular border advisories are being issued and protocols for the management of the first case and subsequent cases in New Zealand have been developed. A COVID-19 Strategic Response Plan is currently being developed.  There has been no change. | The overall status of readiness of New Zealand's health system to respond is good. The DHBs have been asked to provide response plans to the Ministry.  The Ministry's Chief Medical Officer has engaged widely with clinical colleagues in the sector to identify issues, which are being managed actively.  Management of the supply chain for PPE supplies for the wider sector is being established.  Officials are preparing advice for Ministers with the power to act concerning possible exemptions for tertiary students. |
|   |  | Current response aims (e.g. stage of NZIPAP)   | No Indicative health sector alert code has been issued. NZ preparedness measures are currently being guided by the 'Keep it Out" phases of the NZIPP.  |  |
|   |  | Acceptability and feasibility of current measures for key stakeholders   | There has been an increased concern regarding international  |  |



|   |   | Workforce sustainability of current and/or proposed measures  | students and whether an exemption should be considered.  There have been isolated instances of workforce issues regarding self-isolation.   | SQ  |
|---|---|---|---|---|
| 2 | Evolving<br>epidemiology of the<br>outbreak | Risk to NZ from geographical areas of sustained transmission e.g. New Zealand's immediate neighbours and/or areas of high travel volume  Risk assessment update | Sustained transmission is ongoing in mainland China. In other areas, there is more limited transmission. The Countries outside of China with the highest number of cases are South Korea (977 cases, with 214 new cases reported in the past 24 hours), Italy (229 cases, with 105 new cases reported in the past 24 hours Japan (157 cases), Singapore (90 cases) and Iran (61 cases).  There have now been 34 deaths outside of China (11 new deaths), 12 in Iran, 10 in the South Korea, six in Italy, three on the Diamond Princess and one each in the Philippines, France, and Japan.  Risk to New Zealand remains high despite introduction and implementation of border measures.  The risk of importation and transmission remains constant for New Zealand. | The increasing cases of community transmission in South Korea, Italy and Iran are significant changes to the epidemiology.  There have been increasing reports of cases and deaths outside of China, including cases with no clear epidemiological link to Hubei.  There has been a steady increase in the number of deaths, but the number of laboratory confirmed cases has started to slow down while the number of recovered cases has increased.  s 9(2)(g)(i) |



|   |   | Relevant modelling data                     | Discussions about support from New Zealand academic institutions are underway with support from Australian modelling experts               | 0  |
|---|---|---|--|--|
|   |   | Basic reproduction number (R0)*             | Early studies indicate reproductive rate of between 2 and 3.1 (increased from 1.4)   | There is still uncertainty about the transmissibility of COVID-19. As more case data is being released from mainland China and other countries, more accurate      |
| 3 | Emerging evidence<br>about<br>transmissibility    | Infectiousness                              | Virus is spread through contact<br>with respiratory droplets in the air<br>and on inanimate objects (surfaces)                             | assessments on the transmissibility will be made.  |
|   |   | Incubation period                           | Estimates of the median incubation period are 5-6 days (range 0-14 days) and estimates of serial interval range from 4.4-7.5 days.         |  |
|   |   | Case fatality risk                          | The fatality rate within China is currently 2.3% and is lower outside of China.  | The emerging evidence about the severity of the illness has remained constant since the first case details were released from                                      |
| 4 | Emerging evidence<br>about severity of<br>illness | Severe disease risk or hospitalisation rate | There isn't enough data about the number of severe cases apart from the situation in mainland China which has remained steady ~14 percent. | mainland China. There is inadequate severe case data available for the global situation because the numbers are small compared with the numbers in mainland China. |
| 5 | WHO advice  | Travel restrictions advice                  | WHO still advises travel restrictions are not appropriate.   | WHO advice has remained the same.  Australia has recently announced it will lift   |
|   |   | Other advice                                | The overall advice and risk assessment from WHO has  | travel restrictions for a small number of school children from China.  |



|   |   |  | remained static since the last review.               | Other countries such as Bahrain, Kiribati and Samoa have added additional travel restrictions for individual countries.  |
|---|---|--|--|--|
|   |   | Disease control measures in other countries/territories                          | The disease control measures have remained the same. | There have been noteworthy changes in the public health measures in other countries.   |
|   |   | Exit screening measures at source countries/territories                          | The measures have remained the same.                 | The US CDC has in place the following travel alerts:   |
|   |   | Measures to prevent or delay virus entering Pacific Island countries/territories | The measures have remained the same.                 | China and South Korea: level 3, Avoid nonessential Travel, Japan, Italy and Iran: level 2, Practice enhanced precautions, Hong Kong: Level 1, practice usual precautions.  |
| 6 | Public health<br>measures in other<br>countries |  |  | CDC also considers there to be community spread in Singapore, Taiwan, Thailand and Vietnam, but that the extent of spread is not yet sustained or widespread enough to meet the criteria for a travel notice.  Advice for returning travellers has been updated in the UK: |
|   |   |  |  | (https://www.gov.uk/government/publications/covid-19-specified-countries-and-areas/covid-19-specified-countries-and-areas-with-implications-for-returning-travellers-or-visitors-arriving-in-the-uk)   |



| 7 |   | Other | Effectiveness of current measures                  | The effectiveness of current measures has stayed the same as there are still no confirmed cases in NZ. | The current measures have been effective in the current phase of the NZIPAP. "i.e keep it out." |
|---|---|-------|--|--|---|
|   | 7 |       | Feasibility of implementing other control measures | More stringent border control and public health measures can be considered if needed.                  |   |
|   |   |       | Cost-benefit assessment                            | No change in the cost-benefit assessment.  |   |

<sup>\*</sup> The R0 is the average number of other people that one infected person will infect, in a completely non-immune population

 This advice has been reviewed by the Ministry's and Prime Minister's Chief Science Advisors, Dr Ian Town and Professor Juliet Gerrard.