Aide-mémoire

MINISTRY OF SOCIAL DEVELOPMENT
TE MANATŪ WHAKAHIATO ORA

Cabinet paper

Date:	14 February 2021	**Security Level:**	Cabinet Sensitive
For:	Hon Carmel Sepuloni, Minister for Social Development and Employment		

File Reference: TBC

Maximising uptake of COVID-19 vaccines

Cabinet Committee	Cabinet Business
Date of meeting	15 February 2021
Minister	Hon Carmel Sepuloni, Minister for Social Development
Proposal	The paper outlines the Government's approach to maximising the uptake of COVID-19 vaccines in the border and Managed Isolation and Quarantine (MIQ) workforces, who will be offered the vaccines first when supplies are limited.
	It also provides an overview of additional levers that may further increase vaccine uptake, including a potential vaccine leave support scheme.
	We recommend that you **support** the proposal, and that you **note** the advice below on the feasibility of implementing a vaccine leave support scheme.
Key issues	**The Government is taking a multifaceted approach to vaccine roll out**
	As the barriers to vaccination uptake are multifaceted and the border and MIQ workforce is diverse, the Ministry of Health is working on a number of areas to maximise uptake of COVID-19 vaccines. The Ministry of Health's COVID-19 Immunisation Strategy and Programme is being designed to proactively support the border and MIQ workforce to be vaccinated through:
	• stakeholder engagement – including targeted communications approaches with Māori.
	• communications – including targeted approaches to meet the information needs of New Zealand's diverse population, including border and MIQ workers with a range of

communication channels i.e. online, face-to-face and print collateral.

- service design – offering on-site vaccinations at workplaces, engaging with employers to encourage them to pay employees through the vaccination appointment and capturing information of household contacts for border workers to enable those contacts being invited to immunisation appointments

The paper outlines options to removing barriers for employers to support their workers to get vaccinated

The more accessible vaccinations are, the higher uptake will be. The paper notes that there may be a case for removing potential barriers or providing additional support to encourage the greatest possible vaccine uptake. Potential barriers to access could include opportunity cost-related barriers for workers and their household contacts, as well as work-related barriers.

Opportunity-cost related barriers to vaccination uptake could include workers and their household contacts having to travel to be vaccinated and the cost of their time. Options to incentivise uptake e.g. petrol vouchers to cover the cost of travel, have been canvassed as part of the service design for Tier 3 but could be applied to support uptake by people in Tier 1.

In terms of *work-related barriers* to vaccination uptake, the more accessible vaccination is, the less likely work-related issues are to impede uptake. Potential barriers could include workers not having paid leave to receive vaccination or having sick leave if they experience adverse reactions that require time off work.

Options to remove additional work-related barriers to vaccination range from encouraging employers to be supportive of vaccination, through to the introduction of leave schemes. Officials recommend that options which increase the accessibility of vaccination will be pursued first and prioritised over relying on financial incentives for employers and workers or legislative change. Officials do not think that a payment scheme will be required for Tier 1 because it is assumed that employers of border and MIQ workers are likely to provide paid time off to workers to receive vaccination.

The paper notes that there may be a case to provide additional financial support to encourage the greatest possible vaccine uptake across all tiers. Agencies will monitor the Tier 1a roll-out and assess whether further support (in the form of a payment scheme or legislative change) is needed.

A range of leave support schemes that could be considered are discussed in the paper – including the Leave Support Scheme and Short-Term Absence Payment administered by MSD. An indication from Cabinet is sought as to which options officials are required to progress further work on – including options to compensate employers to give workers paid time off to access a vaccination and compensate workers to take unpaid time off to access the vaccination.

Our advice	**We consider that that options to make the vaccine more accessible should be prioritised above financial incentives**

We consider that the focus of the roll-out should be on making the vaccine as accessible as possible in the community (such as through mobile clinics etc) as opposed to relying on financial incentives for employers/ individuals. We consider that any leave support style scheme should be the last resort, as opposed to the first response.

If a vaccine leave support scheme was required, MSD could implement a payment for employers

If Ministers consider that a leave support style scheme is needed to support the vaccine roll out, creating a new scheme that makes payments to employers would be the most feasible option.

Making payments to employers means that the scheme could be implemented using the same framework as the Leave Support Scheme (LSS), Short-Term Absence Payment (STAP) and Wage Subsidy Scheme (WSS) payments. This could be done using a similar 'high-trust' model (i.e. MSD would not verify whether an employee had actually had a vaccine with MoH), however would have some integrity measures built in (such as matching business information with IR).

If Ministers consider that a vaccine leave support scheme is required:

- the minimum amount of time required to implement a new payment for employers is five working days from the date detailed policy settings are agreed (however, ideally the lead in time would be much longer than this)
- this timeframe applies to either a new scheme for a vaccination payment or the ability to adapt the LSS to include an adverse reaction category (drop down box) and changes to the existing LSS declaration etc.
- this assumes that the payment is implemented using the existing high-trust model (used for LSS and STAP) and that the framework/rules in place for the payment are very similar to LSS/STAP.

Depending on the complexity of the payment, there may be trade-offs for MSD in delivering other work, which would need to be considered.

Implementing a vaccine payment to employees would be very complex and is not recommended

A scheme that would pay workers (rather than employers) would not be able to use the existing payment framework developed for the LSS, STAP and WSS and would be significantly more complex. This option is not recommended.

- This would involve significant risks including difficulty assessing validity of applications (for example, understanding whether people are actually employed). This is because standard upfront business verification checks done with IR (under the LSS and STAP

framework) would not be possible when payments are made directly to employees.

- Any payment to employees would need to involve an information sharing agreement between the Ministry of Health, Inland Revenue and MSD in order to confirm when someone has had a vaccination.

- Alternatively, another deliver agency other than MSD could be considered if Ministers want to pursue this option.

There is also an option to support workers who have adverse reactions to the vaccine

If Ministers consider that a payment is needed to support employers of workers who have adverse reactions, we anticipate that extending eligibility for the LSS could be a potential option (particularly if the time needed at home is 1-2 weeks).

Any new scheme would have administrative and resourcing implications for MSD. Further work would need to be done to understand the trade-offs for delivering other commitments (when weighed against other Government priorities).

Author: (Megan Beecroft, Policy Manager Employment and Housing policy)

Responsible manager: (Megan Beecroft, Policy Manager Employment and Housing policy)