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## COVID-19 Inquiry Pānui

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## A word from our Chair, Professor Tony Blakely



Kia ora koutou,

I'm pleased to report that we're making good progress. Our focus in May and June has been on analysing the extensive amount of information received by the Inquiry to date – over 100,000 pages of written evidence, nearly 13,000 public

submissions, and perspectives and experiences obtained from direct evidence gathering engagements with over 1,600 people. All this information is being carefully considered as we turn our attention to the development of our report and identifying key findings and developing recommendations.

The Inquiry also continues to hold direct engagements to ensure we have a complete picture of the COVID-19 response and that our recommendations, once finalised, help ensure that Aotearoa New Zealand is as prepared as possible for a future pandemic. If you're not that familiar with the work of the Inquiry to date, or would like to see more detail, you can view a timeline of our work so far in this latest newsletter.

As an Inquiry, we recognise that our work is not being undertaken in a vacuum, and it's important that we connect with, and receive information that comes to light that is relevant to our work. Many of you will have seen the recent news coverage about the Health and Disability Commissioner's investigation into the death of Rory Nairn as a result of myocarditis caused by the Comirnaty™ Pfizer/BioNTech COVID-19 vaccine. Our sincere sympathies go out to Rory's family for their loss.

I'm very grateful to the Commissioner for sharing their report with the Inquiry. The evidence and recommendations provided in this case will help to inform findings and lessons for any future pandemics, especially in terms of the provision of information, and consent and follow-up as part of the roll-out of a vaccine programme. The role of communications and engagement to support health outcomes during the pandemic is a key focus of the work of the Inquiry.

You may also have seen recent news reports about the spread of H5N1 bird flu into mammals.

Humans can and do catch H5N1, with about 900 reported cases of this type of bird flu (and nearly 500 deaths) since 2003. Nearly all known cases have been transmitted straight from birds to humans, which is why there have been so few cases – fortunately, human-to-human spread of H5N1 is incredibly rare and to our knowledge only occurs with intense close contact (e.g. caring for a severely unwell patient). Airborne human-to-human transmission in a manner similar to COVID-19 or seasonal influenza has not been documented. However, we have recently seen a rise in cases in other mammals, and we have also seen mammals, particularly cows, spreading it to each other. The world is alert to the

risk that H5N1 may mutate to a variant capable of human-to-human airborne transmission.

The other risk in Aotearoa is, of course, to our native birds. H5N1 has caused the death of hundreds of millions of birds worldwide, and so poses a real risk to our native wildlife.

There hasn't been a recorded case of H5N1 in Aotearoa, and we do have protocols and plans in place to monitor this disease.

This recent development is a timely reminder that the threat of a future pandemic is real. It is not a matter of "if" but "when" the next pandemic occurs. It's vital, from an Inquiry perspective, that we have the right systems in place to ensure that any future pandemic, whether it is caused by H5N1 or another virus, can be managed safely and successfully for everyone in Aotearoa New Zealand.

As you may be aware from media reports, and from my last update, the Government is reviewing our terms of reference. Our current terms of reference are broad enough to allow us to look at a wide range of COVID-19 related topics, like mandates and lockdowns, and social impacts such as the impact on education and mental health, but we recognise there may be specific topics that people would like considered and which could be included, or clarified. Ministers have indicated they are likely to make a decision by the end of this month, and we will provide you with an update when we have further information.

We hope you find this update useful, and we look forward to sharing more about the work of the Inquiry in our next update.

Heoi ano ra,



Professor Tony Blakely

Royal Commission Chair

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# An update on direct engagements

The Inquiry continues to gather evidence and experiences of the pandemic through direct engagements across Aotearoa New Zealand. As the Inquiry analyses the information we have received so far, these continuing engagements ensure that the Inquiry hears a wide range of perspectives on the pandemic and how, as a country, we can plan and prepare for any future pandemics.

You can view the list of the Inquiry's engagements to date [on our website](#).

Earlier in the year the Inquiry also travelled to Ōtepoti Dunedin to meet with representatives from a range of communities, including ethnic communities and the disabled community. Thank you to those who attended these engagements, and to those who shared their thoughts with us in the video diary below.



# The Inquiry's progress so far

NZ ROYAL COMMISSION  
COVID-19 LESSONS LEARNED  
TE TIRA ĀRAI URUTĀ



## Inquiry timeline

### Ngā wātaka o Te Uiui

This page outlines a timeline of the Inquiry's activities so far and into the future.

## Timeline of the Royal Commission of Inquiry into COVID-19 Lessons Learned | Te Tira Ārai Urutā

As of June 2023, the Inquiry has:

- Held 365 evidence gathering engagements with over 1,600 people.
- Received and analysed over 100,000 pages of evidence.
- Received and reviewed 13,000 public submissions.

View the full timeline of the Inquiry [on our website](#).

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