



COVID-19 risk assessment review: DOC Visitor Accommodation

Description: DOC Huts

Date: 31/05/2022 [updated 7/6/2022]

Hazard	Harm the hazard could cause	Inherent likelihood that the harm would occur ¹	Level of inherent risk (consequence)	Control measures currently in place ²	Are the controls eliminating or minimising the risk?	Unless stated the control measures are effective and fit for purpose so far as is reasonably practicable:	Comments
Visitors becoming infected or transmitting COVID-19 by: Exposure to airborne transmission opportunities/close contacts via direct contact between people (e.g., from visitors who are infected)	Workers or other visitors contracting COVID-19 (which could result in serious illness or death) and in turn transmitting to others.	We originally assessed this as 'almost certain/ likely' given most of the population were assumed to be unvaccinated and Delta was in the community. Harm can still occur regardless of vaccination status and is still almost certain/likely (although vaccination does offer some protection particularly if boosted.)	High	Visitors are encouraged to stay home if showing symptoms or close contact or household contact.	Eliminating		Currently, 95.2% of the NZ population are fully vaccinated (two doses). The Orange setting remains in place as winter begins. An increase in Omicron and seasonal infections is anticipated over winter.
				Closure of huts: During winter some Great Walks close and other huts become non-bookable backcountry huts. ³	Eliminating		
				Staff no longer in most huts over winter.	Eliminating		
				Localised controls are available to staff to close huts as required ⁴	Eliminating		
				Localised controls are available to staff to reduce capacity at huts as required.	Minimising		
				Cleaning and disinfecting in accordance with guidance from Ministry of Health (MoH).	Minimising		
				Frequently touched surfaces regularly cleaned. ⁵	Minimising		
Physical distancing – workers and visitors should be at least 1m apart from each other. No more than the permitted number of visitors are allowed into the huts at any one time to allow for physical distancing (this has resulted in reduced	Minimising		During the winter season there is limited opportunity to enforce 1m distancing in many huts. We will continue to promote the applicable traffic light setting guidance to visitors and that				
		Whether we have Delta and/or Omicron in the community - the likelihood of infection occurring is the same because in most circumstances people move between the regions to travel to the huts and walk with others on the tracks, and then use common living and sleeping areas together overnight, with many huts being relatively confined.				As most huts are without wardens over the off-season DOC has/is encouraging visitors to take a higher degree of personal responsibility and increased planning through DOC's various communication channels.	
		In the off-peak winter season both the numbers of workers and visitors in huts will be much reduced, but risk remains for visitors because in the winter we can expect an increase in general sickness and the possibility of a secondary wave of Omicron.				There is significantly reduced visitor demand and occupancy outside of the summer / autumn peak.	
						International borders opened from 12 April to Australian tourists and this introduced the risk of new COVID-19 variants and other seasonal illnesses such as the flu and the super cold which Australia has recently reported. ⁷ NZ's border will be fully reopened by 11:59pm 31 July 2022 (including the maritime border).	

¹ NZ Vaccine data and statistics as at 1 June 2022: 96.3% of ages 12+ have had first doses (4,054,539), 95.2% of ages 12+ have had second doses (4,005,845 people), 72.6% of eligible people have had a booster (2,6450,206 people). See [8,182 community cases; 373 hospitalisations; 8 in ICU; 13 deaths | Ministry of Health NZ](#)

² Visitors to huts are encouraged to follow MOH approved control measures we have in place – see those identified here: <https://www.health.govt.nz/covid-19-novel-coronavirus/covid-19-health-advice-public/protecting-yourself-and-others-covid-19> including following cleaning and disinfecting within the huts <https://www.health.govt.nz/covid-19-novel-coronavirus/covid-19-health-advice-public/covid-19-general-cleaning-and-disinfection-advice> The requirement to have proof of vaccination with a My Vaccine Pass was suspended effective as of 4 April 2022. DOC required these Passes between 10 January 2022 and 4 April 2022. See previous risk assessment which determined the COVID-19 risk profile had changed sufficiently to remove the vaccine requirements. This was a result of updated public health advice, the country's high vaccination rates, the then recent Omicron peak, and increasingly widespread transmission with cases declining.

³ Milford, Routeburn, Kepler, Whanganui and Tongariro Great Walk tracks closed 30 April 2022, and reopen October/November 2022. Heaphy, Paparoa, Abel Tasman, Rakiura, Lake Waikaremoana Great Walk tracks are open all year round.

⁴ Follow DOC Visitor Vaccination Policy Guidance for localised risk assessment process - [DOC-6859907](#)

⁵ <https://www.health.govt.nz/covid-19-novel-coronavirus/covid-19-health-advice-public/covid-19-general-cleaning-and-disinfection-advice> last accessed 1 June 2022

⁷ From 11:59pm 12 April 2022, vaccinated Australian citizens and permanent residents were able to enter NZ and self-test on arrival. From 11:59pm 1 May 2022, vaccinated people from countries who do not need a visa (visa waiver visitors) or visitors from other countries who already hold a valid visitor visa were able to enter NZ and self-test on arrival. From 11:59pm on 31 July 2022, NZ's border reopens to all tourists and visa holders. Cruise ships can enter NZ from 31 July 2022, with the opening of the maritime border.

Hazard	Harm the hazard could cause	Inherent likelihood that the harm would occur ¹	Level of inherent risk (consequence)	Control measures currently in place ²	Are the controls eliminating or minimising the risk?	Unless stated the control measures are effective and fit for purpose so far as is reasonably practicable:	Comments
				capacity at the huts), and signs placed around the hut advising of these rules. Localised risk assessments are undertaken as appropriate.	Minimising	people should keep a safe distance from people they don't know. There are no capacity limits under Orange for accommodation.	Hut users can come from many different geographical areas and do not necessarily all come from the same group/ bubble. It is not practical to expect hut users to wear masks while sleeping or eating in the huts (there is an exemption under the CPF framework for this) and it is difficult to physically distance. There was mixed compliance with mask wearing requirements, with very little compliance reported in some huts.
				Where possible, payments are only accepted online via the DOC booking system.	Minimising		
				Alcohol based hand sanitiser is provided at all serviced huts (out of reach of children).	Minimising		
				Posters on hand washing are prominent in the serviced huts and hand washing facilities are available in the bathrooms.	Minimising		
				Masks to be worn inside, however not when eating or sleeping.	Minimising		
				Air Ventilation (which exchanges old air for fresh air) – opening of windows and doors to enable free flow of air and introduce fresh air for at least 15 minutes. ⁶	Minimising		
				Auto-emails from the booking system advise visitors with bookings of 'need to know before you go' information including link to DOC's website COVID-19 information and local safety information.	Minimising		
				DOC's COVID-19 public health measures are communicated to people via DOC's website, social media channels and at Visitor Centres.	Minimising		
				DOC encourages visitors to carry out their own risk assessment with guidance on what to consider on DOC's website.	Minimising	Some visitors advised DOC that they had tested positive for COVID-19 after returning from their stay, workers were informed and some huts closed briefly for deep cleaning.	

⁶ <https://www.health.govt.nz/covid-19-novel-coronavirus/covid-19-health-advice-public/covid-19-ventilation>

Hazard	Harm the hazard could cause	Inherent likelihood that the harm would occur ¹	Level of inherent risk (consequence)	Control measures currently in place ²	Are the controls eliminating or minimising the risk?	Unless stated the control measures are effective and fit for purpose so far as is reasonably practicable:	Comments
DOC workers becoming infected or transmitting COVID-19 by Exposure to airborne transmission opportunities/ close contacts via direct contact between people (e.g., from visitors who are infected)	Workers or other visitors contracting COVID-19 (which could result in serious illness or death) and in turn transmitting to others.	As above. Hut wardens live on site which increases their risk and as they interact with almost all visitors during their stay this increases the risk to themselves and to others. In winter the risk profile for workers is lower as most huts do not have wardens over this period and there are fewer visitors. However, NZ may see a rise in Omicron infections over winter so the risk is not eliminated as some workers will still carry out work on site at huts during this period. ⁸ Situations where wardens are required to undertake medical first aid and providing direct physical assistance to accommodation users also increases the risk of infection and transmission (and harm).	High	As from 4 May 2022, DOC staff are not required to provide proof of vaccination (previously applied to hut wardens and had to hold a valid My Vaccine Pass). ⁹	Eliminating/ Minimising (1/2 – 4/5/22)	See above re My Vaccine Pass. All DOC staff who worked in the huts between 1 February 2022 and 4 May 2022 were required to have My Vaccine Pass. ¹² Proof of vaccination has been suspended.	All DOC workers (including volunteers) were required to be fully vaccinated while DOC's organisational vaccination policy was in place between 1 February 2022 and 4 May 2022. This policy and proof of vaccination is currently suspended. There is significant reduced visitor demand and some seasonal closures over winter which will require less staff time at sites – this will also mitigate (if not eliminate) risk in some huts). The risk profile for DOC workers who are not public facing but undertake servicing tasks such as maintenance and cleaning is less than that for DOC workers who deal with the public. However, they are also less likely to spend time in the huts, need not be in close proximity with the public and have access to PPE. There is still a risk of encountering infected surfaces and airborne virus particles in the areas which they clean. Ventilation is an important control measure to maintain during cleaning. Over the Omicron peak period some workers did contract COVID-19 so the risk profile and control measures will need to be reassessed before we move into the coming peak season. The current traffic light settings are due for review at the end of June 2022. An additional factor to consider will be the fully reopened borders by 31 July 2022 (including the maritime border).
				Workers have been briefed on symptoms of COVID-19 and have been told to stay home if they are showing symptoms.	Eliminating		
				If workers are a close or household contact of a COVID-19 positive case, workers are required to stay home and isolate for 7 days.	Eliminating		
				Workers have been trained on appropriate measures to take.	Minimising		
				Rapid Antigen Tests (RATs) will be supplied to some staff that are working alone in remote locations where access to RAT kits is difficult logistically. ¹⁰	Minimising		
				If a worker becomes unwell at work, a process is in place to isolate them and arrange for them to be sent home to receive medical attention. District teams have a completed business continuity planning which will provide direction on process to follow.	Minimising		
				Workers don't have contact with contractors ¹¹ or other DOC staff who undertake cleaning/servicing.	Minimising		
				Where worker meetings are required, they are held indoors / outdoors with 1m distancing and masks are worn.	Minimising		
Where possible, break times are staggered to minimise the number of workers using break room at one time.	Minimising	No longer required to distance. Must follow applicable DOC Mask Guidance / SOP.					
						No longer required.	

⁸ While daily cases numbers have flattened nationally, they have been beginning to increase in the Northern region and hospitalisation rates have also increased slightly. In addition Covid-19 modelling indicates that under current conditions, there is a likelihood of a secondary wave of cases appearing. <https://www.nzherald.co.nz/nz/covid-19-omicron-outbreak-nz-remains-at-orange-traffic-light-setting-second-wave-of-virus-expected-over-winter/ZSTK2RJQSIQQN3FHG2K7A5D5BI/>

⁹ Vaccination of workers was a separate risk assessment

¹⁰ <http://intranet/about-DOC/covid-19-information-hub/rapid-antigen-tests-rats/>

¹¹ Contractors present a similar risk profile to that of DOC staff undertaking servicing or maintenance. Contractors are required to have an appropriate COVID-19 health and safety plan to manage the risks associated with COVID-19.

¹² Vaccination of workers was a separate risk assessment

Hazard	Harm the hazard could cause	Inherent likelihood that the harm would occur ¹	Level of inherent risk (consequence)	Control measures currently in place ²	Are the controls eliminating or minimising the risk?	Unless stated the control measures are effective and fit for purpose so far as is reasonably practicable:	Comments
				Other control measures as above for visitors (including masks, general cleaning, and disinfecting).	Minimising		
Visitor aggression at huts	Physical or psychological injury to DOC workers.	Possible - likelihood of visitor aggression could occur at some point as COVID-19 fatigue occurs.	Medium	<p>Visitor-facing staff are provided with de-escalation training as part of their role. A staff safety information sheet is available for staff¹³</p> <p>DOC huts experience reduced visitor demand outside summer/autumn peak, meaning less staff time spent at huts across network and less time interacting with visitors.</p> <p>Each site should have localised safety protocols to be acted on in case of aggressive behaviour from visitors.</p> <p>All incidents of aggressive behaviours to be reported to manager as soon as possible and contact details of the aggressive visitor can be located within the booking system.</p> <p>Processes are in place to ban abusive and violent visitors or call NZ Police.</p> <p>Staff have access to psychological support through an EAP.</p>	<p>Minimising</p> <p>Minimising</p> <p>Minimising</p> <p>Minimising</p> <p>Minimising</p> <p>Minimising</p>		There have been a few incidents of visitor aggression which have been handled appropriately in accordance with DOC procedures. The risk to workers at huts is lower over the off-season as most huts do not have wardens. The current suspension of the My Vaccine Pass may also have reduced visitor aggression.

¹³ Staff safety information for implementing the COVID-19 Visitor Accommodation Vaccination Policy - [DOC-6855667](#)

Description: DOC Campsites

Date: 31/05/2022 [updated 7/6/2022]

Hazard	Harm the hazard could cause	Inherent likelihood that the harm would occur	Level of inherent risk (consequence)	Control measures currently in place	Are the controls eliminating or minimising the risk?	Unless stated the control measures are effective and fit for purpose so far as is reasonably practicable:	Comments (See above)		
DOC workers and/or visitors becoming infected or transmitting COVID-19 by: Exposure to airborne transmission opportunities/ Close contacts via direct contact between people (e.g., from visitors who are infected)	Workers and/or visitors contracting COVID-19 (which could result in serious illness or death) and in turn transmitting to others.	Likelihood of infection occurring is possible as people move between the regions to travel to the campsites. At campsites visitors tend to sleep and mostly interact in their own bubbles and are more frequently in the open air (tents, motorhomes etc) or in an outdoor setting. Common indoor areas such as ablution blocks and kitchen facilities are areas where the risk of harm is increased but these tend to be used sporadically by campsite users. We expect time spent outdoors in unsheltered open-air facilities will be reduced over winter due to the weather. During winter there are fewer visitors to campsites, especially in colder regions and during bad weather, as well a small number of campsites are closed. Fewer people camp in tents in winter, with stays in vehicles and motorhomes preferred. There will be significantly reduced visitor occupancy in winter, with low booking numbers for bookable sites currently. ¹⁴ People tend to book close to the time of stay due to the weather.	Medium	Visitors/ workers are encouraged to stay at home if showing symptoms.	Eliminating	See above re My Vaccine Pass	During the Omicron peak two campsites were closed for a period given the potential impact of unvaccinated visitors on the communities surrounding or adjacent to the campsites.		
				Significantly reduced visitor demand and occupancy outside of summer peak. ¹⁵	Eliminating				
				Localised controls are available to DOC workers to close campsites as required.	Eliminating				
				Localised controls are available to DOC workers to reduce capacity at campsites as required.	Minimising				
				As above for huts, from 4 May 2022 workers and visitors are currently not required to provide proof of vaccination.	Eliminating/minimising				
				Cleaning and disinfecting frequently touched communal surfaces.	Minimising				
				Physical distancing – DOC workers and visitors at least 1m apart from each other. No more than the permitted number of visitors are allowed into the indoor communal areas at any one time to allow for physical distancing (this may result in reduced capacity in some indoor settings), and signs placed around the campsite advising of these rules.	Minimising			No longer required.	Physical distancing not required at campsites. People tend to interact in their own bubbles. DOC will continue to promote the applicable traffic light setting guidance to visitors and advise that people should keep a safe distance from people they don't know. There are no capacity limits under Orange for accommodation or gatherings.
				Where possible, payments are accepted online.	Minimising				
Posters on hand washing are prominent around the campsite and hand washing facilities are available in the bathrooms.	Minimising								

¹⁴ All 300 bookable campsites are open all year round, except for 4 campsites (Anaura Bay, Peel Forest, Waikahoa Bay, and West Kerr Bay, which close for periods over winter). Almost all campsites experience significantly reduced occupancy outside the peak summer period, especially in the central and lower North Island and South Island.

Hazard	Harm the hazard could cause	Inherent likelihood that the harm would occur	Level of inherent risk (consequence)	Control measures currently in place	Are the controls eliminating or minimising the risk?	Unless stated the control measures are effective and fit for purpose so far as is reasonably practicable:	Comments (See above)
		On-site managers are likely to have their own accommodation and able to limit and control their interaction with visitors. The risk to them arises from sharing ablution and toilet facilities.		Masks to be worn inside facilities. Other controls for workers – as above described for huts.	Minimising Minimising		
Visitor aggression at campsites	Physical or psychological injury to DOC workers.	Possible - likelihood of visitor aggression could occur at some point as COVID-19 fatigue occurs.	Medium	Visitor-facing staff are provided with de-escalation training as part of their role. A staff safety information sheet is available for staff ¹⁶ DOC campsites experience reduced visitor demand outside summer/autumn peak, meaning less staff time spent at campsites and less time interacting with visitors. Each campsite should have localised safety protocols to be acted on in case of aggressive behaviour from visitors. All incidents of aggressive behaviours to be reported to manager as soon as possible and contact details of the aggressive visitor can be located within the booking system. Processes are in place to ban abusive and violent visitors or call NZ Police. Staff have access to psychological support through an EAP.	Minimising Minimising Minimising Minimising Minimising		There have been a few incidents of visitor aggression which have been handled appropriately in accordance with DOC procedures. The risk to workers at campsites is lower over the off-season as visitation is reduced. The current suspension of the My Vaccine Pass may also have reduced visitor aggression.

¹⁶ Staff safety information for implementing the COVID-19 Visitor Accommodation Vaccination Policy - [DOC-6855667](#)

Description: Sole occupancy lodges and accommodation

Date: 31/05/2022 [updated 7/6/2022]

Hazard	Harm the hazard could cause	Inherent likelihood that the harm would occur	Level of inherent risk (consequence)	Control measures currently in place	Are the controls eliminating or minimising the risk?	Unless stated the control measures are effective and fit for purpose so far as is reasonably practicable:	Comments
<p>Visitors/ DOC workers becoming infected or transmitting COVID-19 by: Exposure to airborne transmission opportunities/ Close contacts via direct contact between people (e.g., from visitors who are infected)</p>	<p>Workers or other visitors contracting COVID-19 (which could result in serious illness or death) and in turn transmitting to others.</p>	<p>Unlikely as sole-occupancy accommodation is booked exclusively and there is no or very limited interaction with DOC workers in many instances. There is a possible likelihood of harm to workers who arrive to clean arising from airborne particles or surfaces where visitors have not been regularly disinfecting or cleaning, but this would reduce to unlikely if the accommodation is kept cleaned and disinfected as required by the terms of the booking, and ventilation guidance is followed.</p>	<p>Minor</p>	<p>Visitors are encouraged to stay home if showing symptoms.</p>	Eliminating	<p>See above re My Vaccine Pass</p>	<p>Cleaning and disinfecting between occupancies needs to be thorough and in accordance with MoH guidance. Those cleaning need to wear masks inside. Ventilation continues to be an important control.</p>
				<p>As above for huts, from 4 May 2022 workers and visitors are currently not required to provide proof of vaccination.</p>	Eliminating/ Minimising		
				<p>Cleaning and disinfecting by visitors while staying in the accommodation.</p>	Minimising		
				<p>A thorough clean is undertaken of the property by staff at the conclusion of each stay.</p>	Minimising		
				<p>Physical distancing – workers and visitors at least 1m apart from each other. No more than the permitted number of visitors are allowed into the house at any one time to allow for physical distancing and signs placed around the property advising of these rules.</p>	Minimising		
<p>Ventilation – as above for huts.</p>	Minimising						

Description: **Conclusions and Recommendations**

Date: **31/05/2022 [updated 7/6/2022]**

This review was undertaken by 31 May 2022 and has been updated since then. It is important to keep up to date with the pandemic and to adapt and as rules change. A review by the Government of the CPF Framework is expected at the end of the month. If there are any material changes (e.g. change in traffic light setting) then we will review this risk assessment.

DOC accommodation still remains our highest risk facilities because they are shared spaces, often in remote locations, off the grid and bring people together from all locations. The initial COVID-19 health and safety risk assessment for visitors¹⁷ was undertaken in a Delta environment at a time when many of the population were unvaccinated. Our initial focus and the then MoH advice was on transmission of Delta which is highly transmissible and carries a risk of harm (severe disease such as hospitalisation, severe illness, and death). Our initial health and safety risk assessment was based on multiple layered control measures which included following MoH guidelines, sanitising or washing hands regularly, where practical wearing a mask and physically distancing around others and staying home if unwell. Relying on advice from MoH, the risk assessment determined that vaccination against Delta also presented a higher level of protection as a control measure and significantly moved the profile of risk down in terms of likelihood of transmission and severity of consequence. Consequently, DOC's COVID-19 Visitor Accommodation Vaccination Policy which came into effect from 15 December 2021 required all visitors to PCL&W aged 12.3 years + who are accessing DOC accommodation to be fully vaccinated¹⁸ and have proof of their vaccination status by way of the My Vaccine Pass. People staying in DOC huts or campsites were also encouraged to undertake their own risk assessments for themselves and their group. The control measures we implemented have been effective and fit for purpose.

The last review we undertook noted that since the original risk assessment was conducted, Delta has been overtaken by the Omicron BA.2 sublineage in New Zealand and it is increasingly widespread in New Zealand with the Omicron peak in Auckland and smaller waves expected. This means the COVID-19 risk profile has moved. This remains the case. Experts are advising that Omicron, an even more highly transmissible COVID-19 variant means that a threat exists for both vaccinated and unvaccinated people; the MoH continues to advise that people who are fully vaccinated have less protection against transmission of Omicron than for Delta, but that vaccination still offers some protection. The MoH also advises that protection against infection with either Delta or Omicron decreases over time. Omicron can still cause severe illness and even death especially in people who are at risk of severe outcomes. MoH advice is that getting boosted continues to be one of the most important ways people can protect themselves from Omicron and severe disease. There is a much lower risk of being hospitalised if up to date with vaccinations which for Omicron includes a third of booster dose if eligible¹⁹. As community transmission of Omicron increases, it is less likely there will be a greater risk of COVID-19 in DOC visitor accommodation than there is in the community.

Some specialist medical and scientific experts including the MoH continue to advise that New Zealanders need to plan for and expect further variants as the COVID-19 virus will continue to adapt to survive, and they continue to warn us that Omicron is not to be underestimated as the impact on the body or the impact of long COVID-19 is not fully understood. Equally, WHO has retained the designation of variant of concern for Delta. A recently published study on wastewater surveillance in Israel found that Delta is highly resilient and continued to be detected at low levels even at the height of the Omicron wave. Such 'cryptic circulation' could possibly result in the re-emergence of a Delta wave of generation of a new variant.²⁰

Border controls are changing. Previously the Government stated it no longer required incoming vaccinated New Zealanders and other vaccinated travellers to self-isolate on entry to New Zealand. Australian tourists who are vaccinated have been able to travel to New Zealand from 12 April 2022. These changes introduced an increased level of risk to New Zealanders as these people may be asymptomatic, but they bring with them the risk of seasonal illnesses including the super cold some Australians are experiencing. The New Zealand border will be fully opened by 11:59 pm on 31 July 2022 (including the maritime border).

Changes were also made to the way close and household contacts are managed by MoH under Omicron Phase 3 Red and then Orange which increases the likelihood of an infectious person being in the community, and hence increasing transmission in the community but significantly this also increases population or herd immunity.

CVCs are no longer a requirement at any traffic light setting since 4 April 2022 at 11:59pm. This is irrespective of what traffic light setting is in place, currently at the date of this review – the setting remains at Orange. The technology for My Vaccine Passes has remained available (and has been updated to include boosters) but there is currently no mandate requiring its use. The rationale for this change by the Government was that we have moved past the point where CVCs are most effective. This approach was taken by the Government considering the high vaccination rate (at the time of our last review 95.1% of eligible New Zealanders were vaccinated which meant many people may not have had symptoms at all but were still able to pass on the virus to others), there were (and continue to be) high levels of acquired immunity from the Omicron outbreak and given the features of Omicron. We know that Omicron BA.2 breaks through the vaccination barrier. However, MoH continues to advise that vaccination (including boosters) is strongly recommended as one of the key public health measures and it provides significant benefits. The Government has indicated that CVCs could become mandatory again in the future if there are different variants or circumstances change. BA.4 and BA.5 are Omicron sub-lineages that were first detected in South Africa earlier in the year and are now the dominant variants there; it has since been detected at the NZ border. These variants have a growth advantage over the earlier Omicron variants due to their ability to evade immune protection induced by prior infection and/or vaccination, particularly if this has waned over time.²¹

DOC is still able to close accommodation (and has guidance for this) where there is a high risk that is not easily mitigated and is required to work with iwi, communities, and campsite managers to assess risk for specific sites and support them regarding restrictions or closures needed for public safety. We are very mindful and have always said that we cannot predict the future with any certainty as to how the pandemic will unfold. We act on best, most up to date official information available, remain vigilant, keep the health and safety risk assessment under review and ourselves briefed on most up to date health advice from the MoH. Currently, the MoH is reporting 10,191 community cases in the past two days, 371 current hospitalisations, and 14 deaths for the past two days. The seven-day rolling average of community cases today is 6,202.²²

Considering the matters referred to above and bearing in mind we are in the winter season which usually means fewer people in our accommodation (some of which will be already seasonally closed), this review supports retention of all existing control measures in DOC accommodation that is open to the public and/or our workers except for the requirement to provide proof of vaccination status for entry and the 1m physical distancing (as these are no longer required at the Orange traffic light setting.) The rapidly changing nature of COVID-19 means we should retain the ability to require CVCs in the future.

Recommendations:

- (1) As per last review - Visitors to DOC accommodation be permitted entry without having to provide proof of vaccination status with a My Vaccine Pass.
- (2) As per last review - Retention of the current Vaccination Policy and the ability to use CVCs as part of health and safety.
- (3) Continue with the suspension of the DOC Visitor Accommodation Vaccination Policy.
- (4) As per last review - Continue to monitor official health advice and observe current health risk levels in the community, noting the Government's review of the traffic light settings at the end of June.
- (5) Undertake a further review of the risk assessment prior to Spring and the Huts re-opening which are currently closed (unless there is a need to undertake this sooner).

¹⁷ DOC-6860783

¹⁸ As of 12 March 2022, at 11:59pm, students attending activities organised by a registered school are not required to provide proof of vaccination.

¹⁹ <https://www.health.govt.nz/covid-19-novel-coronavirus/covid-19-health-advice-public/about-covid-19/covid-19-about-omicron-variant>

²⁰ MOH Science Update "SARS-Cov-2 Variants Update" published 23 May 2022: <https://www.health.govt.nz/covid-19-novel-coronavirus/covid-19-resources-and-tools/covid-19-science-news#variants>

²¹ See footnote 20 above.

²² <https://www.health.govt.nz/news-media/news-items/10191-community-cases-two-days-371-hospitalisations-9-icu-14-deaths-two-days>

APPENDIX

Hierarchy of Controls

