Hon Dr Shane Reti

Minister of Health Minister for Pacific Peoples



1 2 DEC 2024

M Bell

Email: fyi-request-28128-9233c12f@requests.fyi.org.nz

SROIA-244 Ref:

Dear M Bell

Reconsidered response to your request for information

I refer to your request under the Official Information Act 1982 (the Act) on 16 September 2024. Following correspondence with the Office of the Ombudsman (reference 016441), this office has agreed to reconsider our earlier response. You requested:

"Further to your OIA response SROIA 032 (documents 2 and 3), please provide the rest of the emails previously designated as "out of scope" with respect to the specific question I had previously asked.

For clarity the document 2 email is printed showing.

Sent: Thursday, 30 November 2023 5:16pm

Subject: Email from S9(2)(a)

Please also provide the attachments that were listed.

For clarity the document 3 email is printed showing.

Sent: Friday, 1 December 2023 9:42 am

Subject: FW: DISCLOSURE incident - approach for a proactive release

Please provide these email documents with the "out of scope" sections displayed and including the attachments.

Please find the documents requested itemised in Appendix 1 to this letter, which also outlines the grounds under which information has been withheld. Where information is withheld under section 9 of the Act, we have considered the countervailing public interest in release of the information and consider it does not outweigh the need to withhold at this time

I trust this satisfies 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. The Ombudsman may be contacted by email at: info@ombudsman.parliament.nz or by calling 0800 802 602.

Yours sincerely

Jonathan Franklin

Senior Ministerial Advisor

Appendix 1: List of items in scope

#	Date	Title	Decision on release
1	30 November 2023	Email correspondence	Some information withheld under section 9(2)(g)(ii) of the Act, to maintain the effective conduct of public affairs through the protection of Ministers, members of organisations, officers, and employees from improper pressure or harassment.
2	30 November 2023	Email correspondence	Some information withheld under the following sections of the Act: • 6(c), as its release would likely prejudice the maintenance of the law, including the prevention, investigation, and detection of offences, and the right to a fair trial; • 9(2)(a), to protect the privacy of natural persons; • 9(2)(g)(ii); and • 9(2)(h), to maintain legal professional privilege. Attachments withheld in full under section 9(2)(a) of the Act.
3	1 December 2023	Email correspondence	Some information withheld under the following sections of the Act: • 6(c); • 9(2)(a); and • 9(2)(g)(ii).

From: s 9(2)(g)(ii)

Sent: Thursday, 30 November 2023 12:39 pm

To: s 9(2)(g)(ii)

Subject: Email by TWO staff member

Hi s 9(2)(g)(ii)

As discussed I can confirm TWO leadership are aware of the email and steps are being taken internally in regard to it. Also please see below our messaging on COVID 19 deaths.

LINES

There is no evidence that vaccination is responsible for excess mortality in New Zealand.

Publicly available data shows that four deaths in New Zealand are possibly linked to adverse reactions following COVID-19 vaccination.

This is in the context of 3,361 people whose deaths have to date been directly attributed to COVID-19 in New Zealand, with more than 12.6 million vaccines administered to eligible New Zealanders as of 2 October 2023.

By chance and separate to a prior COVID-19 vaccination event, some people will experience new illnesses or die from a pre-existing condition shortly after vaccination, especially if they are elderly.

The Centre for Adverse Reactions Monitoring (CARM) and Medsafe have investigated these deaths.

In addition to this, the COVID-19 Vaccine Independent Safety Monitoring Board (CV-ISMB) has compared natural death rates to observed death rates following vaccination.

In the monitoring period for the Pfizer/ BioNTech COVID-19 vaccine (19 February 2021 to 30 September 2022), the observed number of deaths was less than the expected number of natural deaths.

More information about this can be found here: Who we're working with - Te Whatu Ora - Health New Zealand

In the meantime, we all have a responsibility to stop misinformation spreading, and encourage people to only go to trusted sources to get reliable information.

We also continue to encourage media organisations and social media companies to continue to be proactive in helping to manage misinformation.

One of the best ways to stop misinformation from spreading is by only sharing information from official sources like Te Whatu Ora, the Ministry of Health, health providers, or reputable peer-reviewed scientific journal publications. More information about New Zealand's adverse event reporting can be found here: https://www.medsafe.govt.nz/COVID-19/vaccine-report-overview.asp

Covid-19 vaccination data can also be found here: https://www.tewhatuora.govt.nz/our-health-system/data-and-statistics/covid-vaccine-data/

ENDS

s 9(2)(g)(ii)



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s 9(2)(g)(ii) From: Thursday, 30 November 2023 5:16 pm s 9(2)(g)(ii) Sent: To: s 9(2)(g)(ii) Cc: Email from^{s 9(2)(a), s 6(c)} Subject: processed-D78EA078-1BE8-426F-A135-F353C1DEF4AA-C198BDB7-56A5-48BC-**Attachments:** A5E2-86C02E15CA5C.jpeg; processed-54C5CED8-E420-4203-9364-896FC1BFE7C5-9F850E0A-86B3-4983-A8FF-8D7765256053.jpeq s 9(2)(g)(ii) – further to discussions re email from $^{\text{S 9(2)(a), S 6(c)}}$ to multiple MPs. Margie spoke to the Minister on this matter earlier. A few points below so we're all joined up - please note the first set is close-hold information (not public messaging). We have a tight internal group meeting no less than twice a day on this, to manage the incident and ensure actions are advanced or completed. We also keeping Margie briefed. As earlier mentioned \$\frac{5 9(2)(g)(ii)}{},\$ we understand that the office has discussed this matter with PMO as to whether any further steps may be required from your end for MP recipients of the email. >>>>>> Background information – NOT for external use s 9(2)(a) s 9(2)(a) s 9(2)(a) s 9(2)(a) We have also removed access to databases. s 6(c) s 6(c)

Given the risk to other people's personal information (a threat to release data), we are pursuing an urgent court injunction to prohibit disclosure or use of information use, as well as return equipment and delete any work information on personal devices.

Key communications messages at this time (reactive as required)

- We take the security of the information we hold extremely seriously
- As soon as we became aware of the email, we took immediate steps to investigate and respond
- We immediately blocked the staff member's access to our systems
- We began assessing what information may have been accessed
- At this stage, we haven't seen evidence to suggest personal data has been downloaded
- s 6(c), s 9(2)(a)
- We are seeking a court injunction as a precaution to prevent any information that may be held from being publicly disclosed
- 6(c), s 9(2)(a)

Core messages on COVID vaccination (the subject of the email)

- There is no evidence that vaccination is responsible for excess mortality in New Zealand.
- Publicly available data shows that four deaths in New Zealand are possibly linked to adverse reactions following COVID-19 vaccination.
- This is in the context of 3,361 people whose deaths have to date been directly attributed to COVID-19 in New Zealand, with more than 12.6 million vaccines administered to eligible New Zealanders as of 2 October 2023.
- By chance and separate to a prior COVID-19 vaccination event, some people will experience new illnesses or die from a pre-existing condition shortly after vaccination, especially if they are elderly.
- The Centre for Adverse Reactions Monitoring (CARM) and Medsafe have investigated these deaths.
- In addition to this, the COVID-19 Vaccine Independent Safety Monitoring Board (CV-ISMB) has compared natural death rates to observed death rates following vaccination.
- In the monitoring period for the Pfizer/ BioNTech COVID-19 vaccine (19 February 2021 to 30 September 2022), the observed number of deaths was less than the expected number of natural deaths.



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Statement of confidentiality: This e-mail message and any accompanying attachments may contain information that is IN-CONFIDENCE and subject to legal privilege.

From: s 9(2)(g)(ii)

Sent: Friday, 1 December 2023 9:42 am

To: s 9(2)(g)(ii)

Subject: FW: DISCLOSURE incident - approach for a proactive release

Proactive

We remind people that vaccines remain safe and effective and that they should keep up to date with their shots to protect themselves, whanau and their communities.

We are aware that one of our staff, with no clinical background or expert vaccine knowledge, is trying to spread misinformation.

What he is claiming is completely wrong and ill-informed and his comments demonstrate this.

Sadly, we have continued to see conspiracy theorists disseminating false and harmful misinformation.

We assure people there is no evidence whatsoever that vaccination is responsible for excess mortality in New Zealand and that they can continue to have confidence in vaccines.

Publicly available data shows that four deaths in New Zealand are possibly linked to adverse reactions following COVID-19 vaccination. This is in the context of 3,361 people whose deaths have to date been directly attributed to COVID-19 in New Zealand, with more than 12.6 million vaccines administered to eligible New Zealanders as of 2 October 2023.

By chance, and separate to a prior COVID-19 vaccination event, some people will experience new illnesses or die from a pre-existing condition shortly after vaccination, especially if they are elderly. The Centre for Adverse Reactions Monitoring (CARM) and Medsafe have investigated these deaths.

In addition to this, the COVID-19 Vaccine Independent Safety Monitoring Board (CV-ISMB) has compared natural death rates to observed death rates following vaccination.

In the monitoring period for the Pfizer/ BioNTech COVID-19 vaccine (19 February 2021 to 30 September 2022), the observed number of deaths was less than the expected number of natural deaths.

It is extremely disappointing to see a staff member trying to misuse our data to spread misinformation. He is no longer at work and an employment investigation is underway.

Reactive

Primary messaging:

- We're extremely disappointed at the behaviour of this staff member what he is claiming is completely wrong and ill-informed.
- He has no medical background or expert knowledge, and his comments demonstrate this.
- s 6(c) s 9(2)(a)
- There are many conspiracy theorists out there unfortunately who disseminate harmful disinformation.
- The public can and should continue to have confidence in vaccines.
- There is no evidence whatsoever that vaccination is responsible for excess mortality in New Zealand.

Secondary messaging:

- We take the security of the information we hold extremely seriously and this is a significant breach of trust.
- As soon as we became aware of what he was up to we took immediate steps to investigate and respond.
- We blocked his access to our systems and began assessing what information may have been accessed.

- At this stage we haven't seen evidence to suggest personal data has been downloaded and s 6(c), s 9(2)(a)
- We are seeking a court injunction over the improper and unauthorised public disclosure and use of the information.
- Publicly available data shows that four deaths in New Zealand are possibly linked to adverse reactions following COVID-19 vaccination.
- This is in the context of 3,361 people whose deaths have to date been directly attributed to COVID-19 in New Zealand, with more than 12.6 million vaccines administered to eligible New Zealanders as of 2 October 2023.
- By chance and separate to a prior COVID-19 vaccination event, some people will experience new illnesses or die from a pre-existing condition shortly after vaccination, especially if they are elderly.
- The Centre for Adverse Reactions Monitoring (CARM) and Medsafe have investigated these deaths.
- In addition to this, the COVID-19 Vaccine Independent Safety Monitoring Board (CV-ISMB) has compared natural death rates to observed death rates following vaccination.
- In the monitoring period for the Pfizer/ BioNTech COVID-19 vaccine (19 February 2021 to 30 September 2022), the observed number of deaths was less than the expected number of natural deaths.

s 9(2)(a)

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